## BEFORE THE POLLUTION CONTROL BOARD OF THE STATE OF ILLINOIS

MARTIN AND BAYLEY, INC.,	)	
Petitioner,	)	
	)	
V.	)	PCB 2019-055
	)	(LUST Appeal)
ILLINOIS ENVIRONMENTAL	)	
PROTECTION AGENCY,	)	
Respondent.	)	

## **NOTICE**

Don Brown, Clerk Illinois Pollution Control Board James R. Thompson Center 100 West Randolph, Suite 11-500 Chicago, IL 60601 <u>don.brown@illinois.gov</u>

Patrick D. Shaw Law Office of Patrick D. Shaw 80 Bellerive Road Springfield, IL 62704 pdshaw1law@gmail.com Carol Webb, Hearing Officer Illinois Pollution Control Board 1021 North Grand Avenue East P.O. Box 19274 Springfield, IL 62794-9274 carol.webb@illinois.gov

**PLEASE TAKE NOTICE** that I have today filed with the office of the Clerk of the Pollution Control Board an **APPEARANCE**, the **ADMINISTRATIVE RECORD** and a **CERTIFICATE OF RECORD ON APPEAL**, copies of which are herewith served upon you.

Respectfully submitted,

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY, Respondent

Melaniet

Melanie A. Jarvis Assistant Counsel Division of Legal Counsel 1021 North Grand Avenue, East P.O. Box 19276 Springfield, Illinois 62794-9276 217/782-5544 866/273-5488 (TDD) Dated: February 25, 2021

## BEFORE THE POLLUTION CONTROL BOARD OF THE STATE OF ILLINOIS

MARTIN AND BAYLEY, INC.,	)	
Petitioner,	)	
	)	
V.	)	PCB 2019-055
	)	(LUST Appeal)
ILLINOIS ENVIRONMENTAL	)	
PROTECTION AGENCY,	)	
Respondent.	)	

## **APPEARANCE**

The undersigned, as one of its attorneys, hereby enters her Appearance on behalf of

the Respondent, the Illinois Environmental Protection Agency.

Respectfully submitted,

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY, Respondent

Melanie

Melanie A. Jarvis Assistant Counsel Special Assistant Attorney General Division of Legal Counsel 1021 North Grand Avenue, East P.O. Box 19276 Springfield, Illinois 62794-9276 217/782-5544 866/273-5488 (TDD) Dated: February 25, 2021

## BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

MARTIN AND BAYLEY, INC.,	)	
Petitioner,	)	
v.	)	PCB 2019-055 (LUST Appeal)
ILLINOIS ENVIRONMENTAL	)	(LUSI Appeal)
PROTECTION AGENCY,	)	
Respondent.	)	

## **CERTIFICATE OF RECORD ON APPEAL**

Pursuant to 35 Ill. Adm. Code 105.116(b) and 105.410, the following constitutes an index of documents comprising the record:

3
18

I, Brian Bauer, certify on information and belief that the entire record of the Respondent's decision, as defined in 35 Ill. Adm. Code 105.410(b), is hereby enclosed.

By: 1 en aver

Brian Bauer, Project Manager Leaking Underground Storage Tank Section Illinois Environmental Protection Agency

Date: FEB 201, 2021

This filing submitted on recycled paper.

## **CERTIFICATE OF SERVICE**

I, the undersigned attorney at law, hereby certify that on February 25, 2021, I

served true and correct copies of an APPEARANCE, the ADMINISTRATIVE RECORD and a

CERTIFICATE OF RECORD ON APPEAL, via the Board's COOL system and email, upon the

following named persons:

Don Brown, Clerk Illinois Pollution Control Board James R. Thompson Center 100 West Randolph, Suite 11-500 Chicago, IL 60601 <u>don.brown@illinois.gov</u> Carol Webb, Hearing Officer Illinois Pollution Control Board 1021 North Grand Avenue East P.O. Box 19274 Springfield, IL 62794-9274 carol.webb@illinois.gov

Patrick D. Shaw Law Office of Patrick D. Shaw 80 Bellerive Road Springfield, IL 62704 pdshaw1law@gmail.com

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY, Respondent

Melanie

Melanie A. Jarvis Assistant Counsel Division of Legal Counsel 1021 North Grand Avenue, East P.O. Box 19276 Springfield, Illinois 62794-9276 217/782-5544 866/273-5488 (TDD)



February 3, 2018

Waste Management • Remediation • Drilling Services

0810305287 – Jefferson County Martin & Bayley, Inc. Incident # 20171116 Leaking UST Technical File

Illinois Environmental Protection Agency Bureau of Land - #24 Leaking UST Section P.O. Box 19276 Springfield, IL. 62794-9276

0810305287

RE: LPC<del># 0810030528</del>7—Jefferson County Hucks #134 540 Airport Road Mt. Vernon, IL 62864 IEMA # 2017-1116 IEPA - DIVISION OF RECORDS MANAGEMENT RELEASABLE

MAR 2.9 2018 REVIEWER: JMR

To Whom It May Concern:

Enclosed please find one original and one copy of the 45-Day report for the above-referenced site.

Should you have any questions or need additional information, please call us at 217-670-1916.

Sincerely,

Chase Environmental Group, Inc.

Matthew D. Rives, P.E. Environmental Engineer

RECEIVED FEB 06 2018 IEPA/BOL



Illinois Environmental Protection Agency

## Bureau of Land • 1021 North Grand Avenue East • P.O. Box 19276 • Springfield • Illinois • 62794-9276

The Agency is authorized to require this information under Section 4 and Title XVI of the Environmental Protection Act (415 ILCS 5/4, 5/57 – 57.17). Fallure to disclose this information may result in a civil penalty of not to exceed \$50,000.00 for the violation and an additional civil penalty of not to exceed \$10,000.00 for each day during which the violation continues (415 ILCS 5/42). Any person who knowingly makes a false material statement or representation, orally or in writing, in any label, manifest, record, report, permit, or license, or other document filed, maintained or used for the purpose of compliance with Title XVI commits a Class 4 felony. Any second or subsequent offense after conviction hereunder is a Class 3 felony (415 ILCS 5/44 and 57.17). This form has been approved by the Forms Management Center.

## Leaking Underground Storage Tank Program 45-Day Report

#### A. Site Identification

IEMA Incident # (6- or 8-digit): 20171116	IEPA LPC# (10-digit):	0810305287
Site Name: Hucks #134		
Site Address (Not a P.O. Box): 540 Airport R	load	
City: Mt. Vernon	County: Jefferson	Zip Code: 62864

### B. Release Information

UST Volume (gallons)	Material Stored in UST	Release Yes / No	Type of Release Tank Leak / Overfill / Piping Leak	Product Removed? Yes / No	Tank Status Repaired / Removed / Abandoned / In Use
10,000	Gasoline	Yes		Yes	Removed
10,000	Gasoline	Yes		Yes	Removed
					······································

## C. Early Action

- 1. Does this report demonstrate that the most stringent Tier 1 remediation objectives have been met? 🗌 Yes 🕅 No
- 2. Was free product encountered?

- 🗌 Yes 🔀 No
- If **yes**, the owner or operator must submit a Free Product Removal Report (form LPC 504). If free product removal will be conducted for more than 45 days, a Free Product Removal Plan (and budget, if applicable) must be submitted (form LPC 504).
- 3. Have any fire or safety hazards posed by vapors or free product or contamination to a potable water supply been identified?
   4. What was the volume of backfill material excavated? <u>390.28</u> Yards<sup>3</sup> RECEIVED
   IL 532 2277 45-Day Report LPC 503 Rev. April 2014
   45-Day Report Page 1 of 4
   45-Day Report Page 1 of 4

5. What was the volume of native soil excavated?	Yards <sup>3</sup>
6. Was groundwater encountered at the site?	🛛 Yes 🗋 No
7. Did the groundwater exhibit a sheen?	🗌 Yes 🕅 No

#### **D. Site/Release Information**

Provide the following:

- 1. Data on the nature and estimated quantity of release;
- 2. Data from available sources or site investigations concerning the following factors:
  - a. Surrounding populations;
  - b. Water quality;
  - c. Use and approximate locations of wells potentially affected by the release;
  - d. Subsurface soil conditions;
  - e. Location of subsurface sewers;
  - f. Climatological conditions; and
  - g. Land use;
- 3. A discussion of what was done to measure for the presence of a release where contamination was most likely to be present at the UST site;
- 4. The results of the free product investigations;
- 5. A discussion of the action taken to prevent further release of the regulated substance into the environment;
- 6. A discussion of the action taken to monitor and mitigate fire and safety hazards posed by vapors or free product that has migrated from the UST excavation zone and entered subsurface structures; and
- 7. Any other information collected while performing initial abatement measures pursuant to 35 III. Adm. Code 731.162 or 734.210(b).

### E. Other Information

Provide the following:

- 1. An area map showing the site in relation to surrounding properties;
- 2. A cross section, to scale, showing the UST(s) and the excavation;
- 3. Analytical/screening results in tabular format including the results of soil samples required pursuant to 35 III. Adm. Code 734.210(h) and the most stringent Tier 1 remediation objectives;
- 4. Site map meeting the requirements of 35 III. Adm. Code 734.440 and including sample locations;
- 5. Soil boring logs;
- 6. Chain of custody forms;
- 7. Laboratory analytical reports;
- 8. Laboratory certifications;
- 9. A copy of the Office of the State Fire Marshal Permit for Removal, Abandonment-in-Place, or other OSFM permits or notifications;

45-Day Report Page 2 of 4

- 10. A narrative of tank removal and cleaning operations; describe how wastes generated during the tank removal were managed, treated, and disposed of;
- 11. Photographs of UST removal activities and the excavation; and
- 12. Copies of manifests for soil and groundwater transported off-site.

#### F. Early Action Tier 1 Remediation Objectives Compliance Report

If the most stringent Tier 1 remediation objectives of 35 III. Adm. Code 742 for the applicable indicator contaminants have been met and a groundwater investigation is not required, in addition to the information provided above, provide the following:

1. Site characterization;

- 2. If water was encountered in the excavation, provide a demonstration pursuant to 35 III. Adm. Code 734.210(h)(4)(C) that it is not representative of actual groundwater; and
- 3. Property Owner Summary (form LPC 568).

#### G. Signatures

#### **UST Owner or Operator Signature:**

All plans, budgets, and reports must be signed by the owner or operator and list the owner's or operator's full name, address, and telephone number.

UST Owner or Operator and Licensed Professional Engineer or Licensed Professional Geologist Certification of Stage 1 Site Investigation Plan and Budget (applies to Part 734 sites continuing beyond early action):

Pursuant to 35 III. Adm. Code 734.315(b) and 734.310(b), I certify that the Stage 1 site investigation will be conducted in accordance with 35 III. Adm. Code 734.315 and that the costs of the Stage 1 site investigation will not exceed the amounts set forth in 35 III. Adm. Code 734.Subpart H, Appendix D, and Appendix E. This certification is intended to meet the requirements for a plan and budget for the Stage 1 site investigation required to be submitted pursuant to 35 III. Adm. Code 734.315 and 734.310.

## Continue onto next page.

### Licensed Professional Engineer or Licensed Professional Geologist Certification:

I certify under penalty of law that all activities that are the subject of this plan, budget, or report were conducted under my supervision or were conducted under the supervision of another Licensed Professional Engineer or Licensed Professional Geologist and reviewed by me; that this plan, budget, or report and all attachments were prepared under my supervision; that, to the best of my knowledge and belief, the work described in this plan, budget, or report has been completed in accordance with the Environmental Protection Act [415 ILCS 5], 35 III. Adm. Code 731, 732, or 734, and generally accepted standards and practices of my profession; and that the information presented is accurate and complete. I am aware there are significant penalties for submitting false statements or representations to the Illinois EPA, including but not limited to fines, imprisonment, or both as provided in Sections 44 and 57.17 of the Environmental Protection Act [415 ILCS 5/44 and 57.17].

## **UST Owner or Operator**

Name Martin & Bayley, Inc.
Contact Troy Deitz
Address 1311 West Main Street
City Carmi
State Illinois
Zip Code 62821
Phone 618-382-2334
Signature Quit
Date12/19/17
- /

Licensed Professional Engineer or Geologist

#### Consultant

Company Chase Environmental Group, Inc.

Contact Allan Curtiss

Address 2701 E. Ash Street, Bldg. B

City Springfield

State Illinois

Zip Code 62703

Phone 217-670-1916

ss @chaseenU.com E-mail: ancuro Signature Date

## L.P.E. or L.P.G. Seal

PROFESSIONAL ENGINEER OF

> RECEIVED FEB 0 6 2018 IEPA/BOL

45-Day Report Page 4 of 4



#### Bureau of Land • 1021 N. Grand Avenue E. • P.O. Box 19276 • Springfield • Illinois • 62794-9276

The Agency is authorized to require this information under Section 4 and Title XVI of the Environmental Protection Act (415 ILCS 5/4, 5/57 – 57.17). Failure to disclose this information may result in a civil penalty of not to exceed \$50,000.00 for the violation and an additional civil penalty of not to exceed \$10,000.00 for each day during which the violation continues (415 ILCS 5/42). Any person who knowingly makes a false material statement or representation, orally or in writing, in any label, manifest, record, report, permit, or license, or other document filed, maintained or used for the purpose of compliance with Title XVI commits a Class 4 felony. Any second or subsequent offense after conviction hereunder is a Class 3 felony (415 ILCS 5/44 and 57.17). This form has been approved by the Forms Management Center.

## Leaking Underground Storage Tank Program Stage 1 Site Investigation Certification

#### A. Site Identification

IEMA Incident # (6- or 8-digit):	20171116		IEPA LPC# (10-	digit): 0810305287
Site Name: Huck #134				
Site Address (not a P.O. Box):	540 Airport F	Rd.		
City: <u>Mt, Vernon</u>	County:	Jefferson	Zip Code:	62864
Leaking UST Technical File				

#### **B.** Site Information

#### **UST Owner or Operator Signature:**

All plans, budgets, and reports must be signed by the owner or operator and list the owner's or operator's full name, address, and telephone number.

#### UST Owner or Operator and Licensed Professional Engineer or Licensed Professional Geologist Certification of Stage 1 Site Investigation Plan and Budget (applies to Part 734 sites continuing beyond early action):

Pursuant to 35 III. Adm. Code Part 734.315(b) and 734.310(b), I certify that the Stage 1 site investigation will be conducted in accordance with 35 III. Adm. Code 734.315 and that the costs of the Stage 1 site investigation will not exceed the amounts set forth in 35 III. Adm. Code 734.Subpart H, Appendix D, and Appendix E. This certification is intended to meet the requirements for a plan and budget for the Stage 1 site investigation required to be submitted pursuant to 35 III. Adm. Code 734.315 and 734.310.

A summary of the actual costs for conducting the Stage 1 site investigation will be submitted concurrently with the results of the Stage 1 site investigation and the Stage 2 site investigation plan and budget.

### **UST Owner or Operator**

Name Martin & Bayley				
Contact	Troy Deitz			
Address	1311 West St.			
City Carmi				
State IL				
Zip Code	62821			
Phone 6	18-382-2334			
Signature	Jay Junt			
Date	12/19/17			

### **Licensed Professional Engineer or Geologist**

Name Matthew Rives	
Company Chase Environmental G	
Address 2701 East Ash Street, Bldg	RECEIVED
City Springfield	
State IL	FEB 0 6 2018
Zip Code 62703	
Phone	TEPA/BOL
III. Registration No. 062069142	
Signature Mutter	
Date 2/3/18	THEW RIVE
L.P.E. or L.P.G. Seal	Afr good_INOIS

## **45-Day Report**

Huck's #134

540 Airport Road Mount Vernon, IL 62864 Jefferson County LPC# 0810305287 IEMA # 20171116

CEG Project # T1711029.A

Prepared for:

Martin & Bayley, Inc. 1311 A. W. Main Street P.O. Box 385 Carmi, IL 62821

.

By:

Chase Environmental Group, Inc. 2701 East Ash Street, Building B Springfield, Illinois 62703

ľ

February 2017

## **Table of Contents**

D.	SITE/RELEASE INFORMATION 1
1.	Data on the nature and estimated quantity of the release;
2.	Data from available sources or site investigations concerning the following factors; 1
a.	Surrounding populations;
b.	Water Quality;
c.	Use and approximate locations of wells potentially affected by the release;
d.	Subsurface soil conditions;
e.	Location of subsurface sewers;
f.	Climatological conditions; and
g.	Land use;
3.	A discussion of what was done to measure for the presence of a release where
	tamination was most likely to be present at the UST site;
4.	The results of the free product investigations;
5.	A discussion of the action taken to prevent further release of the regulated substance
	the environment;
6.	A discussion of the action taken to monitor and mitigate fire and safety hazards
pos	ed by vapors or free product that has migrated from the UST excavation zone and
	ared subsurface structures; and
7.	Any other information collected while performing initial abatement measures
purs	suant to 35 ILL. Adm. Code 731.162, 732.202(b) or ILCS 5/57-57.17
E.	OTHER INFORMATION
1.	An area map showing the site in relation to surrounding properties:
2.	A cross-section, to scale, showing the UST(s) and the excavation;
3.	Analytical/screening results in tabular format including the results of soil samples
	aired pursuant to 35 ILL Adm. Code 732.202(h) or 734.210(h) and the most stringent
	1 remediation objectives;
4.	Site map meeting the requirements of 35 ILL ADM Code 732.110(a) or 734.440 and
	uding sample locations;
5.	Soil boring logs;
6.	Chain of custody forms;
7.	Laboratory analytical reports;
8.	Laboratory Certifications;
	A copy of the Office of the State Fire Marshal Permit for Removal, Abandonment in
	e, or other OSFM permits or notifications;
10.	A narrative of tank removal and cleaning operations; describe how wastes
	erated during the tank removal were managed, treated, and disposed of;
11.	Photographs of UST removal activities and the excavation; and
12.	Copies of manifests for soil and groundwater transported off-site
F.	Early Action Tier 1 Remediation Objectives Compliance Report
1.	Site Characterization;
2.	If water was encountered in the excavation, provide a demonstration pursuant to 35
	Adm. Code $732.202(h)(4)(C)$ or $734.210(h)(4)(C)$ that it is not representative of
	Addit. Code $752.202(h)(4)(6)(6)(754.210(h)(4)(6))$ that it is not representative of all groundwater; and
3.	Property Owner Summary (form LPC 568)
э.	Toperty Owner Summary (10111 LFC 508)

## **Table of Contents**

#### TABLES

Table 1:Early Action Analytical Results

#### **FIGURES**

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- Figure 1: Topographic Map
- Figure 2: Aerial Map
- Figure 3: 200' Radius Well Map
- Figure 4: 2500' Radius Well Map
- Figure 5: Site Map with UST Tankhold
- Figure 6: Geo Cross Section of UST Tankhold
- Figure 7: Early action Sample location

### APPENDICES

- Appendix A: SWAP Fact Sheets & Well Information
- Appendix B: Lab Reports, Lab Certifications, & Chain of Custody Forms
- Appendix C: OSFM Removal Permit
- Appendix D: Photographic Documentation
- Appendix E: Copies of Manifests

**45 Day Report** Huck's # 134. 540 Airport Road Mount Vernon, IL 62864 LPC# 0810305287 IEMA # 20171116

## D. SITE/RELEASE INFORMATION

Provide the following:

## 1. Data on the nature and estimated quantity of the release;

The quantity of the release is unknown, but the release occurred within two (2) 10,000-gallon gasoline underground storage tanks (USTs). A site assessment was completed using an AMS PowerProbe 9500 unit with direct push capabilities. Based upon field observations during the collection of the release confirmation sample, Incident No. 20171116 was assigned to the release on December 5, 2017. Field activities began on January 15, 2018 to decommission and remove the USTs. Closure samples were collected from the walls and floors of the excavations for Benzene, Toluene, Ethylbenzene, and Total Xylenes (BTEX), and Methyl Tertiary-Butyl Ether (MTBE). Results indicated the Tier 1 Residential Remediation Objectives (ROs) had been exceeded. Analytical results can be found in Table 1.

## 2. Data from available sources or site investigations concerning the following factors;

## a. Surrounding populations;

The area surrounding the site is primarily residential and commercial in nature. Refer to Figure 1 for the topographic map and Figure 2 for the aerial map

## b. Water Quality;

The site is served currently by city water. It appears that subsurface groundwater quality at the site has been impacted by the USTs release. An in depth subsurface groundwater investigation will be completed during Site Investigational activities.

## c. Use and approximate locations of wells potentially affected by the release;

The Source Water Assessment Program (SWAP) was utilized to determine the location of potable wells, community supply wells (CWS), and setback zones within 200 and 2,500-foot radius of the

45-Day Report Huck's #134 / Jefferson County LUST #20171116 Page 2

site. No wells were located within 2,500-feet of the subject property.

On January 4, 2018, Chase Environmental Group contacted the City of Mount Vernon Public Works to gather information on its water system. Assistant Public Works Director of the City of Mount Vernon Jonathan Younger indicated the site, and the entirety of the City of Mount Vernon, is supplied from purchased water from the Rend Lake Conservancy District. The purchased water is stored in three (3) water storage towers and one (1) storage tank. The City of Mount Vernon provides water to approximately 7,000 services and meters and maintains over 185 miles of mains and 1,300 fire hydrants. Refer to Appendix A for the SWAP fact sheets. Refer to Figure 3 and 4 for the radius search maps.

### d. Subsurface soil conditions;

The subsurface soil at the site appears to be mostly silty loam/ soft clay based upon the Early Action excavation activities. Depth to saturation at the boring location completed to confirm the release was approximately seven to eight feet below ground surface.

The United States Department of Agriculture Web Soil Survey was consulted to determine the geologic susceptibility of potential contamination from the release. The site was determined to be type "639A – Wynoose silt loam, bench, 0 to 2 percent slopes". Characteristics of this soil type include: A depth of 13 to 24 inches to abrupt textural change; poorly drained; moderately low to moderately high capacity of the most limiting layer to transmit water; low availability for water storage in profile.

### e. Location of subsurface sewers;

The underground sewer line exits the north side of the building and connects to a sewer main located beneath the right of way, Airport Road.

#### f. Climatological conditions; and

The weather during field activities was extremely cold (<10 °F) and breezy with a significant snow accumulation beginning on January 14 and continuing into January 15. Temperatures gradually increased to above freezing by the end of field activities on January 22.

#### g. Land use;

The subject property is currently a convenience store. Future use of the property is expected to remain the same following the removal of the UST system.

45-Day Report Huck's #134 / Jefferson County LUST #20171116 Page 3

> 3. A discussion of what was done to measure for the presence of a release where contamination was most likely to be present at the UST site;

Based on the release of gasoline, soil samples collected from the USTs tankhold and associated piping trench were analyzed for BTEX and MTBE.

## 4. The results of the free product investigations;

No free product has been discovered at this time.

5. A discussion of the action taken to prevent further release of the regulated substance into the environment;

The leaking USTs have been removed.

- 6. A discussion of the action taken to monitor and mitigate fire and safety hazards posed by vapors or free product that has migrated from the UST excavation zone and entered subsurface structures; and The leaking USTs have been removed.
- 7. Any other information collected while performing initial abatement measures pursuant to 35 ILL. Adm. Code 731.162, 732.202(b) or ILCS 5/57-57.17.

Not Applicable.

## E. OTHER INFORMATION

Provide the following:

- 1. An area map showing the site in relation to surrounding properties: Refer to Figure 1 for the topographic map and Figure 2 for the aerial map.
- 2. A cross-section, to scale, showing the UST(s) and the excavation; Refer to Figure 6 for a geo-cross section of the UST tankhold.
- Analytical/screening results in tabular format including the results of soil samples required pursuant to 35 ILL Adm. Code 732.202(h) or 734.210(h) and the most stringent Tier 1 remediation objectives;
   Refer to Table 1 for analytical results from Early Action activities.
- Site map meeting the requirements of 35 ILL ADM Code 732.110(a) or 734.440 and including sample locations;
   Refer to Figure 5 for a site map with the tankhold and sample locations.
- 5. Soil boring logs; Not applicable.
- 6. Chain of custody forms; Refer to Appendix B for chain of custody forms.

45-Day Report Huck's #134 / Jefferson County LUST #20171116 Page 4

### 7. Laboratory analytical reports;

Refer to Appendix B for laboratory reports.

## 8. Laboratory Certifications;

Refer to Appendix B for laboratory certifications.

9. A copy of the Office of the State Fire Marshal Permit for Removal, Abandonment in Place, or other OSFM permits or notifications; Refer to the Appendix C for a copy of the OSFM Removal Permit.

# 10. A narrative of tank removal and cleaning operations; describe how wastes generated during the tank removal were managed, treated, and disposed of;

## January 15-16, 2018

Chase Environmental Group, Inc. personnel mobilized to the site to begin the preparation of decommissioning activities. Tanks # 1 and #2, both 10,000-gallon gasoline USTs, were uncovered to the crown. Concrete covering the tankhold was piled on-site until transported for disposal.

## January 17-18, 2018

Decommissioning of the two (2) 10,000-gallon USTs began under the supervision of OSFM Representative Terry Weedman. Illinois Environmental Protection Agency Rob Mileur also provided on-site supervision and oversight. The USTs were removed of liquids, ventilated, and removed from the tankhold. The tanks were then cut and cleaned before transportation to a recycling facility. Associated UST product piping was removed and its trench was excavated to the approval of Terry Weedman. UST ventilation lines were also removed. The hauling of contaminated materials off-site began.

### January 19, 2018

The hauling of contaminated materials off-site concluded. Approximately 1,950 gallons of petroleum contaminated groundwater were removed from the tankhold and properly disposed of by First American Recovery and Recycle, Inc (U.S. EPA #KYR000049346). The hauling of materials to backfill the former UST tankhold began.

### January 22-23, 2018

The former UST tankhold was completely backfilled. The site was secured and cleaned up, concluding the UST decommissioning activities by Chase Environmental Group.

All hauling of materials was performed by Charles H. Carter & Son, Inc. A total of 585.42 tons of contaminated materials were removed from the site. Contaminated soils were properly disposed of to the Wayne County Landfill (#4293180384), a Republic Waste facility. Electronic Filing: Received, Clerk's Office 2/25/2021 45-Day Report Huck's #134 / Jefferson County LUST #20171116 Page 5

- 11. Photographs of UST removal activities and the excavation; and Refer to Appendix D for photographic documentation.
- 12. Copies of manifests for soil and groundwater transported off-site. Refer to Appendix E for copies of manifests.

### F. Early Action Tier 1 Remediation Objectives Compliance Report.

If the most stringent Tier 1 remediation objectives of 35 ILL Adm. Code 742 for the applicable indicator contaminants have been met and a groundwater investigation is not required, in addition to the information provided above, provide the following:

1. Site Characterization;

Not applicable.

- 2. If water was encountered in the excavation, provide a demonstration pursuant to 35 ILL Adm. Code 732.202(h)(4)(C) or 734.210(h)(4)(C) that it is not representative of actual groundwater; and Groundwater appears to have been impacted from the release at the site.
- 3. Property Owner Summary (form LPC 568) Not applicable.

Huck's #134 Mount Vernon, IL 2017-1116

Location	Depth	Date	Benzene	Ethylbenzene	Toluene	Total Xylene	МТВЕ
Tier 1 objectives			0.03	13	12	5.6	0.32
WC-1	3'	12/5/17	0.534	16.4	ND	103.0	ND
1	BF	1/17/18	18.8	46.5	174	231	ND
2	3'	1/19/18	8.73	20.0	77.3	111	ND
3	3'	1/19/18	3.070	5.55	22.8	29.4	ND
4	7'	1/19/18	ND	ND	ND	ND	ND
5	7'	1/19/18	ND	ND	ND	ND	ND
6	12'	1/19/18	ND	ND	ND	ND	ND
7	12'	1/19/18	ND	ND	0.00884	0.0151	ND
8	12'	1/19/18	ND	ND	0.00645	ND	ND
9	12'	1/19/18	ND	ND	ND	ND	ND
10	7'	1/19/18	ND	ND	ND	ND	ND
11	7'	1/19/18	ND	ND	ND	ND	ND
12	7'	1/19/18	ND	ND	ND	ND	ND
13	7'	1/19/18	ND	ND	ND	ND	ND
14	7'	1/19/18	ND	ND	ND	ND	ND
15	7'	1/19/18	ND	ND	ND	ND	0.00495

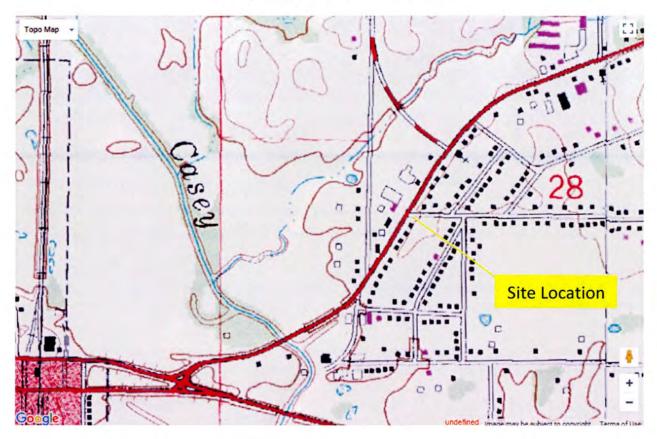
# TABLE 1 Early Action Soil Analytical Summary

Bold and Shaded - Exceeds Tier 1 Residential RO

(1) - Derived from 35 Ill. Adm. Code 742 Appendix A.Table A (For the Soil Component of the Groundwater Ingestion Exposure Route) (BF) Backfill

## FIGURE 1

## **Topographic Map**



## FIGURE 2

## **Aerial Map**

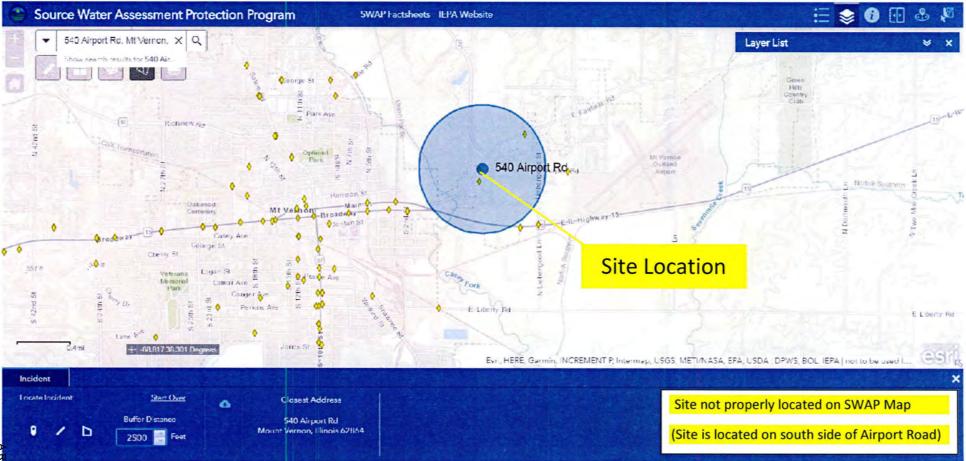


## FIGURE 3

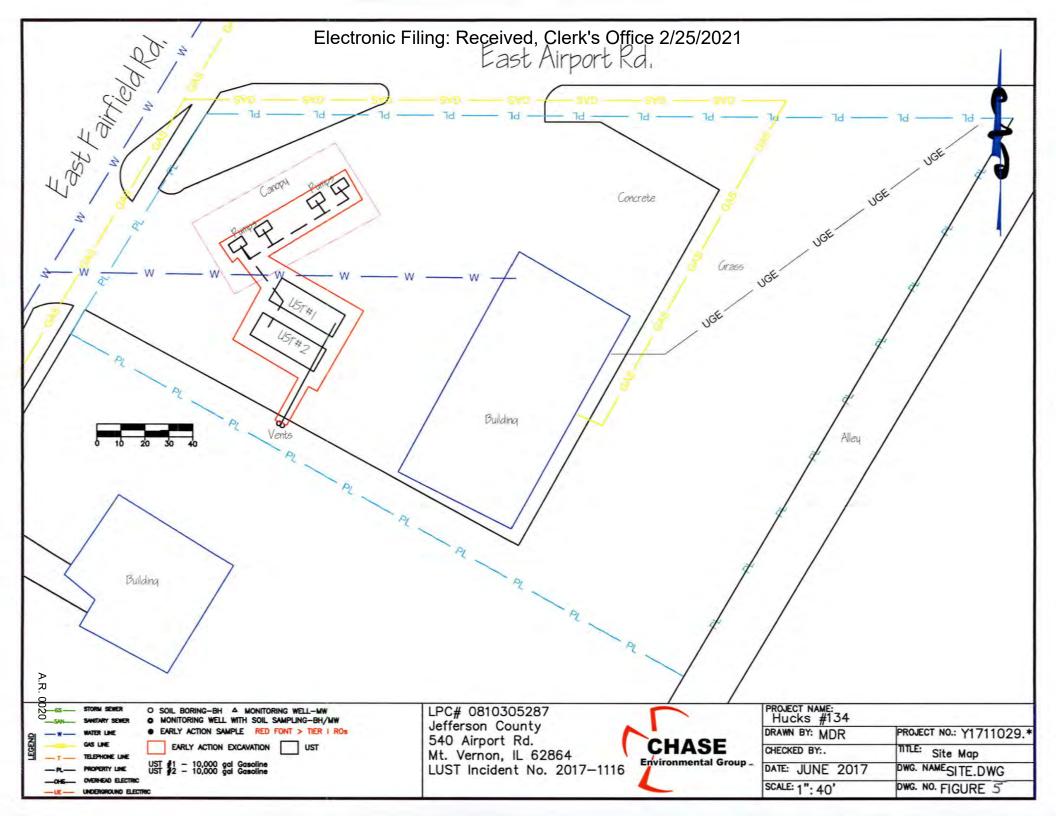
## 200-Foot Radius Well Map

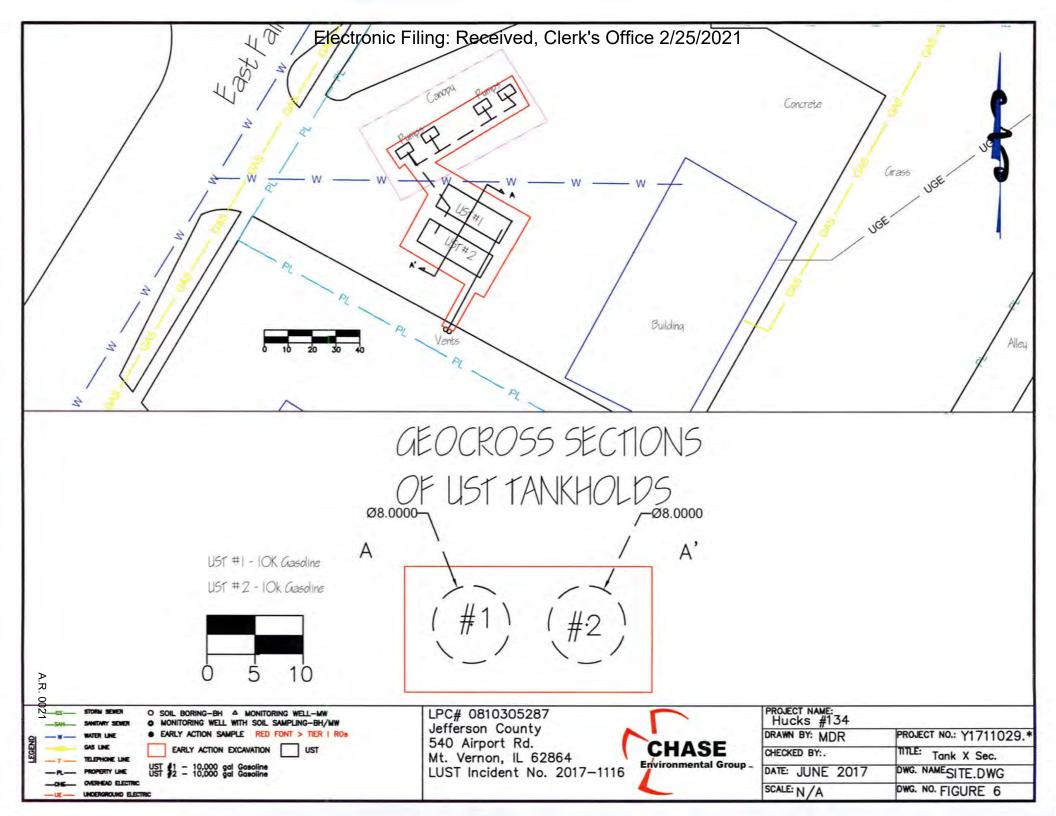


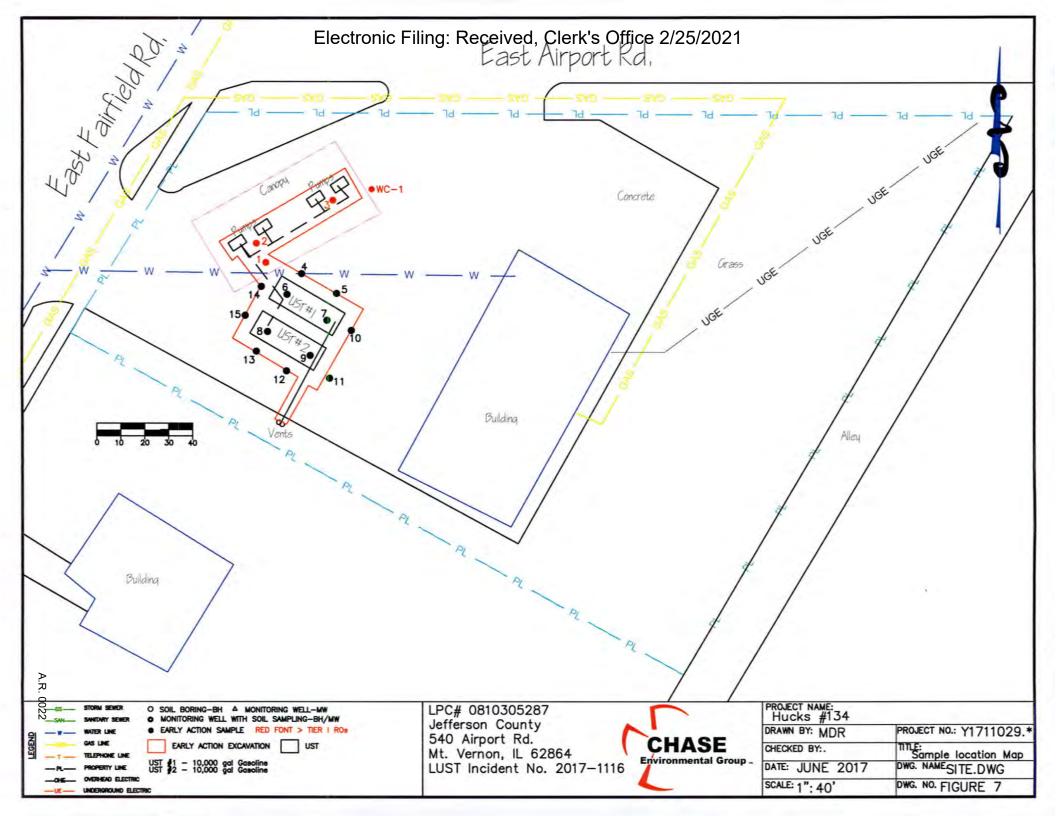
## FIGURE 4 2500-Foot Radius Well Map



2. 0019







## Appendix A SWAP Fact Sheets & Well Information

- Mannis
155515555

Environmental Protection Agency

## Source Water Assessment Program Factsheets

Select Water System T	Community	-		
Select County				
Jefferson 👻	Search County	Or		
Enter any part of a Faci	lity Name	Search Facility Name		
Search Results	MOUNT VE	RNON	• 5	Select Water System

To view a summary version of the completed Source Water Assessments, you may search our records by county or public water supply name. This summary information describes pertinent sub-sections of each completed assessment including: Importance of Source Water; Susceptibility to Contamination Determination; and documentation/recommendation of Source Water Protection Efforts. However, summaries of Source Water Protection Efforts have not been documented for non-community water supplies. It should be noted that these Source Water Assessment summaries are presented in strict compliance with Illinois EPA's security policy on the release of sensitive information. Therefore, all locational data and maps pertaining to wells, aquifers and/or surface water intakes have been removed. To obtain a complete version of the Source Water Assessment Report, please contact your local water supply officials.

## Water Percentages:

Surface	Surface Water	Ground	Ground Water	Ground Water	Ground Water UDI
Water %	Purchase %	Water %	Purchase %	UDI %	Purchase %
0.00	100.00	0.00	0.00	0.00	0.00

## Importance Of Source Water: Well Data For This Facility:

No Data		
Intake Details:		

Intake ID	Source	Description	Watershed ID	Stream Segment ID	Lake Name
IN70730		INTAKE (70730) ABANDONED		1000000	
IN70731		INTAKE (70731) ABANDONED			
IN70732		INTAKE (70732) ABANDONED			

## Source Water Quality: Finished Water Quality: Potential Sources Of Contamination:

## Site Data For This Facility:

No Data	
Susceptibili	ty To Contamination:
Source Wate	er Protection Efforts:

## Appendix B Lab Reports, Lab Certifications, & Chain of Custody Forms



December 13, 2017

Marvin Johnson Chase Environmental Group P.O. Drawer AB Centralia, IL 62801 TEL: (618) 533-6740 FAX: (618) 533-6741



**RE:** Hucks #134 T1711029.A

WorkOrder: 17120423

Dear Marvin Johnson:

TEKLAB, INC received 1 sample on 12/7/2017 8:32:00 AM for the analysis presented in the following report.

Samples are analyzed on an as received basis unless otherwise requested and documented. The sample results contained in this report relate only to the requested analytes of interest as directed on the chain of custody. NELAP accredited fields of testing are indicated by the letters NELAP under the Certification column. Unless otherwise documented within this report, Teklab Inc. analyzes samples utilizing the most current methods in compliance with 40CFR. All tests are performed in the Collinsville, IL laboratory unless otherwise noted in the Case Narrative.

All quality control criteria applicable to the test methods employed for this project have been satisfactorily met and are in accordance with NELAP except where noted. The following report shall not be reproduced, except in full, without the written approval of Teklab, Inc.

If you have any questions regarding these tests results, please feel free to call.

Sincerely,

Marin J. Darling I

Marvin L. Darling Project Manager (618)344-1004 ex 41 mdarling@teklabinc.com http://www.teklabinc.com/

eklab. Inc.	<b>Report Contents</b>	http://www.teklabinc.com/
Client: Chase Environmental Group		Work Order: 17120423
Client Project: Hucks #134 T1711029.A		Report Date: 13-Dec-17

This reporting package includes the following:

Cover Letter	1
Report Contents	2
Definitions	3
Case Narrative	4
Accreditations	5
Laboratory Results	6
Receiving Check List	7
Chain of Custody	Appended



## Definitions

http://www.teklabinc.com/

Work Order: 17120423

Report Date: 13-Dec-17

Client: Chase Environmental Group

#### Client Project: Hucks #134 T1711029.A

#### Abbr Definition

- \* Analytes on report marked with an asterisk are not NELAP accredited
- CCV Continuing calibration verification is a check of a standard to determine the state of calibration of an instrument between recalibration.
- DF Dilution factor is the dilution performed during analysis only and does not take into account any dilutions made during sample preparation. The reported result is final and includes all dilutions factors.
- DNI Did not ignite
- DUP Laboratory duplicate is an aliquot of a sample taken from the same container under laboratory conditions for independent processing and analysis independently of the original aliquot.
- ICV Initial calibration verification is a check of a standard to determine the state of calibration of an instrument before sample analysis is initiated.
- IDPH IL Dept. of Public Health
- LCS Laboratory control sample, spiked with verified known amounts of analytes, is analyzed exactly like a sample to establish intra-laboratory or analyst specific precision and bias or to assess the performance of all or a portion of the measurement system. The acceptable recovery range is in the QC Package (provided upon request).
- LCSD Laboratory control sample duplicate is a replicate laboratory control sample that is prepared and analyzed in order to determine the precision of the approved test method. The acceptable recovery range is listed in the QC Package (provided upon request).
- MBLK Method blank is a sample of a matrix similar to the batch of associated sample (when available) that is free from the analytes of interest and is processed simultaneously with and under the same conditions as samples through all steps of the analytical procedures, and in which no target analytes or interferences should present at concentrations that impact the analytical results for sample analyses.
- MDL Method detection limit means the minimum concentration of a substance that can be measured and reported with 99% confidence that the analyte concentration is greater than zero.
- MS Matrix spike is an aliquot of matrix fortified (spiked) with known quantities of specific analytes that is subjected to the entire analytical procedures in order to determine the effect of the matrix on an approved test method's recovery system. The acceptable recovery range is listed in the QC Package (provided upon request).
- MSD Matrix spike duplicate means a replicate matrix spike that is prepared and analyzed in order to determine the precision of the approved test method. The acceptable recovery range is listed in the QC Package (provided upon request).
- MW Molecular weight
- ND Not Detected at the Reporting Limit
- NELAP NELAP Accredited
  - PQL Practical quantitation limit means the lowest level that can be reliably achieved within specified limits of precision and accuracy during routine laboratory operation conditions. The acceptable recovery range is listed in the QC Package (provided upon request).
  - RL The reporting limit the lowest level that the data is displayed in the final report. The reporting limit may vary according to customer request or sample dilution. The reporting limit may not be less than the MDL.
  - RPD Relative percent difference is a calculated difference between two recoveries (ie. MS/MSD). The acceptable recovery limit is listed in the QC Package (provided upon request).
  - SPK The spike is a known mass of target analyte added to a blank sample or sub-sample; used to determine recovery deficiency or for other quality control purposes.
  - Surr Surrogates are compounds which are similar to the analytes of interest in chemical composition and behavior in the analytical process, but which are not normally found in environmental samples.
  - TIC Tentatively identified compound: Analytes tentatively identified in the sample by using a library search. Only results not in the calibration standard will be reported as tentatively identified compounds. Results for tentatively identified compounds that are not present in the calibration standard, but are assigned a specific chemical name based upon the library search, are calculated using total peak areas from reconstructed ion chromatograms and a response factor of one. The nearest Internal Standard is used for the calculation. The results of any TICs must be considered estimated, and are flagged with a "T". If the estimated result is above the calibration range it is flagged "ET"
- TNTC Too numerous to count ( > 200 CFU )

#### Qualifiers

- # Unknown hydrocarbon
- E Value above quantitation range
- I Associated internal standard was outside method criteria
- ND Not Detected at the Reporting Limit
- S Spike Recovery outside recovery limits
- X Value exceeds Maximum Contaminant Level

- B Analyte detected in associated Method Blank
- H Holding times exceeded
- M Manual Integration used to determine area response
- R RPD outside accepted recovery limits
- T TIC(Tentatively identified compound)



**Case Narrative** 

http://www.teklabinc.com/

Client: Chase Environmental Group Client Project: Hucks #134 T1711029.A

Cooler Receipt Temp: 2.82 °C

Work Order: 17120423 Report Date: 13-Dec-17

			Locations		
	Collinsville		Springfield		Kansas City
Address	5445 Horseshoe Lake Road	Address	3920 Pintail Dr	Address	8421 Nieman Road
	Collinsville, IL 62234-7425		Springfield, IL 62711-9415		Lenexa, KS 66214
Phone	(618) 344-1004	Phone	(217) 698-1004	Phone	(913) 541-1998
Fax	(618) 344-1005	Fax	(217) 698-1005	Fax	(913) 541-1998
Email	jhriley@teklabinc.com	Email	KKlostermann@teklabinc.com	Email	jhriley@teklabinc.com
	Collinsville Air		Chicago		
Address	5445 Horseshoe Lake Road	Address	1319 Butterfield Rd.		
	Collinsville, IL 62234-7425		Downers Grove, IL 60515		
Phone	(618) 344-1004	Phone	(630) 324-6855		
Fax	(618) 344-1005	Fax			
Email	EHurley@teklabinc.com	Email	arenner@teklabinc.com		



## Accreditations

http://www.teklabinc.com/

Client: Chase Environmental Group

## Client Project: Hucks #134 T1711029.A

Work Order: 17120423 Report Date: 13-Dec-17

State	Dept	Cert #	NELAP	Exp Date	Lab
Illinois	IEPA	100226	NELAP	1/31/2018	Collinsville
Kansas	KDHE	E-10374	NELAP	4/30/2018	Collinsville
Louisiana	LDEQ	166493	NELAP	6/30/2018	Collinsville
Louisiana	LDEQ	166578	NELAP	6/30/2018	Collinsville
Texas	TCEQ	T104704515-12-1	NELAP	7/31/2018	Collinsville
Arkansas	ADEQ	88-0966		3/14/2018	Collinsville
Illinois	IDPH	17584		5/31/2019	Collinsville
Indiana	ISDH	C-IL-06		1/31/2018	Collinsville
Kentucky	KDEP	98006		12/31/2017	Collinsville
Kentucky	UST	0073		1/31/2018	Collinsville
Louisiana	LDPH	LA170027		12/31/2017	Collinsville
Missouri	MDNR	930		1/31/2018	Collinsville
Missouri	MDNR	00930		5/31/2017	Collinsville
Oklahoma	ODEQ	9978		8/31/2018	Collinsville
Tennessee	TDEC	04905		1/31/2018	Collinsville



## Laboratory Results

http://www.teklabinc.com/

Client: Chase Environmental Group

## Work Order: 17120423

Report Date: 13-Dec-17

Client Project: Hucks #134 T1711029.A Lab ID: 17120423-001

## Client Sample ID: WC-1

Lab ID: 17120423-00 Matrix: SOLID	1	Client Sample ID: WC-1 Collection Date: 12/05/2017 10:00									
Analyses	Certification	RL	Qual	Result	Units	DF	Date Analyzed	Batch			
ASTM D92											
Ignitability, Open Cup		60		>200	°F	1	12/07/2017 12:20	R240946			
EPA SW846 3550C, 5035A, A	STM D2974										
Percent Moisture	•	0.1		17.0	%	1	12/11/2017 16:44	R241100			
SW-846 9045C											
pH (1:1)	NELAP	1.00		6.49		1	12/07/2017 16:39	R240973			
SW-846 9095											
Paint Filter	NELAP	0		Pass	Pass/Fail	1	12/07/2017 12:00	R240977			
SW-846 1311, 3010A, 6010B,	METALS IN TCLP	EXTRACT BY	ICP								
Lead	NELAP	0.0075		< 0.0075	mg/L	1	12/11/2017 20:59	137036			
SW-846 5035, 8260B, VOLAT	ILE ORGANIC COM	POUNDS BY	GC/MS								
Benzene	NELAP	100		534	µg/Kg-dry	50	12/11/2017 16:58	137099			
Ethylbenzene	NELAP	501		16400	µg/Kg-dry	50	12/11/2017 16:58	137099			
Methyl tert-butyl ether	NELAP	201		ND	µg/Kg-dry	50	12/11/2017 16:58	137099			
Toluene	NELAP	501		ND	µg/Kg-dry	50	12/11/2017 16:58	137099			
Xylenes, Total	NELAP	1290		103000	µg/Kg-dry	125	12/12/2017 16:41	137145			
Surr: 1,2-Dichloroethane-d4	*	72.2-131		101.7	%REC	50	12/11/2017 16:58	137099			
Surr: 4-Bromofluorobenzene		82.1-116		105.8	%REC	50	12/11/2017 16:58	137099			
Surr: Dibromofluoromethane		77.7-120		100.5	%REC	50	12/11/2017 16:58	137099			
Surr: Toluene-d8	*	86-116		102.5	%REC	50	12/11/2017 16:58	137099			

Elevated reporting limit due to high levels of target and/or non-target analytes.



## **Receiving Check List**

http://www.teklabinc.com/

Client: Chase Environmental Group

Client Project: Hucks #134 T1711029.A

Work Order: 17120423 Report Date: 13-Dec-17

Carrier: Kelly Tensmeyer	R	eceived By: AMD	)				
On: 07-Dec-17 OT-Dec-17 OT-Dec-17 OT-Dec-17	1	7-Dec-17	Elizabeth A. Hurley	thirly	A.		
Pages to follow: Chain of custody 1	Extra pages inclu	ided 0	and a second				
Shipping container/cooler in good condition?	Yes 🔽	No 🗌	Not Present		Temp °C	2.82	
Type of thermal preservation?	None	Ice 🗹	Blue Ice		Dry Ice		
Chain of custody present?	Yes 🗹	No 🗌					
Chain of custody signed when relinquished and received?	Yes 🗹	No 🗌					
Chain of custody agrees with sample labels?	Yes 🗹	No 🗌					
Samples in proper container/bottle?	Yes 🖌	No					
Sample containers intact?	Yes 🗹	No 🗌					
Sufficient sample volume for indicated test?	Yes 🗹	No 🗌					
All samples received within holding time?	Yes 🗹	No 🗌					
Reported field parameters measured:	Field	Lab	NA	V			
Container/Temp Blank temperature in compliance?	Yes 🗹	No 🗌					
When thermal preservation is required, samples are complian 0.1°C - 6.0°C, or when samples are received on ice the same							
Water - at least one vial per sample has zero headspace?	Yes	No 🗌	No VOA vials				
Water - TOX containers have zero headspace?	Yes 🗌	No 🗌	No TOX containers	$\checkmark$			
Water - pH acceptable upon receipt?	Yes	No 🗌	NA	~			
NPDES/CWA TCN interferences checked/treated in the field?	Yes 🗌	No 🗌	NA	~			
Any No responses	must be detailed	below or on the	COC.				

CHAIN OF CUSTODY pg.\_

pg. 1 of 1 Work Order # 17120423

TEKLAB, INC. 5445 Horseshoe Lake Road ~ Collinsville, IL 62234 ~ Phone: (618) 344-1004 ~ Fax: (618) 344-1005

Client:	Chase Environm	ental G	roup, Inc.	1						000000	San	npla	es c	on:	ø	lce		Blue	lce		lo lc	6	3	82	°C		
Address:	PO Box AB									18					1	Lab		🗆 Fi					USE	EONL	Y		
City / State / Zi	e: Centralia, IL 628	301							-		Lab	No	tes	;													
Contact: Man	vin Johnson	P	none: 618	-533	3-6	6740	1		-																		
E-Mail: mjoh	nson@chaseenv.co	om Fa	ax: 618	-533	8-6	6741			-		Cor				Tn	roio	ot E	)1 e .	hai	uld n	<u>at a</u>	~~~			Dee	ident	
Are these samples Are there any requ	known to be involved in li known to be hazardous? lired reporting limits to be section. XYes □ No	□ Yes	XNo							lo	soi					naja		(L3)	51100	inci i i	u e	AUCI	20 1		ives	ценц	
	ame / Number	1000	Sample Co	llecto	or's	s Na	me		-			MA	TR	IX				11	VDIC.	ATE	ANA	LYS	IS RE	EQUE	STE	2	
Huck's #134 T1711029.A		Set.	ASIES M.	R	iv	es						P				201					1				T	T	5
, Results R	equested B	illing Ins	tructions	# an	d 1	Гуре	of C	Cont	aine	ers		Wat							Iter	oin	Lead						Ê
Other	Day (100% Surcharge) 3 Day (50% Surcharge) Sample Identification	PWP		5		NaOH H2SO4	T		-	Other	Water	<b>Drinking Water</b>	Soil	Sludge	p. Waste	BTEX	MTBE	Hd	Paint Filter	Flash Point	TCLP L						PID (ppm)
1120423 -		-	11		티	ZI	I	-	1	ō	1-	-		S	S		-	-	-		100						
<u>6</u> 1	WC-1	1000	12/5(17	8		-		1	2				X			X	X	X	X	X	X					3	\$0
		1.0				-																	×	-			-
		1.00			-	-	-	-																		-	
		-			1	-											Alley .	ALL NO.									
		-		+	+	-	+	-	$\vdash$	-					-	-						$  \leq  $					1
Ba	linguished By	-	1			-					1					63											
111	iniquisited By	>	17/0	Dat	e /	Time	6	0	_	_	+	-		>		Rece	ived	By				-	-		e / Tin	ne	
1L	5		12/0	0/1	-	7	-	00			10	K	t	1	Ti	2	-	2	-1	6:0	00	12	12	15/	<u>רוי</u>	10	_
hall	lang		12-7-	1)			8	32	-		(	X	W	20	л	D	ex	U	to	)		10	D	$\vec{p}$	n	83	9
he individual signi	ng this agreement on beh	alf of clier	t acknowledg	es tha	at h	ne/she	ha	s rea	ad a	ndı	Inde	rstar	nds	the	term	is and	-	-									C

conditions of this agreement, on the reverse side, and that he/she has the authority to sign on behalf of client.

1

WHITE - LAB YELLOW - SAMPLER'S COP



PDC Laboratories, Inc.

Monday, February 5, 2018

Matt Rives Chase Environmental 2701 E Ash Springfield, IL 62704

TEL: (217) 670-1916 FAX: (217) 670-1682

RE: Hucks #134

PDC WO: 18A0448

PDC Laboratories, Inc. received 15 sample(s) on 1/24/2018 for the analyses presented in the following report.

All applicable quality control procedures met method specific acceptance criteria unless otherwise noted.

This report shall not be reproduced, except in full, without the prior written consent of PDC Laboratories, Inc.

If you have any questions, please feel free to contact me at (217) 753-1148.

Respectfully submitted,

Kristen A. Potter Project Manager

Certifications:

NELAP/NELAC - IL #100323

1210 Capital Airport Drive 9114 Virginia Road Suite #112 Springfield, IL 62707 Lake in the Hills, IL 60156

IL 62707 \* 1.217.753.1148 Is, IL 60156 \* 1.847.651.2604 1.217.753.1152 Fax
1.847.458.0538 Fax

Page 1 of 9

			LABO	DRAT	ORY RESU	ILTS				
Client:	Chase Environn	nental								
Project:	Hucks #134						Lab Order: 1	8A0448		
Client Sample ID:	1							8A0448-01		
Collection Date:	1/17/18 15:00						Matrix: S			
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	inds by GC-MS									1.17
*Benzene		18.8	3.00		mg/Kg dry	500	1/29/18 10:27	1/30/18 2:42	SW8260B R2	JKK
*Ethylbenzene		46.5	3.00		mg/Kg dry	500	1/29/18 10:27	1/30/18 2:42	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.150		mg/Kg dry	25	1/26/18 8:00	1/26/18 23:02	SW8260B R2	JKK
*Toluene		174	30.0		mg/Kg dry	5000	1/31/18 8:00	1/31/18 11:10	SW8260B R2	JKK
*Xylenes (total)		231	8.99		mg/Kg dry	500	1/29/18 10:27	1/30/18 2:42	SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		83.4	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	2						Lab ID: 11	3A0448-02		
Collection Date:	1/19/18 10:00						Matrix: Se			
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	nds by GC-MS									
*Benzene		8.73	0.667		mg/Kg dry	100	1/26/18 8:00	1/26/18 23:31	SW8260B R2	JKK
*Ethylbenzene		20.0	0.667		mg/Kg dry	100	1/26/18 8:00	1/26/18 23:31	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.167		mg/Kg dry	25	1/25/18 10:00	1/25/18 14:15	SW8260B R2	JKK
*Toluene		77.3	3.34		mg/Kg dry	500	1/29/18 10:27	1/29/18 12:34	SW8260B R2	JKK
*Xylenes (total)		111	10.0		mg/Kg dry	500	1/29/18 10:27	1/29/18 12:34	SW8260B R2	ЈКК
Conventional Chemistry	Parameters									
Percent Solids		75.0	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	3						Lab ID: 1	3A0448-03		
Collection Date:	1/19/18 10:30						Matrix: Se			
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	nds by GC-MS									
*Benzene		3.07	0.158		mg/Kg dry	25	1/25/18 10:00	1/25/18 14:43	SW8260B R2	JKK
*Ethylbenzene		5.55	0.158		mg/Kg dry	25	1/25/18 10:00	1/25/18 14:43	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.158		mg/Kg dry	25	1/25/18 10:00	1/25/18 14:43	SW8260B R2	JKK
*Toluene		22.8	0.633		mg/Kg dry	100	1/26/18 8:00	1/26/18 23:59	SW8260B R2	JKK
*Xylenes (total)		29.4	1.90		mg/Kg dry	100	1/26/18 8:00	1/26/18 23:59	SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		79.0	0.100		%	I	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS

			LAB	ORAT	ORY RESU	LTS				
Client:	Chase Environn	nental								
Project:	Hucks #134						Lab Order: 1	8A0448		
Client Sample ID:	4						Lab ID: 1	8A0448-04		
Collection Date:	1/19/18 13:45						Matrix: S	olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS									
*Benzene		U	0.00495		mg/Kg dry	1	1/25/18 10:00	1/25/18 16:36	SW8260B R2	JKK
*Ethylbenzene		U	0.00495		mg/Kg dry	1	1/25/18 10:00	1/25/18 16:36	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00495		mg/Kg dry	1	1/25/18 10:00	1/25/18 16:36	SW8260B R2	JKK
*Toluene		U	0.00495		mg/Kg dry	1	1/25/18 10:00	1/25/18 16:36	SW8260B R2	ЈКК
*Xylenes (total)		U	0.0148		mg/Kg dry	1	1/25/18 10:00	1/25/18 16:36	SW8260B R2	ЈКК
Conventional Chemistry	Parameters									
Percent Solids		78.6	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	5						Lab ID: 1	8A0448-05		
Collection Date:	1/19/18 14:00						Matrix: S			
Analyses	1.1.2.2.2.2.2.2	Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS								1 ( A) ( A)	
*Benzene	1917 C. 1918	U	0.00512		mg/Kg dry	i.	1/25/18 10:00	1/25/18 17:04	SW8260B R2	JKK
*Ethylbenzene		U	0.00512		mg/Kg dry	1	1/25/18 10:00	1/25/18 17:04	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00512		mg/Kg dry	1	1/25/18 10:00	1/25/18 17:04	SW8260B R2	ЈКК
*Toluene		U	0.00512		mg/Kg dry	1	1/25/18 10:00	1/25/18 17:04	SW8260B R2	JKK
*Xylenes (total)		U	0.0154		mg/Kg dry	1	1/25/18 10:00	1/25/18 17:04	SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		79.4	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	6						Lab ID: 1	8A0448-06		
Collection Date:	1/19/18 14:10							olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS									
*Benzene		U	0.0112		mg/Kg dry	1	1/26/18 8:00	1/27/18 0:27	SW8260B R2	JKK
*Ethylbenzene		U	0.0112		mg/Kg dry	1	1/26/18 8:00	1/27/18 0:27	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.0112		mg/Kg dry	1	1/26/18 8:00	1/27/18 0:27	SW8260B R2	JKK
*Toluene		U	0.0112		mg/Kg dry	1	1/26/18 8:00	1/27/18 0:27	SW8260B R2	JKK
*Xylenes (total)		U	0.0337		mg/Kg dry	1	1/26/18 8:00	1/27/18 0:27	SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		82.4	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS

		LAB	ORAT	ORY RESU	LTS				
Client:	Chase Environmenta	1							
Project:	Hucks #134					Lab Order: 1	8A0448		
Client Sample ID:	7						8A0448-07		
Collection Date:	1/19/18 14:20					Matrix: S			
Analyses	Re	sult Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analys
Volatile Organic Compo	unds by GC-MS				1.1				
*Benzene		U 0.00431		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:00	SW8260B R2	JKK
*Ethylbenzene		U 0.00431		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:00	SW8260B R2	JKK
*Methyl tert-butyl ether		U 0.00431		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:00	SW8260B R2	JKK
*Toluene	0.008	884 0.00431		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:00	SW8260B R2	JKK
*Xylenes (total)	0.01	0.0129		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:00	SW8260B R2	ЈКК
Conventional Chemistry	Parameters								
Percent Solids		<b>4.0</b> 0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	8					Lab ID: 1	8A0448-08		-
Collection Date:	1/19/18 14:30					Matrix: S			
Analyses	Res	sult Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS	and an and a second							
*Benzene		U 0.00482		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:29	SW8260B R2	JKK
*Ethylbenzene		U 0.00482		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:29	SW8260B R2	JKK
*Methyl tert-butyl ether		U 0.00482		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:29	SW8260B R2	JKK
*Toluene	0.006	0.00482		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:29	SW8260B R2	JKK
*Xylenes (total)		U 0.0145		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:29	SW8260B R2	ЈКК
Conventional Chemistry	Parameters								
Percent Solids		9.9 0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	9				_	Lab ID: 1	8A0448-09		
Collection Date:	1/19/18 14:40					Matrix: S			
Analyses	Res	sult Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	ands by GC-MS					1000			
*Benzene	ACT OF STATE	U 0.00442		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:57	SW8260B R2	JKK
*Ethylbenzene		U 0.00442		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:57	SW8260B R2	JKK
*Methyl tert-butyl ether		U 0.00442		mg/Kg dry	I	1/25/18 10:00	1/25/18 18:57	SW8260B R2	JKK
*Toluene		U 0.00442		mg/Kg dry	T	1/25/18 10:00	1/25/18 18:57	SW8260B R2	JKK
*Xylenes (total)		U 0.0133		mg/Kg dry	1	1/25/18 10:00	1/25/18 18:57	SW8260B R2	JKK
Conventional Chemistry	Parameters								
		2.2 0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS

			LABO	DRATO	ORY RESU	LTS				
Client:	Chase Environm	nental								
Project:	Hucks #134						Lab Order: 1	8A0448		
Client Sample ID:	10							8A0448-10		
Collection Date:	1/19/18 14:50						Matrix: S	olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	inds by GC-MS									
*Benzene		U	0.00453		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:26	SW8260B R2	JKK.
*Ethylbenzene		U	0.00453		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:26	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00453		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:26	SW8260B R2	JKK
*Toluene		U	0.00453		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:26	SW8260B R2	JKK
*Xylenes (total)		U	0.0136		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:26	SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		81.9	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	11		_				Lab ID: 1	8A0448-11		
Collection Date:	1/19/18 15:00						Matrix: S			
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	inds by GC-MS									
*Benzene		U	0.00531		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
*Ethylbenzene		U	0.00531		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00531		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
*Toluene		U	0.00531		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
*Xylenes (total)		U	0.0159		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		82.9	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	12						Lab ID: 1	8A0448-12		
Collection Date:	1/19/18 15:10						Matrix: S			
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	nds by GC-MS									
*Benzene		U	0.00525		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	JKK
*Ethylbenzene		U	0.00525		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	ЈКК
*Methyl tert-butyl ether		U	0.00525		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	JKK
*Toluene		U	0.00525		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	JKK
*Xylenes (total)		U	0.0157		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	ЈКК
Conventional Chemistry	Parameters									
Percent Solids		79.7	0.100		%	1	1/26/18 9:55	1/29/18 8:46	<b>ASTM D2974</b>	DMS

			LABO	ORAT	ORY RESU	LTS				
Client:	Chase Environ	mental								
Project:	Hucks #134						Lab Order: 1	8A0448		
Client Sample ID:	13						Lab ID: 1	8A0448-13		
Collection Date:	1/19/18 15:20						Matrix: S	olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	inds by GC-MS									
*Benzene		U	0.00522		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	JKK
*Ethylbenzene		U	0.00522		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00522		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	JKK
*Toluene		U	0.00522		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	JKK.
*Xylenes (total)		U	0.0156		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	ЈКК
Conventional Chemistry	Parameters									
Percent Solids		78.4	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	14						Lab ID: 1	8A0448-14		
Collection Date:	1/19/18 15:30							olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	inds by GC-MS					100			1.	
*Benzene		U	0.00594		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	SW8260B R2	JKK
*Ethylbenzene		U	0.00594		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00594		mg/Kg dry	4	1/25/18 10:00	1/25/18 21:19	SW8260B R2	JKK
*Toluene		U	0.00594		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	SW8260B R2	JKK
*Xylenes (total)		υ	0.0178		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	SW8260B R2	ЈКК
Conventional Chemistry	Parameters									
Percent Solids		74.3	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	15						Lab ID: 1	3A0448-15		
Collection Date:	1/19/18 15:40							olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	nds by GC-MS									
*Benzene		U	0.00481		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:47	SW8260B R2	JKK
*Ethylbenzene		U	0.00481		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:47	SW8260B R2	JKK
*Methyl tert-butyl ether		0.00495	0.00481		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:47	SW8260B R2	JKK
*Toluene		U	0.00481		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:47	SW8260B R2	JKK
*Xylenes (total)		U	0.0144		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:47	SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		78.3	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS

### PDC Laboratories, Inc.

	LAB	DRATORY RESULTS	
Client: Project:	Chase Environmental Hucks #134	Lab Order: 18A0448	
-	Note	and Definitions	_
S	Spike recovery outside acceptance limits.		
R	RPD outside acceptance limits.		
*	NELAC certified compound.		
U	Analyte not detected (i.e. less than RL or MDL).		

### Chain of Custody Record

PAS COC Rev. 3

# Electronic Filing: Received, Clerk's Office 2/25/2021

Prairie Analytical

Central IL - 1210 Capital Airport Drive - Springfield, IL 62707-8490 - Phone (217) 753-1148 - Facsimile (217) 753-1152 Chicago IL Office - 9114 Virginia Rd., Ste 112 - Lake in the Hills, IL 60156 - Phone (847) 651-2604 - Facsimile (847) 458-9680 Central/Southern IL Office - Phone (217) 414-7762 - Facsimile (217) 223-7922

Client	Chase Envi	conmente	10	7	K			10	ww.prairieanalytical
Address	@ 2701 Ea	st Ash	bla 1	Inc		Analysis and/or Method	I Requested		Reporting
City, State, Zip Code	Springfield		704	).	- ut				8 Resid
Phone / Facsimile	217-610-191	6.			MTBE				Ind/Con
Project Name / Number	Hur K's #134	6			E				
Project Location	HUCHSTIST				2				CALM
O. # or Invoice To					×				
Contact Person					- Tu				O Resid
Sample Description	Sampling Date Time	Matrix Code	Preserv No. of Code Containers	Sample Type Comp Grab					Sampler Comm
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3	1 1030								
4	1345								
5	1403								
1	14								
- 6	19								
	1420								
8	1430								
9	1440						1		
10	1450								
11	1500								
12	+ 1510	*	* *	+	-				
Matrix Code Preserv Code	A - Aqueous 0 - None	DW - Drinking Wa		Ground Water	NA - Non-Aqueous	Liquid S - Solid		0-01	X - Other (Specif
All and the second s	quished By	1 - HCI Date	2 Time	- H2SO4	3 - HNO3	4 - NaOH		5 - 5035 Kit	X - Other (Specif
Male		1-24-18		1	Received	Ву	Date	Time	Method of Shipm
P	C		-	21	-5-	>	1-24-18	11:00	tind
	>	1-24-18	12:30			>	1.24.18	1230	
lal Instructions:						V			
<i>D</i>					Turnaround Time: S Date Required:	tandard 🖄 Rush	QC Level	On wet ice?	Temperature (*(
f o					Date Required		1 2 3 4	Yes No	2.6

### Chain of Custody Record

PAS COC Rev. 3

# Electronic Filing: Received, Clerk's Office 2/25/2021

Prairie Analytical

www.prairieanalytical.com

Central IL - 1210 Capital Airport Drive - Springfield, IL 62707-8490 - Phone (217) 753-1148 - Facsimile (217) 753-1152 Chicago IL Office - 9114 Virginia Rd., Ste 112 - Lake in the Hills, IL 60156 - Phone (847) 651-2604 - Facsimile (847) 458-9680 Central/Southern IL Office - Phone (217) 414-7762 - Facsimile (217) 223-7922

Client	Chase	Envi	onmer	ital	Grou	P. II	AC-		Analysis	and/or Method	Requested	Part		Reporting
Address														Resid
City, State, Zip Code								111					1 6	] Ind/Com
Phone / Facsimile								HTBE						
Project Name / Number								E					N	
Project Location								12					OA	
P.O. # or Invoice To	A							X						
Contact Person								E					00	] Resid
Sample Description	San Date	npling Time	Matrix Code	Preserv		Sample		3						] Indust
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Reling	uished By		Date		Time		-	and the second se	Ived By	4 - NaUH	Date	5 - 5035 Kit		ther (Specify
un		>	1-24-	18 1	1:00	-	R	-1	C			Time	111	t of Shipme
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			1-24-1	0	2.30	-		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			1.24-18	1230		
ial Instructions:							1	-	1	0				
ial Instructions:									ne: Standard 1	Rush	QC Level	On wet ice?		erature (°C
			_					Date Requir	ed.		1 2 3 4	(Yes) No	2.	le

Page 2 of Z



# Illinois Environmental Protection Agency

#### Bureau of Land • 1021 N. Grand Avenue E. • P.O. Box 19276 • Springfield • Illinois • 62794-9276

The Agency is authorized to require this information under Section 4 and Title XVI of the Environmental Protection Act (415 ILCS 5/4, 5/57 – 57.17). Failure to disclose this information may result in a civil penalty of not to exceed \$50,000.00 for the violation and an additional civil penalty of not to exceed \$10,000.00 for each day during which the violation continues (415 ILCS 5/42). Any person who knowingly makes a false material statement or representation, orally or in writing, in any label, manifest, record, report, permit, or license, or other document filed, maintained or used for the purpose of compliance with Title XVI commits a Class 4 felony. Any second or subsequent offense after conviction hereunder is a Class 3 felony (415 ILCS 5/44 and 57.17). This form has been approved by the Forms Management Center.

### Leaking Underground Storage Tank Program Laboratory Certification for Chemical Analysis

#### A. Site Identification

IEMA Incident # (6- or 8-digit): Site Name: 日してんらギロ	IEPA LPC# (10-digit): 0810305287
Site Address (Not a P.O. Box): City: M. Vernon	ZIP Code: 62864
Leaking UST Technical File	

#### B. Sample Collector

I certify that:

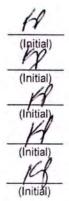
- 1. Appropriate sampling equipment/methods were utilized to obtain representative samples.
- 2. Chain-of-custody procedures were followed in the field.
- 3. Sample integrity was maintained by proper preservation.
- 4. All samples were properly labeled.

#### C. Laboratory Representative

I certify that:

- 1. Proper chain-of-custody procedures were followed as documented on the chain-of-custody forms
- 2. Sample integrity was maintained by proper preservation.
- 3. All samples were properly labeled.
- 4. Quality assurance/quality control procedures were established and carried out.
- 5. Sample holding times were not exceeded.

(Initia (Initial (Initial)



- 6. SW-846 Analytical Laboratory Procedure (USEPA) methods were used for the analyses.
- An accredited lab performed quantitative analysis using test methods identified in 35 IAC 186.180 (for samples collected on or after January 1, 2003).



### D. Signatures

I hereby affirm that all information contained in this form is true and accurate to the best of my knowledge and belief. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sample Collector	Laboratory Representative
Name Matthew Rives	Name Kristen Potter
Title Engineer	Title Project Managle
Company Chase Environmental Inc.	Company Brairie Analytical Systems, Inc. PDC Sofld, 14
Address 2701 East Ash St. Bldg. B	Address 1210 Capital Airport Drive
City Springfield	City Springfield
State IL	State IL
Zip Code 62703	Zip Code 62702
Phone 2176701916	Phone 217-753-1148
Signature Mc	Signature Lus Toch
Date 1/19/18	Date2/5/18
	, ,

# Appendix C OSFM Removal Permit



Office of the Illinois State Fire Marshal Division of Petroleum and Chemical Safety 1035 Stevenson Drive Springfield, IL 62703 2177851020

#### FOR OFFICE USE ONLY

Facility # 7021661 Permit # 01568-2017REM Request Rec'd 12/14/2017 Amended Date Approval Date 12/18/2017 DS Permit Expires 6/19/2018

#### Permit for REMOVAL of Underground Storage Tank(s) and Piping for Petroleum and Hazardous Substances.

Permission to remove underground storage tank(s) or piping is hereby granted. Such removal shall not commence until the contractor the permit was issued to or an employee of that contractor (this does not include a subcontractor) shall establish a date certain to perform the UST activity by contacting the Office of the State Fire Marshal, Division of Petroleum and Chemical Safety, at which time the UST activity shall be scheduled. THIS PERMIT IS VALID FOR SIX MONTHS FROM THE APPROVAL DATE.

<ol> <li><u>OWNER OF TANKS</u> - Corporation, partnership, or other business entity:</li> </ol>	(2) FACILITY - name and address where tanks are located:
Martin & Bayley, Inc. 1311 A. W. Main Street P.O. Box 385 Carmi, IL 62821	Huck's #134 540 Airport Road Mount Vernon, IL 62864
Contact: Troy Dietz (618) 382-2334 Ext. 268	Contact: Jina Henry (618) 382-2334

#### (3) REMOVAL OF TANKS:

- (a) Number and size of tanks being removed: (TK # 1, 2) 10,000
- (b) Description/location of piping being removed:
- (c) Product to be stored in each tank: (TK # 1, 2) Gasoline
- (d) Reason of tanks being removed:
- (e) If tank(s) is leaking, indicate IEMA incident number: 2017-1116
- (f) Date each tank was last used: (TK # 1, 2) Unknown
- (4) The owner must notify this Office when completion of tank removal has occurred, on the Notification for Underground Storage Tank Form. This form can be obtained at www.sfm.illinois.gov or by calling (217)785-1020. After removal is completed, the owner/operator shall perform a site assessment by measuring for the presence of a release where contamination is most likely to be present at the UST site. This is in accordance with the Illinois Administrative Code 176.360 (a) regulations and 40 CFR Part 280.72 (a) Federal Register Requirement.
- (5) SPECIAL CONTINGENCIES : UST, piping and vent lines to be removed.

#### (6) PERSON, FIRM OR COMPANY PERFORMING WORK:

Chase Environmental Group Inc. 11450 Watterson Court Louisville, KY 40299 Contact Person: Matt Rives Phone: (618) 533-6740 Contractor Registration # IL2036 Exp. 3/17/2019

Sincerely,

Daniel J. Starke

Daniel Starks

cc: Storage Tank Safety Specialist Division File

# Appendix D Photographic Documentation

Huck's #134 / Mount Vernon January 2018



1. The USTs were uncovered and liquids removed. Liquids were pumped from the USTs and associated product piping and stored on-site in 55-gallon drums until properly disposed of by First American Recovery and Recycle, Inc.

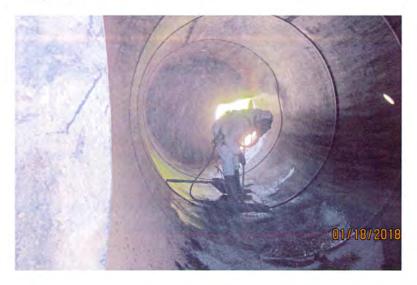


2. Concrete covering the UST tankhold and product piping trench was removed and piled on-site until disposal.



 USTs were ventilated with compressed air until the meter testing the lower explosive limit was consistently below 5% under supervision of the Illinois State Fire Marshal representative. Once achieved, USTs were removed from the tankhold and cut before cleaning.

Huck's #134 / Mount Vernon January 2018



 Once an opening was cut on both ends of the UST, Chase personnel entered the tank to remove solid materials and residual liquids. The entrant was properly equipped with Level B Personal Protection Equipment (PPE).



5. USTs were hauled from the site to a recycling facility.



6. Petroleum contaminated soils were hauled and properly disposed of by Charles H. Carter & Son, Inc. at the Wayne County Landfill. Groundwater exhibiting a petroleum sheen was encountered in the UST tankhold.

Huck's #134 / Mount Vernon January 2018



7. The associated product piping and contaminated soils from the piping trench was removed under the supervision of the Illinois State Fire Marshal representative.



8. Impacted groundwater from the UST tankhold and tank liquids from the site were removed and properly disposed of by First American Recovery and Recycle, Inc



9. After the removal of the USTs and contaminated soils, clean backfill materials were hauled to the site and filled into the tank pit excavation.

# Appendix E Copies of Manifests



# **NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

C. Generator's Name and Location: Marin & Bayley Inc Sol Apport Read M. Veron, IL 6284 I Stread I Str	I. GENERATOR (General a. Generator's US EPA ID Number	tor completes				1		
Martin & Bayky Inc.       Solvest Market Marke	a. Generator's US EPA ID Number		D. Manifest Docur	nent Number		c. Page		
If owner of the generating facility differs from the generator, provide: <ul> <li>i. Owner's Phone No::</li> <li>i. Ow</li></ul>	Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864			1311 West Main Stre Carmi, IL 62821	C.L. C. L. C.	1		
J. Waste Profile #       k. Exp. Date       L. Waste Shipping Name and Montaines       m. Ontaines       n. Total       o. Unit         4293180384       07/31/2018       LUST Soil - Unleaded       No.       Ton 3       18.5         CENERATOR'S GERTIFICATION:       Interby certify that the above named materials not a hazardous waste as defined by 40 CFR 261 or any applicable traductions. AND, This waste is a tradument residue of a previously restricted hazardous waste subject to the Land Disposal pration according to applicable regulations. AND, This waste is a tradument residue of a previously restricted hazardous waste subject to the Land Disposal pration according to applicable regulations. AND, This waste is a tradument residue of a previously restricted hazardous waste subject to the Land Disposal pration according to applicable regulations. AND, This waste is a tradument residue of a previously restricted hazardous waste subject to the Land Disposal pration according to applicable regulations. AND, This waste hazardous waste as defined by 40 CFR 261 or any applicable traductions. AND, This waste hazardous waste as defined by 40 CFR 261 or any applicable regulations. AND, This waste hazardous waste as defined by 40 CFR 263 or 10 to 16.2 for 30 to 20 CFR 263 or 10 to 16.2 for 30 to 20 CFR 263 or 10 to 16.2 for 30 to 20 CFR 263 or 10 to 16.2 for 30 to 20 CFR 263 or 10 to 16.2 for 30 to 20 CFR 263 or 10 to 16.2 for 30 to 20 CFR 263 or 10 to 16.2 for 30 to 20 CFR 263 or 10 to 20 CFR 264 or 10 to 20		from the generator	r, provide:	g. r none.				
4293180384       07/31/2018       Description       No.       Type       Quantity       WeVel         4293180384       07/31/2018       LUST Soil-Unleaded       No.       Type       Quantity       WeVel         4293180384       07/31/2018       LUST Soil-Unleaded       Tork 3       18.57         GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 281 or any applicable state law, has been properly described, classified and packaged, and is in proper controlling to applicable regulations, AND, if this waste is a treatment residue of a Previous previou				i. Owner's Phone No	o.:			
4223180384       07/31/2018       LUST Soil - Unleaded       Ton 3       18,5         GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations, AND, if this waste is a tentment residue of a proviously restricted hazardous waste subject to the Lud Disposal Restrictions. I. certify and warrant that the waste has been transported material and accordance with the requirements of 40 CFR 263 and is no longer a hazardous waste as defined by 40 CFR 261.         Mailteur Rives       0. Centrelator Authorized Agent Name (Print)       9. Signature       1 · 1.8 / 1.9         II.       TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)       a. Transporter Name and Address.         Carter Name (Print)       1.9.Signature       e. Date       1 / 1.8 / 1.8         C. Drew Name (Print)       1.9.Signature       e. Date       1 / 1.8 / 1.8         C. Drew Name (Print)       1.9.Signature       e. Date       1 / 1.8 / 1.8         D. Drew Name (Print)       1.9.Signature       e. Date       1 / 1.8 / 1.8         D. Drew Name (Print)       1.9.Signature       e. Date       1 / 1.8 / 1.8         D. Drew Name (Print)       1.9.Signature       g. Date       1 / 1.8 / 1.8       1 / 1.8 / 1.8         Drew Name (Print)       1.9.Signature	j. Waste Profile #	k. Exp. Date		ping Name and		1	[1] C.G.M. D. 100000	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable table requirements of 40 CFR 268 and is no proper condition for transportations. All of this waste is a technical by 40 CFR 261 or any applicable been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261 or any applicable been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.         Matthew Rives	4293180384	07/31/2018		Jnleaded	NO.	Туре	Quantity	
State law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste used to be the treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste used to be the treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste used to be the treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.         Matthew Rives       I - 18 - 19         D. Generator Authorized Agent Name (Print)       g. Signature         I.       TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)         a. Transporter's Name and Address;       III.         Catter Trucking       III.         View Point       Generator complete IIIa-c and Destination Site completes IIId-g)         a. Disposal Facility and Site Address:       c. US EPA Number         d. Discrepancy Indication Space:       IIII.         Wayne County Landfill       C. US EPA Number         d. Discrepancy Indication Space:       IIII.         Soft (Mathith, Babove named material has been accepted/and to the post of my knowledge the foregoing is true and accurate.         Soft (Mathith, Babove named material has been accepted/and to the post of my knowledge the foregoing is true and accurate.         Soft (Mathith, Babove named material has been accepted/and to the post of my knowledge the fore							Tons	18,58
State law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste used to be the treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste used to be the treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste used to be the treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.         Matthew Rives       I - 18 - 19         D. Generator Authorized Agent Name (Print)       g. Signature         I.       TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)         a. Transporter's Name and Address;       III.         Catter Trucking       III.         View Point       Generator complete IIIa-c and Destination Site completes IIId-g)         a. Disposal Facility and Site Address:       c. US EPA Number         d. Discrepancy Indication Space:       IIII.         Wayne County Landfill       C. US EPA Number         d. Discrepancy Indication Space:       IIII.         Soft (Mathith, Babove named material has been accepted/and to the post of my knowledge the foregoing is true and accurate.         Soft (Mathith, Babove named material has been accepted/and to the post of my knowledge the foregoing is true and accurate.         Soft (Mathith, Babove named material has been accepted/and to the post of my knowledge the fore			1	icket	514			
p. Generator Authorized Agent Name (Print)       g. signature       r. Date         II.       TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)       a. Transporter's Name and Address:         Carter Trucking       TWilliamson Dr.         Pairfield, II 62837       D. A. K. N. Complete IIIa-c and Destination Site completes IIId-g)         a. Disposal Facility and Site Address:       a. US EPA Number         R1 PO Box 214       C. US EPA Number         Pairfield, II 62837       D. Discrepancy Indication Space:         Wayne County Landfill       R1 PO Box 214         Fairfield, II 62837       D. Phone:         D. Phone:       g. Date         IV.       ASBESTOS (Generator completes IV-4 f and Operator complete IVg-i)         a. Operator's Name and Address:       g. Date         IV.       ASBESTOS (Generator completes IV-4 f and Operator complete IVg-i)         a. Operator's Name and Address:       g. Phone:         e. Special Handling Instructions and Additional Information:       g. Phone:         g. Operator's Name and Address:       g. Non-Friable         OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national appreximations.	state law, has been properly described, waste is a treatment residue of a previou	classified and pack sly restricted haza	kaged, and is in prope ardous waste subject	er condition for transpo to the Land Disposal F	rtation according	g to applic ertify and v D CFR 26	cable regulations warrant that the v 1.	AND if this
II.       TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)         a. Transporter's Name and Address:         Carter Trucking         YWilliamson Dr.         Fairfield, II. (2837)         b. Phone:         DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)         a. Disposal Facility and Site Address:         Wayne County Landfill         RR 1 PO Box 214         Fairfield, II. 62837         b. Phone:         C. US EPA Number         d. Discrepancy Indication Space:         Wayne County Landfill         RR 1 PO Box 214         Fairfield, II. 62837         b. Phone: 61842.4294         Inctry certify that, the above named material has been accepted/and to the pest of my knowledge the foregoing is true and accurate.         Sock+///Warting         Inctry certify that, the above named material has been accepted/and to the pest of my knowledge the foregoing is true and accurate.         Sock+///Warting         Inctry certify that, the above named material has been accepted/and to the pest of my knowledge the foregoing is true and accurate.         Sock+///Warting         In the certify that, the above named material has been accepted/and to the pest of my knowledge the foregoing is true and accurate.         Sock+///Warting         In thety certify that, the above	Matthew Rives		Ma			1-10	9-18	
a. Transporter's Name and Address: Carter Trucking TWilliamson Dr. Parifield, II 62837 b. Phone: a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Farifield, IL 62837 b. Phone: 618.842.4294 Interty certify that,the above named material has been accepted/and to the pest of my knowledge the foregoing is true and accurate. Scatt Junc Cart Junc Cart Junc Cart Junc Carter Completes IVa-f and Operator complete IVg-i) a. Operator's Name and Address: b. Phone: c. Special Handling Instructions and Additional Information: f. Friable Non-Friable Both % Friable % Non-Friable OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						r. Date		
Carter Trucking YWilliamson Dr. Fairfield    162837 b. Phone: C. Driver Name (Print) C. Driver Name (Print) C. Driver Name (Print) C. Driver Name (Print) C. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g) a. Disposal Facility and Site Address: C. US EPA Number C. ASBESTOS C. Generator completes IVa-f and Operator complete IVg-i) C. Responsible Agency Name and Address: C. Special Handling Instructions and Additional Information: C. Especial Handling Instructions and Additional Information:		erator complete	es Ila-b and Trar	sporter completes	llc-e)			
III.       DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)         a. Disposal Facility and Site Address:       C. US EPA Number       d. Discrepancy Indication Space:         Wayne County Landfill       RR 1 PO Box 214       G. US EPA Number       d. Discrepancy Indication Space:         Fairfield, IL 62837       D. Phone: 618.842.4294       Interby certify that the above named material has been accepted/and to the best of my knowledge the foregoing is true and accurate.         Scht/math       Julian       Julian       Julian         e. Name of Authorized Agent (Print)       f. Signature       g. Date         IV.       ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)       a. Operator's Name and Address:         b. Phone:       d. Phone:       c. Responsible Agency Name and Address:         b. Phone:       d. Phone:       d. Phone:         e. Special Handling Instructions and Additional Information:       4. Phone:         f.       Friable       Non-Friable         OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.         g. Operator's Name and Title (Print)       h. Signature       i. Date       AR-0052	7 Williamson Dr. Fairfield, II 62837 b. Phone: John RANK:	1 6	K Ran	L		1/1	8/18	
a. Disposal Facility and Site Address:       c. US EPA Number       d. Discrepancy Indication Space:         Wayne County Landfill       R1 PO Box 214       Fairfield, IL 62837       b. Discrepancy Indication Space:         b. Phone:       618.842.4294       Interby certify that the above named material has been accepted/and to the best of my knowledge the foregoing is true and accurate.       Interby certify that the above named material has been accepted/and to the best of my knowledge the foregoing is true and accurate.         Soft       Image: Count				tion Site complete				
Scatt / Jun Cant       Julian       1-18-15         e. Name of Authorized Agent (Print)       f. Signature       g. Date         IV.       ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)       a.         a. Operator's Name and Address:       c. Responsible Agency Name and Address:         b. Phone:       d. Phone:         e. Special Handling Instructions and Additional Information:         f.       Friable         Deerator's CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.         g. Operator's Name and Title (Print)       h. Signature         i. Date       A.R. 0052         "Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or	a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294		c. US EPA Num	ber d. Discrepancy	Indication Space			
e. Name of Authorized Agent (Print)     f. Signature     g. Date     IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)     a. Operator's Name and Address:	- 41/7 +	enal has been aco	epied/and to the pesi	or my knowledge the t	foregoing is true	8-11	rate.	
IV.       ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)         a. Operator's Name and Address:       c. Responsible Agency Name and Address:         b. Phone:       d. Phone:         e. Special Handling Instructions and Additional Information:       d. Phone:         f.       Friable       Non-Friable         OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.         g. Operator's Name and Title (Print)       h. Signature         i. Date       A.R. 0052         *Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or	Dur Van	f Clan	Serter /		- /-/	0 10	2	
a. Operator's Name and Address:     b. Phone:     c. Responsible Agency Name and Address:     b. Phone:     d. Phone:     e. Special Handling Instructions and Additional Information:     f				complete IVa-i)	g, Date			
e. Special Handling Instructions and Additional Information:          f.       Friable       Non-Friable       Both       % Friable         OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.         g. Operator's Name and Title (Print)       h. Signature       i. Date       A.R. 0052         *Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or					y Name and Ado	dress:		
e. Special Handling Instructions and Additional Information:          f.       Friable       Non-Friable       Both       % Friable         OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.         g. Operator's Name and Title (Print)       h. Signature       i. Date       A.R. 0052         *Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or	b. Phone:			d. Phone:				
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.         g. Operator's Name and Title (Print)       h. Signature       i. Date       A.R. 0052         *Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or		tional Information:						
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or	OPERATOR'S CERTIFICATION: I hereb and are classified, packed, marked and la	y declare that the	contents of this consi	gnment are fully and a	ccurately descril by highway acco	bed above ording to a	e by proper shipp applicable interna	bing name ational and
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or								
				rvises the facility being		renovated		on or



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

		b. Manifest Docun	nent Number 2	C. F	age 1 of 1			
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 5. Phone:618-382-2334			e. Generator's Mailing Ad 1311 West Main Street Carmi, IL 62821 g. Phone:	dress:				
f owner of the generating facility diff	fers from the generator,	provide:	1000 200					
n. Owner's Name:			i. Owner's Phone No.:	m. Containers n. Total o. Ur				
. Waste Profile #	k. Exp. Date		pping Name and	m. Containe	o. Unit			
		Description No.			pe Quantity	Wt/Vol		
4293180384	07/31/2018	LUSTSOIL	, .	τ				
					Tons	12e.2		
GENERATOR'S CERTIFICATION:		Tict						
state law, has been properly describ waste is a treatment residue of a pre been treated in accordance with the Matthew Rives	eviously restricted haza requirements of 40 CF	rdous waste subject R 268 and is no long	t to the Land Disposal Restr	ictions. I certify	and warrant that the v	waste has		
. Generator Authorized Agent Nam	ne (Print) c	. Signature		r. D	ate			
I. TRANSPORTER (C	Generator complete	es Ila-b and Trai	nsporter completes llc	-e)				
	1							
Williamson Dr. Fairfield ,II 62837 D. Phone:		aturn Rth A	1 as A	e Date 1	18.18	_		
c. Driver Name (Print) Ref. V	Cherrelo d. Sign	ature Rivin A			15-18			
airfield ,II 62837 D. Phone: Driver Name (Print) Poly V II. DESTINATION (Gen	nerator complete II	la-c and Destination	ation Site completes II	ld-g)	15.18			
Eairfield ,II 62837 D. Phone: D. Driver Name (Print) Red V DESTINATION (Gen A. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837	nerator complete II	ature Rtw 1 Ia-c and Destina c. US EPA Nun	ation Site completes II	ld-g)	15.18			
Eairfield ,II 62837 D. Phone: C. Driver Name (Print) Red - V II. DESTINATION (Gen A. Disposal Facility and Site Address Nayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618 842 4294	nerator complete II s:	Ia-c and Destina	ation Site completes II nber d. Discrepancy India	ld-g) ation Space:				
airfield ,II 62837 D. Phone: Driver Name (Print) Red - V II. DESTINATION (Gen A. Disposal Facility and Site Address Nayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618.842.4294 herby certify that the above named	nerator complete II s:	Ia-c and Destina	ation Site completes II nber d. Discrepancy India	ld-g) ation Space:				
airfield ,II 62837 D. Phone: Driver Name (Print) RC V II. DESTINATION (Gen a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618.842.4294 herby certify that the above named Scott Van Zant	merator complete II s: d material has been acc	epted and to the bes	ation Site completes II nber d. Discrepancy India	id-g) sation Space: going is true and				
Eairfield ,II 62837 D. Phone: D. Driver Name (Print) Ref. V II. DESTINATION (Get a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618.842.4294 herby certify that the above named SCH Van Zan (Print) B. Name of Authorized Agent (Print)	d material has been acc	epted and to the beau ature	ation Site completes II nber d. Discrepancy India	ld-g) ation Space:				
airfield ,II 62837 D. Phone: Driver Name (Print) Ref. V II. DESTINATION (Gel Disposal Facility and Site Address Nayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618.842.4294 herby certify that the above named SCH Van Zant Name of Authorized Agent (Print) V. ASBESTOS (General Science State St	d material has been acc	epted and to the beau ature	ation Site completes II nber d. Discrepancy India	id-g) ation Space: going is true and J-/S g. Date	accurate.			
Eairfield ,II 62837 D. Phone: D. Driver Name (Print) Ref. V II. DESTINATION (Gel a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618.842.4294 herby certify that the above named SCH Van Zant D. Name of Authorized Agent (Print) V. ASBESTOS (General Contemportation of the second seco	d material has been acc	epted and to the beau ature	ation Site completes II nber d. Discrepancy India	id-g) ation Space: going is true and J-/S g. Date	accurate.			
a Disposal Facility and Site Address Nayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618.842.4294 herby certify that the above named Scott Van Zant D. Name of Authorized Agent (Print) V. ASBESTOS (General a. Operator's Name and Address:	d material has been acc	epted and to the beau ature	ation Site completes II nber d. Discrepancy India	id-g) ation Space: going is true and J-/S g. Date	accurate.			
airfield ,II 62837 Driver Name (Print) Disposal Facility and Site Address Nayne County Landfill R 1 PO Box 214 Fairfield, IL 62837 Denne: 618.842.4294 herby certify that the above named SCH Van Cant Name of Authorized Agent (Print) V. ASBESTOS (General A. Operator's Name and Address: Denne:	a material has been acc	Ia-c and Destina c. US EPA Num epted and to the bea ature a-f and Operator	ation Site completes II nber d. Discrepancy India St of my knowledge the fore m Complete IVg-i) c. Responsible Agency Na	id-g) ation Space: going is true and J-/S g. Date	accurate.			
Fairfield ,II 62837       Control Restriction         2. Driver Name (Print)       Restriction         3. Disposal Facility and Site Address         Wayne County Landfill         RR 1 PO Box 214         Fairfield, IL 62837         2. Phone: 618.842.4294         herby certify that the above named         Scott       Van Zant         A. Name of Authorized Agent (Print)         IV.       ASBESTOS (General         a. Operator's Name and Address:         b. Phone:         e. Special Handling Instructions and	d material has been acconditional Information:	Ia-c and Destina c. US EPA Nun epted and to the bea ature a-f and Operator	ation Site completes II nber d. Discrepancy India St of my knowledge the fore m Complete IVg-i) c. Responsible Agency Na d. Phone:	Id-g) cation Space: going is true and J-/S g. Date	accurate.			
airfield ,II 62837 b. Phone: C. Driver Name (Print) C. Driver Name (Print) C. Driver Name (Print) C. Disposal Facility and Site Address Nayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618.842.4294 herby certify that the above named C. H. Van Cant C. Name of Authorized Agent (Print) V. ASBESTOS (General A. Operator's Name and Address: D. Phone: B. Special Handling Instructions and	d material has been acconnected in the second secon	Ia-c and Destina c. US EPA Nun epted and to the best ature a-f and Operator	Ation Site completes II nber d. Discrepancy India St of my knowledge the fore m Complete IVg-i) c. Responsible Agency Na d. Phone: % Non-Friable signment are fully and accu	Id-g) cation Space: going is true and J-/S g. Date me and Address me and Address	accurate.	ping name national and		
airfield ,II 62837 Driver Name (Print) Reg V II. DESTINATION (Gel Disposal Facility and Site Address Vayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 Dephone: 618.842.4294 herby certify that the above named Scott Van Zant Name of Authorized Agent (Print) V. ASBESTOS (Generation) Deprator's Name and Address: Dephone: Depression Scentifications and Depression Scentifications II and are classified, packed, marked	d material has been acconnected in the second secon	Ia-c and Destina c. US EPA Nun epted and to the best ature a-f and Operator	Ation Site completes II nber d. Discrepancy India St of my knowledge the fore m Complete IVg-i) c. Responsible Agency Na d. Phone: % Non-Friable signment are fully and accu	Id-g) cation Space: going is true and J-/S g. Date me and Address me and Address	accurate.	pping name national and		
airfield ,II 62837 Phone: Driver Name (Print) Rel V Disposal Facility and Site Address Vayne County Landfill RR 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294 herby certify that the above named Scht Van Zant Name of Authorized Agent (Print) V. ASBESTOS (Generation) Operator's Name and Address: Phone: Special Handling Instructions and Friable Non-Friable D DPERATOR'S CERTIFICATION: If and are classified, packed, marked	d material has been according to the second	Ia-c and Destina c. US EPA Num epted and to the best ature a-f and Operator mable contents of this con all respects in prope	Ation Site completes II nber d. Discrepancy India St of my knowledge the fore m Complete IVg-i) c. Responsible Agency Na d. Phone: % Non-Friable signment are fully and accu- er condition for transport by b	Id-g) ation Space: going is true and /-/S g. Date me and Address mately described highway accordin	accurate.			



# Electronic Filing: Received, Clerk's Office 2/25/2021 **REPUBLIC NON-HAZARDOUS SPECIAL WASTE & ASBESTO NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

		b. Manifest Docur	ment Number -	3	c. Page	1 of 1		
d. Generator's Name and Location:			e. Generator's Mailing		1			
Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			1311 West Main Stree Carmi, IL 62821 g. Phone:	t				
If owner of the generating facility differ	s from the generator, j	provide:						
h. Owner's Name:			i. Owner's Phone No.:					
j. Waste Profile #	k. Exp. Date	I. Waste Ship	pping Name and	m. Co	ntainers	n. Total	o. Unit	
		Description		No.	Туре	Quantity	Wt/Vol	
4293180384	07/31/2018	LUST Soil - U	Juleaded	6				
						Tons	24,4	
		Ŧ	Ticket 151	6				
GENERATOR'S CERTIFICATION: I h state law, has been properly described waste is a treatment residue of a previo been treated in accordance with the re	I, classified and packa ously restricted hazard	ged, and is in prop lous waste subject	er condition for transport to the Land Disposal Re	ation accordin strictions. I c	ng to applic	able regulations; warrant that the w	AND, if this	
Matthew Rives	1	110			1-	18-18		
p. Generator Authorized Agent Name (	(Print) g.	Signature			r. Date	.0 10		
II. TRANSPORTER (Ge		s Ila-b and Tran	nsporter completes	lc-e)				
Carter Trucking								
7 Williamson Dr. Fairfield ,II 62837 b. Phone:	)	110	~	1/-	18-1	8		
7 Williamson Dr. Fairfield, 11 62837 b. Phone: Rulan Vaces ht	) d. Signa	ture	×		18-1	8		
7 Williamson Dr. Fairfield, 11 62837 b. Phone: Ry/an Vaceght c. Driver Name (Print)			ation Site completes	e. Date	18-1	8		
7 Williamson Dr. Fairfield ,II 62837 b. Phone: Ryan Vaceo ht c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294	rator complete IIIa	a-c and Destina	ber d. Discrepancy In	e. Date IIId-g) dication Spac	e:			
7 Williamson Dr. Fairfield, II 62837 b. Phone:	rator complete IIIa	a-c and Destina	ber d. Discrepancy In	e. Date IIId-g) dication Spac	e: e and accu	arate.		
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7 Williamson Dr. Fairfield, II 62837 b. Phone: $R_{V/AV}$ $V_{A(eg, h+1)}$ c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named main Scott VaaCad e. Name of Authorized Agent (Print)	aterial has been accep	c. US EPA Num	t of my knowledge the fo	e. Date IIId-g) dication Spac	e: e and accu	arate.		
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# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

a the second		b. Manifest Doc	ument Number 2	1	c. Page	1 07			
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334		1	e. Generator's Mailing A 1311 West Main Street Carmi, IL 62821 g. Phone:	ddress:					
f owner of the generating facility diffe	ers from the gener	ator, provide:	1 St. 3						
			i. Owner's Phone No .:						
n. Owner's Name: . Waste Profile #	k. Exp. Dat	e I. Waste S	hipping Name and	m. Cor	tainers	n. Total	o. Unit		
, waste Frome #	in Light	Description	n	No.	Туре	Quantity	Wt/Vol		
4293180384	07/31/2018	LUST Soil	- Unleaded	10					
						Tons	16.64		
		-	TickeFIST	z					
GENERATOR'S CERTIFICATION: I state law, has been properly describe waste is a treatment residue of a pre been treated in accordance with the	ed, classified and	packaged, and is in p bazardous waste subi	ect to the Land Disposal Res	strictions. I c	ertify and	warrant that the w	AND, I this		
Arra - Walter - Contractor		11 -	-		1-	18 18			
Matthew Rives	o (Drint)	q. Signature	8	100 million (1990)	r. Date	- 13			
p. Generator Authorized Agent Name	Concertor com		ransporter completes I	lc-e)	1	2 A 4			
a. Transporter's Name and Address:		pictos na b ana i	idioportor compreter i				_		
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837	>	1				1.92			
u, Filolie.					- 1 8	X			
1600 VanGorder	d	Signature		e. Date		. 0			
C. Driver Name (Print)		Signature	tination Site completes			<u>, U</u>			
c. Driver Name (Print) III. DESTINATION (Gen a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837	nerator comple s:	Signature ete IIIa-c and Desi		IIId-g) dication Space					
c. Driver Name (Print) III. DESTINATION (Gen a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837	nerator comple s:	Signature ete IIIa-c and Desi	lumber d. Discrepancy In	IIId-g) dication Space	e and acc	surate.			
c. Driver Name (Print) III. DESTINATION (Ger a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named	nerator comple s:	Signature ete IIIa-c and Desi	lumber d. Discrepancy In	IIId-g) dication Space	e and acc	curate.			
c. Driver Name (Print) III. DESTINATION (Ger a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scott Van Zant	nerator comple s: I material has bee	Signature ete IIIa-c and Desi	lumber d. Discrepancy In	IIId-g) dication Space		surate.			
c. Driver Name (Print) III. DESTINATION (Gen a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scott Van Zart e. Name of Authorized Agent (Print)	nerator comple s: I material has been	signature ete IIIa-c and Dest c. US EPA N n accepted and to the Signature	lumber d. Discrepancy In	IIId-g) dication Space	e and acc	surate.			
c. Driver Name (Print) III. DESTINATION (Ger a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scott Van Zant e. Name of Authorized Agent (Print) IV. ASBESTOS (General Scott State Sta	nerator comple s: I material has been	signature ete IIIa-c and Dest c. US EPA N n accepted and to the Signature	tor complete IVg-i)	IIId-g) dication Space regoing is tru g. Date	e and acc -18	surate.			
1100       Von Got (Ust)         c. Driver Name (Print)         III.       DESTINATION (Ger         a. Disposal Facility and Site Address         Wayne County Landfill         RR 1 PO Box 214         Fairfield, IL 62837         b. Phone: 618.842.4294         I herby certify that the above named         Scott Van Zont         e. Name of Authorized Agent (Print)         IV.       ASBESTOS (General	nerator comple s: I material has been	signature ete IIIa-c and Dest c. US EPA N n accepted and to the Signature	Aumber d. Discrepancy In best of my knowledge the fo tor complete IVg-i) c. Responsible Agency	IIId-g) dication Space regoing is tru g. Date	e and acc -18	curate.			
c. Driver Name (Print) III. DESTINATION (Ger a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scott Van Zant e. Name of Authorized Agent (Print) IV. ASBESTOS (Generic a. Operator's Name and Address: b. Phone:	merator complete	s IVa-f and Opera	tor complete IVg-i)	IIId-g) dication Space regoing is tru g. Date	e and acc -18	curate.			
1100       VonGortur         c. Driver Name (Print)         III.       DESTINATION (Ger         a. Disposal Facility and Site Address         Wayne County Landfill         RR 1 PO Box 214         Fairfield, IL 62837         b. Phone: 618.842.4294         I herby certify that the above named         Scott Van Zont         e. Name of Authorized Agent (Print)         IV.       ASBESTOS (General         a. Operator's Name and Address:	merator complete	s IVa-f and Opera	Aumber d. Discrepancy In best of my knowledge the fo tor complete IVg-i) c. Responsible Agency	IIId-g) dication Space regoing is tru g. Date	e and acc -18	curate.			
1100       VonGortum         c. Driver Name (Print)         III.       DESTINATION (Ger         a. Disposal Facility and Site Address         Wayne County Landfill         RR 1 PO Box 214         Fairfield, IL 62837         b. Phone: 618.842.4294         I herby certify that the above named         Scott Van Zant         e. Name of Authorized Agent (Print)         IV.       ASBESTOS (Generical)         a. Operator's Name and Address:         b. Phone:         e. Special Handling Instructions and	merator completes:	Signature ete IIIa-c and Dest c. US EPA N n accepted and to the Signature s IVa-f and Opera	Aumber d. Discrepancy In best of my knowledge the fo tor complete IVg-i) c. Responsible Agency d. Phone:	IIId-g) dication Space regoing is tru- g. Date Name and A	ddress:	-/Y			
C. Driver Name (Print)  III. DESTINATION (Ger a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named  S. H. Van Zart e. Name of Authorized Agent (Print) IV. ASBESTOS (Gener a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and f. Friable Non-Friable OPERATOR'S CERTIFICATION: If and are classified, packed, marked	I material has been find the second s	Signature ete IIIa-c and Dest c. US EPA N n accepted and to the Signature s IVa-f and Opera ation:	Aumber d. Discrepancy In best of my knowledge the fo tor complete IVg-i) c. Responsible Agency d. Phone:	IIId-g) dication Space regoing is tru- g. Date Name and A	ddress:	√Y	ping name ational and		
C. Driver Name (Print)      III. DESTINATION (Ger     a. Disposal Facility and Site Address Wayne County Landfill      RR 1 PO Box 214     Fairfield, IL 62837     b. Phone: 618.842.4294     I herby certify that the above named     Scht Van Zant     e. Name of Authorized Agent (Print)     IV. ASBESTOS (Generical Operator's Name and Address:     b. Phone:     e. Special Handling Instructions and     f. □ Friable □ Non-Friable □	I material has been find the second s	Signature ete IIIa-c and Dest c. US EPA N n accepted and to the Signature s IVa-f and Opera ation:	Aumber d. Discrepancy In best of my knowledge the fo tor complete IVg-i) c. Responsible Agency d. Phone:	IIId-g) dication Space regoing is tru- g. Date Name and Au	ddress:	√Y	ping name ational and		
C. Driver Name (Print)  III. DESTINATION (Ger a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scott Van Zart e. Name of Authorized Agent (Print) IV. ASBESTOS (Gener a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and f. Friable Non-Friable OPERATOR'S CERTIFICATION: If and are classified, packed, marked	I material has been in the second sec	Signature ete IIIa-c and Desi c. US EPA N n accepted and to the Signature s IVa-f and Opera % Friable at the contents of this re in all respects in pr	Aumber d. Discrepancy In beat of my knowledge the fo tor complete IVg-i) c. Responsible Agency d. Phone: % Non-Friable consignment are fully and ac oper condition for transport b	IIId-g) dication Space regoing is tru- g. Date Name and Au Name and Au curately desc y highway ac	ddress:	√Y we by proper ship p applicable intern			



**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST** 

a. Generator's US EPA ID Numbe	r	b. Manifest Docu	ment Number 5	-	c. Page	1 of		
d. Generator's Name and Location	1:		e. Generator's Mailing A	Address'		- 4 -		
Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			1311 West Main Street Carmi, IL 62821 g. Phone:					
If owner of the generating facility of	liffers from the generator	, provide:						
h. Owner's Name:			i. Owner's Phone No.:					
j. Waste Profile #	k. Exp. Date	I. Waste Ship	oping Name and	m. Co	ntainers	n. Total	o. Unit	
4293180384	07/04/0040	Description		No.	Туре	Quantity	Wt/Vol	
4293100304	07/31/2018	LUST Soil - I	Jhieaded					
						Tous	18.69	
		The	Ket #1518					
GENERATOR'S CERTIFICATION state law, has been properly descr waste is a treatment residue of a p been treated in accordance with th	ibed, classified and pack reviously restricted haza	aged, and is in prop rdous waste subject	er condition for transportal to the Land Disposal Res	tion accordin trictions. 1 c	g to applic	able regulations;	AND if this	
Matthew Rives		Ke			1187			
b. Generator Authorized Agent Na		. Signature			r. Date			
II. TRANSPORTER ( a. Transporter's Name and Addres		es IIa-b and Trai	nsporter completes II	c-e)				
7 Williamson Dr. Fairfield , II 62837 b. Phone: Sohn Ra	26	P	1		1/18	118		
c. Driver Name (Print)	d. Sign	ature		e. Date	110	1.0		
			ation Site completes I		ang l			
a. Disposal Facility and Site Addres Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 5. Phone: 618.842.4294	55:	c. US EPA Num	ber d. Discrepancy Indi	ication Space				
herby certify that the above name	d material has been acce	epted and to the bes	of my knowledge the fore	egoing is true				
Scott Van Can		Sent /	.C	1	-18-	-18		
	1							
a. Name of Authorized Agent (Print	) f. Signa	ature		g. Date				
<ul> <li>Name of Authorized Agent (Print V. ASBESTOS (Gene</li> </ul>								
V. ASBESTOS (Gene			complete IVg-i) c. Responsible Agency Na		dress:			
V. ASBESTOS (Gene a. Operator's Name and Address:			c. Responsible Agency N		dress:			
V. ASBESTOS (Gene a. Operator's Name and Address: b. Phone:	erator completes IVa				dress:			
V. ASBESTOS (Gene a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and	erator completes IVa	a-f and Operator	c. Responsible Agency Na d. Phone:		dress:			
V. ASBESTOS (Gene a. Operator's Name and Address: b. Phone: c. Special Handling Instructions and C. Friable Non-Friable DPERATOR'S CERTIFICATION: I nd are classified, packed, marked	d Additional Information:	riable	c. Responsible Agency Na d. Phone: % Non-Friable ignment are fully and accu	ame and Add	bed above			
V. ASBESTOS (Gene a. Operator's Name and Address: b. Phone: c. Special Handling Instructions and	d Additional Information:	riable	c. Responsible Agency Na d. Phone: % Non-Friable ignment are fully and accu	ame and Add	bed above			
V. ASBESTOS (Gene . Operator's Name and Address: . Phone: . Special Handling Instructions and . Friable Non-Friable DPERATOR'S CERTIFICATION: I nd are classified, packed, marked	d Additional Information:	iable intents of this cons Il respects in proper	c. Responsible Agency Na d. Phone: % Non-Friable ignment are fully and accu	ame and Add	bed above			



**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST** 

a. Generator's US EPA ID Number	rator complet		ocument Number		c. Page	1 of	
			6			1	
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			e. Generator's Mailing 1311 West Main Stree Carmi, IL 62821 g. Phone:				
If owner of the generating facility differ	s from the gene	rator, provide:	g, Phone.				
	5600 E 100						
h. Owner's Name: j. Waste Profile #	k. Exp. Dat	e I Waste	i. Owner's Phone No.: Shipping Name and		ntainers	n. Total	o. Unit
J. Waste Prome #	A. LAP. Dat	Descripti		No.	Type	Quantity	Wt/Vol
4293180384	07/31/2018	LUST So	il - Unleaded				
				14		TOAS	21.6
		-	icket#519				1
GENERATOR'S CERTIFICATION: I h state law, has been properly described waste is a treatment residue of a previous been treated in accordance with the re	I, classified and ously restricted I	packaged, and is in phazardous waste sub	proper condition for transport	ation accordinestrictions. I c	ig to applic	cable regulations; warrant that the w	AND, if this
Matthew Rives		11-		19 10 - 1	1-	18-19	
p. Generator Authorized Agent Name (	(Print)	q. Signature			r. Date		
II. TRANSPORTER (Ge	enerator comp	pletes IIa-b and	ransporter completes	lla a)			
a. Transporter's Name and Address: Carter Trucking			ransporter completes	пс-е)			
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone: Kuan Vaug. ht		Really			18-18	/	
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone: Kyan Vaug ht c. Driver Name (Print)		Regard Signature	20	e. Date	18-18	/	
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone: <i>Kyan Vaug ht</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294	rator comple	Signature te Illa-c and Des c. US EPA I	tination Site completes	e. Date IIId-g) Idication Space	e:		
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone:	rator comple	Signature te Illa-c and Des c. US EPA I	tination Site completes	e. Date IIId-g) idication Space	e: e and accu	irate.	
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone:	rator comple	Signature te Illa-c and Des c. US EPA I	tination Site completes	e. Date IIId-g) idication Space	e:	irate.	
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone: <i>Lyan Visug, h.t.</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named main <i>Scott Van Landfill</i> e. Name of Authorized Agent (Print)	aterial has been	Signature te IIIa-c and Des c. US EPAT accepted and to the Signature	tination Site completes Number d. Discrepancy In Dest of my knowledge the fo	e. Date IIId-g) idication Space	e: e and accu	irate.	
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone: <i>Lyan Visug ht</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named main Scott Van Cont e. Name of Authorized Agent (Print) <b>IV. ASBESTOS</b> (Generational Content of the second sec	aterial has been	Signature te IIIa-c and Des c. US EPAT accepted and to the Signature	tination Site completes Number d. Discrepancy In Dest of my knowledge the fo	e. Date IIId-g) Indication Space	e: e and accu	irate.	
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone: $V_{MA}$ Vacy, $h t$ c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named main Scott Van Cont e. Name of Authorized Agent (Print) IV. ASBESTOS (Generational Contents) a. Operator's Name and Address:	aterial has been	Signature te IIIa-c and Des c. US EPAT accepted and to the Signature	tination Site completes Number d. Discrepancy In best of my knowledge the for weights of the formation of th	e. Date IIId-g) Idication Space	e: e and accu	irate.	
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone: b. Phone: b. Phone:	aterial has been	Signature Signature te IIIa-c and Des c. US EPA I accepted and to the signature IVa-f and Opera	tination Site completes	e. Date IIId-g) Idication Space	e: e and accu	irate.	
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone: <i>Lynn Vaug ht</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named mathematical <i>Scott Van Landfill</i> R. Name of Authorized Agent (Print) <b>IV. ASBESTOS</b> (Generational a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and Address: b. Phone: e. Special Handling Instructions and Address: Description of the state	aterial has been f. s or completes dditional Informa oth eby declare that	Signature te IIIa-c and Des c. US EPAT accepted and to the signature IVa-f and Operation: % Friable the contents of this c	tination Site completes           Vumber         d. Discrepancy Ir           best/of my knowledge the for           best/of my knowledge the for           tor complete IVg-i)           c. Responsible Agency           d. Phone:           % Non-Friable           consignment are fully and ac	e. Date e. Date illd-g) idication Space pregoing is true g. Date Name and Ad	e: a and accu ac	irate. 18	ng name tional and
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone: <i>Lynn Vaug ht</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named mathematical <i>Scott Van Landfill</i> R. Name of Authorized Agent (Print) <b>IV. ASBESTOS</b> (Generational a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and Address: b. Phone: e. Special Handling Instructions and Address: Description of the state	aterial has been f. s or completes dditional Informa oth eby declare that	Signature te IIIa-c and Des c. US EPAT accepted and to the signature IVa-f and Operation: % Friable the contents of this c	tination Site completes           Vumber         d. Discrepancy Ir           best/of my knowledge the for           best/of my knowledge the for           tor complete IVg-i)           c. Responsible Agency           d. Phone:           % Non-Friable           consignment are fully and ac	e. Date e. Date illd-g) idication Space pregoing is true g. Date Name and Ad	e: a and accu ac	irate. 18	ng name tional and
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone: <i>Yan Vicus ht</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named mathematication <i>Scatt Van Land</i> e. Name of Authorized Agent (Print) <b>IV. ASBESTOS</b> (Generational a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and Address and Ad	aterial has been f. s or completes oth aby declare that labeled and are	Signature te IIIa-c and Des c. US EPAT accepted and to the signature IVa-f and Operation: % Friable the contents of this c	tination Site completes           Vumber         d. Discrepancy Ir           best/of my knowledge the for           best/of my knowledge the for           tor complete IVg-i)           c. Responsible Agency           d. Phone:           % Non-Friable           consignment are fully and ac	e. Date e. Date illd-g) idication Space pregoing is true g. Date Name and Ad	e: a and accu ac	irate. 18	ng name tional and



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

I. GENERATOR (Ge a. Generator's US EPA ID Numbe	the state of the s	b. Manifest Docu	ment Number		c. Page	1 of	
			<u> </u>			1	
d. Generator's Name and Location Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			e. Generator's Mailing Ad 1311 West Main Street Carmi, IL 62821 g. Phone:	dress:			
If owner of the generating facility of	liffers from the gene	rator, provide:					
h. Owner's Name:			i. Owner's Phone No.:				
j. Waste Profile #	k. Exp. Dat		oping Name and		ntainers	n. Total	o. Unit
4293180384	07/31/2018	B LUST Soil - 1	Unleaded	No.	Туре	Quantity	Wt/Vol
						TONS	19,52
		i	cket 1520				
GENERATOR'S CERTIFICATION state law, has been properly descr waste is a treatment residue of a p been treated in accordance with the	ibed, classified and reviously restricted	packaged, and is in prop hazardous waste subject	er condition for transportatio to the Land Disposal Restri	n accordin ctions. 1 ce	g to applic ertify and y	able regulations; A warrant that the wa	ND if this
Matthew Rives		na			1-1	818	
p. Generator Authorized Agent Na	me (Print)	q. Signature			r. Date		
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone:	26	I.I R	-	,	1/18	/18	
c. Driver Name (Print)	IKIN /d.	Signature	man	e. Date	1101	2 1	
		And a state of the	ation Site completes Ille	d-a)			
a. Disposal Facility and Site Addre Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294	58:	c. US EPA Num	nber d. Discrepancy Indica	ation Space			
I herby certify that the above name	d material has been	accepted and to the bes	t of my knowledge the foreg	oing is true	and accu	C	
e. Name of Authorized Agent (Print	5. j	Signature	* 5º	g. Date	15-10	5	
IV. ASBESTOS (Gene	erator completes	IVa-f and Operator	complete IVg-i)				
a. Operator's Name and Address;			c. Responsible Agency Nan	ne and Ado	dress:		
b. Phone:			d. Phone:				
e. Special Handling Instructions an	d Additional Informa	tion:					
f. Friable Non-Friable OPERATOR'S CERTIFICATION: I and are classified, packed, marked national governmental regulations.	hereby declare that	% Friable the contents of this cons a in all respects in proper	% Non-Friable ignment are fully and accura condition for transport by hi	itely descri ghway acc	bed above ording to a	e by proper shippin applicable internati	g name onal and
g. Operator's Name and Title (Print	) h.	Signature		i. Date		A R 0058	
*Operator refers to the company wh renovation operation or both	nich owns, leases, o	perates, controls, or sup	ervises the facility being dem	nolished or	renovated	d, or the demolition	or

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> If waste is asbestos waste, complete Sections I, II, III and IV If waste is <u>NOT</u> asbestos waste, complete Sections I, II and III

ų.

d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334 If owner of the generating facility differ h. Owner's Name: j. Waste Profile # 4293180384	k. Exp. Date 07/31/2018		e. Generator's Mailing 1311 West Main Stree Carmi, IL 62821 g. Phone: i. Owner's Phone No.: oping Name and		ntainers Type	n. Total Quantity	o. Unit
Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334 If owner of the generating facility differ h. Owner's Name: j. Waste Profile #	k. Exp. Date	I. Waste Ship Description	1311 West Main Stree Carmi, IL 62821 g. Phone: i. Owner's Phone No.: oping Name and	m. Co			o. Unit
If owner of the generating facility differ h. Owner's Name: j. Waste Profile #	k. Exp. Date	I. Waste Ship Description	i. Owner's Phone No.: oping Name and				o. Unit
j. Waste Profile #		Description	oping Name and				o. Unit
j. Waste Profile #		Description	oping Name and				o. Unit
			Unleaded	No.	Туре	Quantity	
4293180384	07/31/2018	LUST Soil - U	Unleaded			Quantity	Wt/Vol
						Tons	14,82
		Ti	ckef 1521				
GENERATOR'S CERTIFICATION: I is state law, has been properly described waste is a treatment residue of a previ been treated in accordance with the re	d, classified and packa ously restricted hazar	aged, and is in prop dous waste subject	er condition for transport to the Land Disposal Re	ation accordin strictions. I c	ig to applic ertify and 0 CFR 26	cable regulations; warrant that the w 1.	AND, if this
Matthew Rives		Moren			1-1	19-18	
p. Generator Authorized Agent Name	and the second se	. Signature			r. Date		
II. TRANSPORTER (Ge	enerator complete	s Ila-b and Tran	nsporter completes I	lc-e)			
Carter Trucking 7 Williamson Dr. Fairfield, II 62837 b. Phone: JOWN RAJK!	A.	12	1.		1/10	2/18	
	d. Signi	- ran		e. Date	41	110	
c. Driver Name (Print) III. DESTINATION (Gene			tion Site completes		'	-	
a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 o. Phone: 618 842 4294		c. US EPA Num	iber   d. Discrepancy In	dication Spac		voto	
herby certify that the above named m	aterial has been acce	pted and to,the pes	at of my knowledge the to				
Scott Van Zan	T I S	South ()	15		19-12	5	
e. Name of Authorized Agent (Print)	f. Signa			g. Date			
V. ASBESTOS (General	tor completes IVa	-f and Operator					
a. Operator's Name and Address:			c. Responsible Agency I	Name and Ad	dress:		
p. Phone:			d. Phone:				
e. Special Handling Instructions and A	dditional Information:						
Friable Non-Friable E	oth % Fr	iable	% Non-Friable				
DPERATOR'S CERTIFICATION: I her and are classified, packed, marked an national governmental regulations.	abu de alars that the	ontents of this cons Il respects in proper	signment are fully and acc r condition for transport by	v highway acc	ibed abov cording to	e by proper shippi applicable interna	ng name tional and
operator's Name and Title (Print) Operator refers to the company which	h. Signa	ature		i. Date		d aatha damaliila	0.01



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

I. GENERATOR (G a. Generator's US EPA ID Numb		b. Manifest Docu	ment Number	9	c. Page	1 of 1	
d. Generator's Name and Locati Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			e. Generator's Mail 1311 West Main St Carmi, IL 62821 g. Phone:			1	
If owner of the generating facility	differs from the gener	rator, provide:					
h. Owner's Name:			i. Owner's Phone N				
j. Waste Profile #	k. Exp. Dat	e I. Waste Shi Description	pping Name and	m. Co No.	ntainers Type	n. Total Quantity	o. Unit Wt/Vol
4293180384	07/31/2018		Unleaded		1)00	Quantity	
						Tons	11.46
		Tick	ef# 1522				
GENERATOR'S CERTIFICATIO state law, has been properly des waste is a treatment residue of a been treated in accordance with	cribed, classified and previously restricted l	packaged, and is in prop hazardous waste subjec	per condition for transp t to the Land Disposal	ortation accordin Restrictions. 1 c	ng to applic ertify and v	cable regulations; warrant that the w	AND, if this
Matthew Rives		1		-5	1-1	9-19	
p. Generator Authorized Agent N II. TRANSPORTER		q. Signature pletes IIa-b and Tra			r. Date		
7 Williamson Dr. Fairfield ,II 62837 b. Phone: POD VenGere c. Driver Name (Print)		Signature		e. Date	19-	8	
		te Illa-c and Destina	ation Site complet				
a. Disposal Facility and Site Add Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294	ress:	c. US EPA Nun	nber d. Discrepancy	/Indication Spac			
I herby certify that the above nan	1	accepted and to the be	st of my knowledge the	e foregoing is tru		-1	
Scott VanZa		Statt /	-5	1-	-14-12	)	
e. Name of Authorized Agent (Pr		Signature	and the party of t	g. Date			
IV. ASBESTOS (Gen a. Operator's Name and Address		IVa-f and Operator	c. Responsible Agen	cy Name and Ad	dress:		
b. Phone:			d. Phone:				
e. Special Handling Instructions a	and Additional Informa	tion:					
f. Friable Non-Friable OPERATOR'S CERTIFICATION: and are classified, packed, marke national governmental regulation	I hereby declare that ed and labeled and are						
g. Operator's Name and Title (Pri	nt) h.	Signature		i. Date		A D 0000	
*Operator refers to the company renovation operation or both	which owns, leases, o	perates, controls, or sup	ervises the facility bein	ng demolished o	r renovated	d, or the deposition	in or

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NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

		b. Manif	fest Docun	rent Number	Ċ	c. Page	1 of	
d. Generator's Name and Location;				e. Generator's Mailing		1		
Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334				1311 West Main Stree Carmi, IL 62821 g. Phone:				
If owner of the generating facility dif	ffers from the gene	erator, provide:		1 T T A T T				
h. Owner's Name:				i. Owner's Phone No.:				
j. Waste Profile #	k. Exp. Da		Vaste Ship scription	ping Name and	m. Co No.	Type	n. Total Quantity	o. Unit Wt/Vol
4293180384	07/31/201	B LUS	ST Soil - U	nleaded		1720	Country	
							Tóns	21,14
			Tro	Ket#152	3			
GENERATOR'S CERTIFICATION: state law, has been properly describ waste is a treatment residue of a pro- been treated in accordance with the	ed, classified and eviously restricted	packaged, and hazardous wast	te subject l	r condition for transports	ation accordin	g to applic	able regulations;	ANID SEALS
Matthew Rives		1				1-1-1-	19	
p. Generator Authorized Agent Nam		g. Signature				r. Date		
II. TRANSPORTER (C a. Transporter's Name and Address.	Generator com	pletes lla-b a	and Tran	sporter completes I	lc-e)			
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone: MatT-W Tanatr	4	NV a -	-1		1	-19-1	S	
c. Driver Name (Print)		Signature			e. Date		Ŷ.	
III. DESTINATION (Ger		and the second se		ion Site completes				
	5:	C, US F	EPA Numb	and of Discourse in the	lightion Change			
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294								
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294	material has been	accepted and to				and accu		
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Sce H. Vom Zant	-	Sout						
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named, Scoth Van Zant e. Name of Authorized Agent (Print)		Signature	to the best	of my knowledge the for		and accu		
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Sce H Van Zact e. Name of Authorized Agent (Print) IV. ASBESTOS (Generic		Signature	perator o	of my knowledge the for	egoing is true /- g. Date	and accu 19-)8		
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Sce H Van Zact e. Name of Authorized Agent (Print) IV. ASBESTOS (Generic		Signature	perator o	of my knowledge the for	egoing is true /- g. Date	and accu 19-)8		
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scoth Van Zant e. Name of Authorized Agent (Print) IV. ASBESTOS (Generic a. Operator's Name and Address:		Signature	perator o	of my knowledge the for	egoing is true /- g. Date	and accu 19-)8		
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a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scoth Vom Zant e. Name of Authorized Agent (Print) IV. ASBESTOS (Generic a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and A	ator completes	Signature IVa-f and Option:	perator o	of my knowledge the for complete IVg-i) c Responsible Agency N d. Phone:	egoing is true /- g. Date	and accu 19-)8		
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scoth Van Zant e. Name of Authorized Agent (Print) IV. ASBESTOS (Generic a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and A	Additional Informa	Signature IVa-f and Option tion: % Friable the contents of	perator of c	of my knowledge the for complete IVg-i) Responsible Agency N Phone: <u>Non-Friable</u> nment are fully and acc	egoing is true	and accu / 9 - )/ Iress: Decid above	by proper shippi	ng name lional and
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named, Scett Van Zact e. Name of Authorized Agent (Print) IV. ASBESTOS (Genera a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and a DERATOR'S CERTIFICATION: I he and are classified, packed, marked a	Additional Informa	Signature IVa-f and Option tion: % Friable the contents of	perator of c	of my knowledge the for complete IVg-i) Responsible Agency N Phone: <u>Non-Friable</u> nment are fully and acc	egoing is true	and accu / 9 - )/ Iress: Decid above	by proper shippi	ng name lonal and
a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scett Van Zact a. Name of Authorized Agent (Print) IV. ASBESTOS (Generic a. Operator's Name and Address: b. Phone: a. Special Handling Instructions and a DERATOR'S CERTIFICATION: I he and are classified, packed, marked a	Additional Informa Both ereby declare that nd labeled and are h.	Signature IVa-f and O tion: % Friable the contents of a in all respects Signature	perator of contract of the best of the bes	of my knowledge the for complete IVg-i) complete IVg-i) c. Responsible Agency N d. Phone:	egoing is true	and accu 19-10 Iress:	by proper shippi pplicable internat	ional and

## Electronic Filing: Received, Clerk's Office 2/25/2021 REPUBLIC NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST SERVICES, INC.

a. Generator's US EPA ID Number		b. Manifest Docu	ment Number		c. Page	1 of	
d. Generator's Name and Location:			11			1	
Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864			e. Generator's Mailing 1311 West Main Stree Carmi, IL 62821				
f. Phone:618-382-2334			g. Phone:				
If owner of the generating facility differs	s from the generator	, provide:					
h. Owner's Name:			i. Owner's Phone No.:				
. Waste Profile #	k. Exp. Date		pping Name and		ntainers	n. Total	o. Unit
4293180384	07/31/2018	LUST Soil -	Unleaded	No.	Туре	Quantity	Wt/Vol
						Tons	18,15
		Ti	cket#152	Ý			
GENERATOR'S CERTIFICATION: I he tate law, has been properly described, vaste is a treatment residue of a previo usen treated in accordance with the req	usly restricted hazar	aged, and is in prop dous waste subject	er condition for transporta	tion accordin	g to applic	able regulations;	ANID SEN.
1atthew Rives		Mile			1-14	-16	
. Generator Authorized Agent Name (F	Print) q	. Signature			r 3 1	10	
. Transporter's Name and Address: Carter Trucking	CHS#3		nsporter completes II	с-е)	r. Date		
a. Transporter's Name and Address: Carter Trucking Williamson Dr. Fairfield ,II 62837 D. Phone:	CHS#3	And Train	nsporter completes II	c-e)	r. Date		
a. Transporter's Name and Address: Carter Trucking / Williamson Dr. Fairfield ,II 62837 D. Phone: Michael WinkCyk . Driver Name (Print)	CHS#3	And Train	with	e. Date	r. Date		
Transporter's Name and Address: Carter Trucking Williamson Dr. airfield ,II 62837 Phone: MUMMUM Driver Name (Print) I. DESTINATION (General Disposal Facility and Site Address: Vayne County Landfill R 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294	CASH 3	a-c and Destina	tion Site completes	e. Date IIId-g) lication Space	<i>3/18</i> a:		
Transporter's Name and Address: Carter Trucking Williamson Dr. airfield ,II 62837 Phone: <u>Michael WinkCuk</u> Driver Name (Print) I. DESTINATION (General Disposal Facility and Site Address: Vayne County Landfill R 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294 herby certify that the above named mat	CASH 3	a-c and Destina	tion Site completes	e. Date IIId-g) lication Space	all g		
Transporter's Name and Address; arter Trucking Williamson Dr. airfield, II 62837 Phone: <u>MChaul WINKCUM</u> Driver Name (Print) I. DESTINATION (General Disposal Facility and Site Address: /ayne County Landfill R 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294 herby certify that the above named mathematics Scott Van Zant	CASH 3	and to the bes	tion Site completes	e. Date IIId-g) lication Space	<i>3/18</i> a:		
I. Transporter's Name and Address: Carter Trucking Williamson Dr. airfield ,II 62837 Phone: MUCHALI WIMKUM Driver Name (Print) I. DESTINATION (General Disposal Facility and Site Address: Vayne County Landfill R 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294 herby certify that the above named mather Scott Van Zant Name of Authorized Agent (Print)	CASH 3 9 C M d. Signa ator complete III terial has been acce	ature a.c. and Destina c. US EPA Num pted and to the bes	tion Site completes	e. Date IIId-g) lication Space	all g		
Transporter's Name and Address: arter Trucking Williamson Dr. airfield ,II 62837 Phone: <u>Michaul WinkCuk</u> Driver Name (Print) I. DESTINATION (General Disposal Facility and Site Address: /ayne County Landfill R 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294 herby certify that the above named mail Scold VanZaat Name of Authorized Agent (Print) J. ASBESTOS (Generato	CASH 3 9 C M d. Signa ator complete III terial has been acce	ature a.c. and Destina c. US EPA Num pted and to the bes	tion Site completes I ber d. Discrepancy Ind	e. Date IIId-g) lication Space egoing is true 	2/18 a: and accur 19-18		
Transporter's Name and Address: Carter Trucking Williamson Dr. airfield ,II 62837 . Phone: MIChael WINCUM Driver Name (Print) I. DESTINATION (General Disposal Facility and Site Address: Vayne County Landfill R 1 PO Box 214 airfield, IL 62837 . Phone: 618.842.4294 herby certify that the above named mail Scolt Van Zant Name of Authorized Agent (Print) /. ASBESTOS (Generato	CASH 3 9 C M d. Signa ator complete III terial has been acce	ature a.c. and Destina c. US EPA Num pted and to the bes	tion Site completes	e. Date IIId-g) lication Space egoing is true 	2/18 a: and accur 19-18		
Transporter's Name and Address: Carter Trucking Williamson Dr. airfield ,II 62837 . Phone: <u>MCMacl</u> <u>WMKCM</u> . Driver Name (Print) I. DESTINATION (Generation Disposal Facility and Site Address: Vayne County Landfill .R 1 PO Box 214 airfield, IL 62837 . Phone: 618.842.4294 herby certify that the above named mathematication <u>Scott VanZant</u> Name of Authorized Agent (Print) /. ASBESTOS (Generato Operator's Name and Address: Phone: Phone:	CLSH 3 C J/L d. Signa ator complete III terial has been acce f. Signa r completes IVa-	and Train ature a-c and Destina c. US EPA Num pted and to the bes fure -f and Operator	tion Site completes I ber d. Discrepancy Ind	e. Date IIId-g) lication Space egoing is true 	2/18 a: and accur 19-18		
Transporter's Name and Address; arter Trucking Williamson Dr. airfield, II 62837 Phone: <u>MCMach</u> <u>WMKCM</u> Driver Name (Print) I. <u>DESTINATION</u> (Generation Disposal Facility and Site Address: /ayne County Landfill R 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294 herby certify that the above named math Scott Van Zaat Name of Authorized Agent (Print) V. ASBESTOS (Generato Operator's Name and Address: Phone:	CLSH 3 C J/L d. Signa ator complete III terial has been acce f. Signa r completes IVa-	and Train ature a-c and Destina c. US EPA Num pted and to the bes fure -f and Operator	tion Site completes I ber d. Discrepancy Ind complete IVg-i) c. Responsible Agency N	e. Date IIId-g) lication Space egoing is true 	2/18 a: and accur 19-18		
a. Transporter's Name and Address: Carter Trucking Williamson Dr. airfield ,II 62837 Phone:  Driver Name (Print)  DESTINATION (Generation Disposal Facility and Site Address: Vayne County Landfill R 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294 herby certify that the above named mate Scolt VanZaat Name of Authorized Agent (Print)  ASBESTOS (Generato Operator's Name and Address: Phone: Special Handling Instructions and Address: Phone: Special Handling Instructions and Address: Phone: Destrict Carter Carter Carter Destrict Carter	CASH 3 9 C A. Signa ator complete III terial has been acce f. Signa r completes IVa- litional Information: h % Fri. by declare that the co	able	tion Site completes I ber d. Discrepancy Ind tof my knowledge the fore complete IVg-i) c. Responsible Agency N d. Phone: % Non-Friable gnment are fully and accu	e, Date IIId-g) lication Space egoing is true g. Date ame and Add	$\frac{3}{3}$	2-	g name onal and
a. Transporter's Name and Address: Carter Trucking Williamson Dr. Fairfield ,II 62837 Phone: Michael WinKey Driver Name (Print) II. DESTINATION (General Disposal Facility and Site Address: Vayne County Landfill IR 1 PO Box 214 airfield, IL 62837 Phone: 618.842.4294 herby certify that the above named mate Scott VanZaat Name of Authorized Agent (Print) V. ASBESTOS (Generato Operator's Name and Address: Phone: Special Handling Instructions and Add Friable Non-Friable Bot PERATOR'S CERTIFICATION: I hereb ad are classified, packed, marked and II	CASH 3 9 C A. Signa ator complete III terial has been acce f. Signa r completes IVa- litional Information: h % Fri. by declare that the co	able	tion Site completes I ber d. Discrepancy Ind tof my knowledge the fore complete IVg-i) c. Responsible Agency N d. Phone: % Non-Friable gnment are fully and accu	e, Date IIId-g) lication Space egoing is true g. Date ame and Add	$\frac{3}{3}$	2-	g name onal and
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# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

a. Generator's US EPA ID Number		b. Manifest Docur	ment Number 12_		c. Page	1 of 1	
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			e. Generator's Mailing Ad 1311 West Main Street Carmi, IL 62821 g. Phone:	ddress:			
If owner of the generating facility dif	fers from the generator	, provide:					
h. Owner's Name:		A Long Court of	i. Owner's Phone No.:		2.2		
j. Waste Profile #	k. Exp. Date		oping Name and		tainers	n. Total Quantity	o. Unit Wt/Vol
4293180384	07/31/2018	Description LUST Soil -	Unleaded	No.	Туре	Country	
						Tons	25.18
		Tick	(et#1525				
GENERATOR'S CERTIFICATION: state law, has been properly descrit waste is a treatment residue of a pri been treated in accordance with the	ped, classified and pack eviously restricted haza	kaged, and is in prop ardous waste subjec FR 268 and is no lon	per condition for transportati t to the Land Disposal Rest	ion accordin rictions. I ce	g to appli ertify and 0 CFR 26	cable regulations; warrant that the w	AND, if this
Matthew Rives		bi				11.18	
p. Generator Authorized Agent Nam II. TRANSPORTER (		q. Signature	nsporter completes lic		r. Date		
7 Williamson Dr. Fairfield ,II 62837 b. Phone: Kyan Vizza, hA c. Driver Name (Print)	4.2) d. Sig	<u>zel</u>	(2)	]/ e. Date	19-18	2	
III. DESTINATION (Ge			ation Site completes I				
a. Disposal Facility and Site Addres Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 B. Phone: 618 842 4294	s:	c. US EPA Nur	nber d. Discrepancy Indi	cation Spac		urate	
I herby certify that the above named	1	cepted and to the be	st of my knowledge the fore	going is true	19-	- 18	
Scott Van Zo		terra (In	Si	/	-//	10	
e. Name of Authorized Agent (Print)				g. Date			
IV. ASBESTOS (Gene	rator completes IV	a-f and Operato	c. Responsible Agency N	ama and Ad	drage		
a. Operator's Name and Address:			C. Responsible Agency N		01033.		
b. Phone:			d, Phone:				
e. Special Handling Instructions and	Additional Information	t.					
f. Friable Non-Friable	Both %I	Friable	% Non-Friable				
OPERATOR'S CERTIFICATION: I and are classified, packed, marked national governmental regulations.	hareby declare that the	contents of this con	signment are fully and accu ar condition for transport by	highway ac	ibed abov cording to	ve by proper ship applicable intern	oing name ational and
			the second se	1.0.1			
g. Operator's Name and Title (Print) *Operator refers to the company whether the second se	h. Sig	nature		i. Date		A R 0063	

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV If waste is  $\underline{\text{NOT}}$  asbestos waste, complete Sections I, II and III

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a. Generator's US EPA ID Nur	Generator comple		t Document Nu	mber 1 Z		c. Page 1 of				
d. Oasaastada Nasaastad	Generator's Name and Location:			Le Generator's Mailion Address:						
Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			1311 Carm	e. Generator's Mailing Address: 1311 West Main Street Carmi, IL 62821 g. Phone:						
If owner of the generating facil	ity differs from the gene	rator, provide:								
h. Owner's Name:			i. Ow	er's Phone No .:						
j. Waste Profile #	k. Exp. Da		ste Shipping Na	me and	m. Col No.	ntainers	n. Total	o. Unit		
4293180384 07/3		07/31/2018 LUST Soil -				Туре	Quantity	Wt/Vol		
							Tous	31,18		
		-	Ticke	Ft 1524						
GENERATOR'S CERTIFICATI state law, has been properly de waste is a treatment residue of been treated in accordance wit	escribed, classified and a previously restricted	packaged, and is i hazardous waste s	in proper cond subject to the L	ion for transportat and Disposal Rest	ion accordin	g to applic	able regulations;	AND if this		
Matthew Rives		MAR				1-1	9-18			
p. Generator Authorized Agent		q. Signature		r. Date						
II. TRANSPORTE	R (Generator com	pletes Ila-b and	d Transporte	r completes llo	-e)					
7 Williamson Dr. Fairfield ,II 62837 b. Phone: DOLN BAN c. Driver Name (Print)	F26	Ash_ ) Signature	Rank	~	l -	- 19-	18			
the second s	Generator comple		estination S	te completes II		-				
a. Disposal Facility and Site Ad Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294	dress:	c. US EP	A Number o	Discrepancy Indi	cation Space					
herby certify that the above na		accepted and to the	ne best of my l	nowledge the fore						
Scott Ven Lan		Still	- + 5 "		1.	-19-12	1			
e. Name of Authorized Agent (F	and a second	Signature			g. Date					
	enerator completes	IVa-f and Ope								
a. Operator's Name and Addres	S:		c. Resp	onsible Agency Na	ame and Add	dress:				
b. Phone:			d. Phor	e:						
e. Special Handling Instructions	and Additional Informa	tion:								
f. 🗌 Friable 🔲 Non-Friable		% Friable	% Non-							
OPERATOR'S CERTIFICATION and are classified, packed, mark national governmental regulation	ked and labeled and are	the contents of this in all respects in	s consignment proper conditio	are fully and accur n for transport by h	rately descri nighway acc	bed above ording to a	by proper shippin applicable internat	ng name ional and		
g. Operator's Name and Title (P Operator refers to the company	rint) h.	Signature		e facility being de	i. Date	renovator	A.R. 0064	1.05		
Operator refers to the company enovation operation or both	which owns, leases, o	perates, controis, (	or supervises (	le raciiity being dei	monaned of	renovated	, or the demondor	101		

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# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

And the state of the	rator's US EPA ID Number b. Manifest Doc			nent Number	91-	f	c. Page 1 of 1		
d. Generator's Name and Location:				e. Generator's	Sec.	ress:			
Martin & Bayley Inc 540 Airport Road Mt, Vernon, IL 62864 f. Phone:618-382-2334				1311 West Ma Carmi, IL 628 g. Phone:	ain Street				_
If owner of the generating facility diffe	ers from the gen	erator, prov	ide:						
				i. Owner's Pho	No I				
h. Owner's Name; j. Waste Profile #	k. Exp. Da	ate	I. Waste Ship	ping Name and	110 110	m. Cor	tainers	n. Total	o. Unit
			Description			No.	Туре	Quantity	Wt/Vol
4293180384 07/31		8	LUST Soil - U	Inleaded					
								ICAS	19.84
			Tic	Ketts	27			1	
state law, has been properly describe waste is a treatment residue of a prev been treated in accordance with the r	viously restricted	40 CFR 268	waste subject	to the Land Disp ter a hazardous	oosal Restric	tions. I ce	o CFR 26	warrant that the wa	aste has
Matthew Rives p. Generator Authorized Agent Name	(Print)	q. Sig	nature				r. Date		
II. TRANSPORTER (G	enerator con			sporter com	pletes Ilc-e	2)			
Carter Trucking 7 7 Williamson Dr. Fairfield ,II 62837	the								
b. Phone:									
b. Phone: Martin Tann	1-6-	// Signature	l-q	an.		e. Date	19	115	
b. Phone: MMALTER TANK c. Driver Name (Print)	0	I. Signature		tion Site corr	pletes IIId		19	18	
b. Phone: MALTER TAND c. Driver Name (Print) III. DESTINATION (Gen a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Bhoas: 618 842 4294	erator compl	ete Illa-c	and Destina . US EPA Num	ber d. Discre	pancy Indica	-g) tion Space		15	
b. Phone: MALTER TANK c. Driver Name (Print) III. DESTINATION (Gen a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Bhopa: 618 842 4294	erator compl	ete Illa-c	and Destina . US EPA Num	ber d. Discre	pancy Indica	-g) tion Space	e and accu	1 / S	
b. Phone: MATER TANK c. Driver Name (Print) III. DESTINATION (Gen a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Bhona: 618 842 4294	erator compl	ete Illa-c	and Destina US EPA Num and to the bas	ber d. Discre	pancy Indica	-g) tion Space		15 urate. 8	
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# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

a. Generator's US EPA ID Number	GENERATOR         (Generator completes la-r)           rator's US EPA ID Number         b. Manifest D		anifest Docum	cument Number			c. Page 1 of		
				15			1		
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334 If owner of the generating facility differs from the generator, provide:				e. Generator's Mailing Address: 1311 West Main Street Carmi, IL 62821 g. Phone:					
If owner of the generating facility d	iffers from the gene	erator, provid	de:						
h. Owner's Name:			5	i. Owner's Phone No.:					
j. Waste Profile #	k. Exp. Da			ping Name and	m. Co	ntainers	n. Total	o. Unit	
4293180384	07/31/201	Description 31/2018 LUST Soil -		nleaded	No.	Туре	Quantity	Wt/Vol	
			2001.000.00						
							Tons	18.85	
			and the second sec	(et# 1528					
GENERATOR'S CERTIFICATION: state law, has been properly descrit waste is a treatment residue of a pr been treated in accordance with the	eviously restricted	hazardous w	vaste subject t	r condition for transportati	on accordin	g to applic	able regulations;		
Matthew Rives			10-			1-1-	w.		
p. Generator Authorized Agent Nam	ne (Print)	q. Signa							
II. TRANSPORTER (	-					r Date			
a. Transporter's Name and Address	. /	pletes IIa-	b and Trans	sporter completes IIc	-e)	r. Date			
a. Transporter's Name and Address Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone: MiChael U//mK	45#34 Lep -	Mall	b and Trans	sporter completes IIc		r. Date	8		
a. Transporter's Name and Address Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone: <u>MiChael</u> Wink c. Driver Name (Print)	ts#34	Signature	b and Trans	telles	e. Date	r. Date	8		
a. Transporter's Name and Address Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone: <u>MiChael Market</u> 2. Driver Name (Print) II. DESTINATION (Gel a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield ,IL 62837 b. Phone: 618.842,4294	437734 422 nerator complet s:	Signature te Illa-c ar	b and Trans	ion Site completes III er d. Discrepancy Indic	e. Date d-g) ation Space	1 <i>9/1</i> ::	8		
a. Transporter's Name and Address Carter Trucking 7 Williamson Dr. Sairfield ,II 62837 D. Phone: Driver Name (Print) II. DESTINATION (Gel 1. Disposal Facility and Site Address Vayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 D. Phone: 618.842,4294	437734 422 nerator complet s:	Signature te Illa-c ar	b and Trans	ion Site completes III er d. Discrepancy Indic	e. Date d-g) ation Space	1 <i>9/1</i> ::	ate.		
a. Transporter's Name and Address Carter Trucking 7 Williamson Dr. Faiffield ,II 62837 b. Phone: Michael Mame (Print) II. DESTINATION (Gel a. Disposal Facility and Site Address Nayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842,4294 herby certify that the above named Scott Ven Zent	ts #34 LCC - d. nerator complet s: material has been	Signature te Illa-c ar c. L accepted ar	b and Trans	ion Site completes III er d. Discrepancy Indic	e. Date d-g) ation Space	1 <i>9/1</i> ::	ate.		
a. Transporter's Name and Address Carter Trucking 7 Williamson Dr. Faiffield ,II 62837 5. Phone: Michael Market (Print) II. DESTINATION (Gel a. Disposal Facility and Site Address Nayne County Landfill RR 1 PO Box 214 Faiffield, IL 62837 5. Phone: 618.842.4294 herby certify that the above named ScottlenZant Name of Authorized Agent (Print)	material has been	Signature te Illa-c ar c. L accepted ar Signature	b and Trans	ion Site completes III er d. Discrepancy Indic	e. Date d-g) ation Space	1 <i>9/1</i> ::	ate.		
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# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

a. Generator's US EPA ID Numbe	er	b.	Manifest Docum	nent Number	c. Page 1 of					
d. Gararator's Nama and Location	enerator's Name and Location:			e. Generator's Mailing Address:						
Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334				e. Generator's Mailing Address: 1311 West Main Street Carmi, IL 62821 g. Phone:						
If owner of the generating facility of	differs from the ge	nerator, pro-	vide:							
h. Owner's Name:				i. Owner's Phone No .:						
j. Waste Profile #	k. Exp. I	Date		ping Name and		ntainers	n. Total	o. Unit		
4293180384	07/31/20	118	Description LUST Soil - U	Inleaded	No.	Туре	Quantity	Wt/Vol		
0//3//										
							Tions	21.3		
			Tic	Ket+15.29						
GENERATOR'S CERTIFICATION state law, has been properly desc waste is a treatment residue of a p been treated in accordance with the	ribed, classified a previously restricted	nd packaged ed hazardou f 40 CFR 26	d, and is in prop s waste subject 8 and is no long	rial is not a hazardous wa er condition for transportat to the Land Disposal Res ger a hazardous waste as	tion accordin trictions. I c	ig to applic ertify and v	cable regulations; warrant that the w	AND, if this		
Matthew Rives		12	1	the same provide the same of t		199	-10			
p. Generator Authorized Agent Na	ime (Print)	q. Sig	gnature			r. Date				
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone:	742	2		7.		10	CV			
c. Driver Name (Print)		d. Signature	ent	and and a second	19-1	8				
the first of the f	enerator com			tion Site completes I	e. Date					
a. Disposal Facility and Site Addre Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above name	955:		c. US EPA Num	ber d. Discrepancy Ind	ication Spac		rata			
6 21/7		sen accepted		to my knowledge the lore	sgoing is true		-18			
Scott VanLa		10	K-a C-	1			-17-10			
e. Name of Authorized Agent (Prin IV. ASBESTOS (Gen		f. Signature			g. Date					
IV. ASBESTOS (Gen a. Operator's Name and Address:		es Iva-i a	inu Operator	c. Responsible Agency N	ame and Ad	dress:				
	1			d. Phone:						
	nd Additional Infor	mation:		d. Phone:						
e. Special Handling Instructions ar f. Friable Non-Friable OPERATOR'S CERTIFICATION: I and are classified, packed, marked	] Both I hereby declare t d and labeled and	% Friable	ents of this cons	% Non-Friable	urately descr highway acc	ibed abov	e by proper shipp applicable interna	ing name ational and		
e. Special Handling Instructions ar f. Friable Non-Friable OPERATOR'S CERTIFICATION: I and are classified, packed, marked	] Both I hereby declare t d and labeled and	% Friable	ents of this cons	% Non-Friable	urately descr highway acc	ibed above	e by proper shipp applicable interna	ing name tional and		
b. Phone: e. Special Handling Instructions ar f. Friable Non-Friable OPERATOR'S CERTIFICATION: and are classified, packed, marked national governmental regulations. g. Operator's Name and Title (Prin *Operator refers to the company w	] Both I hereby declare t d and labeled and	% Friable hat the conte are in all res	ents of this cons spects in proper	% Non-Friable ignment are fully and accu condition for transport by	highway acc	cording to	applicable interna	ational and		



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

a. Generator's US EPA ID Numbe	enerator's US EPA ID Number b. Manifest Doc			ment Number			c. Page 1 of		
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			e. Generator's Mailing Address: 1311 West Main Street Carmi, IL 62821 g. Phone:						
If owner of the generating facility d	liffers from the generat	or, provide;	9.110/02						
h. Owner's Name:			i. Owner's Phone No .:						
j. Waste Profile #	k. Exp. Date		ipping Name and		ntainers	n. Total	o. Unit		
293180384 07/31/201		2018 LUST Soil - Unleaded		No.	Туре	Quantity	Wt/Vol		
						TORS	32.25		
+		-1	icket 1530	0					
GENERATOR'S CERTIFICATION state law, has been properly descr waste is a treatment residue of a p been treated in accordance with th	ibed, classified and pa reviously restricted has	ckaged, and is in prop zardous waste subject	per condition for transports to the Land Disposal Re	ation accordin strictions. I c	ng to applic ertify and y	cable regulations;	AND if this		
Matthew Rives		m			1	19-18			
p. Generator Authorized Agent Nar	me (Print)	q. Signature			r. Date				
7 Williamson Dr. Fairfield ,II 62837 b. Phone:				1		~			
11/16 TCF 7 AA	11-12 d Si	gnature	re e.Di			ate 1715			
			ation Site completes						
a. Disposal Facility and Site Addres Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294	35:	c. US EPA Nur	nber d. Discrepancy Ind	dication Spac					
I herby certify that the above name	4-	cepted and to the be	st of my knowledge the for	egoing is true	and accu	11			
Diettlenant	4	Sime	1-19-18			10	2		
e. Name of Authorized Agent (Print IV. ASBESTOS (Gene		nature	complete IV/a il	g. Date					
IV. ADDEDIUS (Gene	rator completes n	a-i and Operator	• •		dress:				
a. Operator's Name and Address:			c. Responsible Agency N	name and Ad	aress.				
b. Phone:	d Additional Informatio	n:	c. Responsible Agency M d. Phone:	Name and Ad					
<ul> <li>a. Operator's Name and Address:</li> <li>b. Phone:</li> <li>e. Special Handling Instructions and</li> </ul>	d Additional Informatio	n:		Name and Ad					
b. Phone: e. Special Handling Instructions and	Both %	Friable contents of this cons	d. Phone: % Non-Friable signment are fully and acc	urately descr	ibed above				
b. Phone: e. Special Handling Instructions and f Friable Non-Friable . OPERATOR'S CERTIFICATION: I and are classified, packed, marked	Both %	Friable contents of this cons	d. Phone: % Non-Friable signment are fully and acc	urately descr	ibed above				
b. Phone: e. Special Handling Instructions and f Friable Non-Friable . OPERATOR'S CERTIFICATION: I and are classified, packed, marked	Both % hereby declare that the and labeled and are in	Friable a contents of this com all respects in prope	d. Phone: % Non-Friable signment are fully and acc r condition for transport by	urately descr highway acc	ibed above cording to a	applicable interna	ational and		



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV If waste is <u>NOT</u> asbestos waste, complete Sections I, II and III

Generator's US EPA ID Number b. Manifest Docu			nent Number		c. Page	1 of 1	
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			e. Generator's Mailing Address: 1311 West Main Street Carmi, IL 62821 g. Phone:				
If owner of the generating facility dif	ffers from the generator, p	provide:	9.1 1010.				
h Ouranda Namai			i. Owner's Phone No.:				
h. Owner's Name: j. Waste Profile #	k. Exp. Date	I, Waste Ship	ping Name and	m. Cor	ntainers	n. Total	o. Unit
		Description		No.	Туре	Quantity	Wt/Vol
4293180384	07/31/2018	LUST Soil - U	Jnieaded				
						Tons	.24.08
		Tic	Ket=1531			1.77	
GENERATOR'S CERTIFICATION: state law, has been properly descrit waste is a treatment residue of a pr been treated in accordance with the	bed, classified and packa eviously restricted hazard	ged, and is in prop dous waste subject	er condition for transportati to the Land Disposal Rest	ion accordin rictions. I ce	ig to applic ertify and	cable regulations; warrant that the v	AND, if this
Matthew Rives	/	Maltin	< .		1 )-	19-18	
p. Generator Authorized Agent Nam		Signature			r. Date		
II. TRANSPORTER (	Generator complete	s IIa-b and Tra	nsporter completes llo	с-е)			
7 Williamson Dr.	7.26	1			1	1	
JOHN BAN	ikin (	LR	ent'	e Date	1	9/18	
c. Driver Name (Print)	JK ; ) d. signa		end	e. Date	1	9/18	
b. Phone: JOWN RAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Addres Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618 842 4294	enerator complete III ss:	a-c and Destina		IId-g) ication Spac		9 / 18	
b. Phone: DOWN RAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Addres Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named	enerator complete III ss:	a-c and Destina	nber d. Discrepancy Indi	IId-g) ication Spac	e and acc	9 / 18 urate.	
b. Phone: DOWN BAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618,842,4294 I herby certify that the above namedo Scett Veccolory	d material has been acce	a-c and Destina c. US EPA Nun pted and to the be	nber d. Discrepancy Indi	IId-g) ication Space		9 / 1 8 urate. 18	
b. Phone: DOWN BAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Addres Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above namedo Scatt Veccolority e. Name of Authorized Agent (Print)	d material has been acce	e-c and Destination	nber d. Discrepancy Indi	IId-g) ication Spac	e and acc	9 / 18 urate. 18	
b. Phone: JOWN RAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Addres Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scatt Veccolority e. Name of Authorized Agent (Print) IV. ASBESTOS (Gene	d material has been acce	e-c and Destination	nber d. Discrepancy Indi	IId-g) ication Space egoing is true g. Date	e and acc - / <sup>C</sup> i - /	9 / 1 8 urate.	
b. Phone: JOWN RAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scatt Veccolority e. Name of Authorized Agent (Print) IV. ASBESTOS (Gene	d material has been acce	e-c and Destination	nber d. Discrepancy Indi	IId-g) ication Space egoing is true g. Date	e and acc - / <sup>C</sup> i - /	9 / 1 8 urate. 8	
b. Phone: JOWN BAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above name Scatt Vector Land e. Name of Authorized Agent (Print) IV. ASBESTOS (Gene a. Operator's Name and Address:	d material has been acce	e-c and Destination	nber d. Discrepancy Indi	IId-g) ication Space egoing is true g. Date	e and acc - / <sup>C</sup> i - /	9 / 1 8 urate.	
b. Phone: DOWN RAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above name Scott Verceast e. Name of Authorized Agent (Print) IV. ASBESTOS (Gene a. Operator's Name and Address: b. Phone:	d material has been acce	e-c and Destination	nber d. Discrepancy Indi st of my knowledge the fore complete IVg-i) c. Responsible Agency N	IId-g) ication Space egoing is true g. Date	e and acc - / <sup>C</sup> i - /	9 / 18 urate. /8	
b. Phone: JOWN RAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scatt Veccolor IV. ASBESTOS (Gene a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and f. Friable Non-Friable OPERATOR'S CERTIFICATION: I and are classified, packed, marked	d material has been acce	a-c and Destina c. US EPA Nun oted and to the best could for the best ture -f and Operator	d. Discrepancy Indi st of my knowledge the fore complete IVg-i) c. Responsible Agency N d. Phone:	IId-g) ication Space egoing is true g. Date ame and Ac	e and acc - / 9 -/ ddress:	/e by proper ship	ping name ational and
b. Phone: JOWN RAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scatt Veccolor IV. ASBESTOS (Gene a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and f. Friable Non-Friable OPERATOR'S CERTIFICATION: I and are classified, packed, marked	d material has been acce	a-c and Destina c. US EPA Nun oted and to the best could for the best ture -f and Operator	d. Discrepancy Indi st of my knowledge the fore complete IVg-i) c. Responsible Agency N d. Phone:	IId-g) ication Space egoing is true g. Date ame and Ac	e and acc - / 9 -/ ddress:	/e by proper ship	ping name ational and
b. Phone: JOWN RAN c. Driver Name (Print) III. DESTINATION (Ge a. Disposal Facility and Site Address Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named Scatt Veccolority IV. ASBESTOS (Gene a. Operator's Name and Address: b. Phone: e. Special Handling Instructions and	d material has been acce d material has been acce ) f. Signa erator completes IVa d Additional Information: ] Both % Fr hereby declare that the c and labeled and are in a	a-c and Destina c. US EPA Num pted and to the beau ture -f and Operator iable ontents of this con ll respects in prope	d. Discrepancy Indi     d. Discrepancy Indi     d. Store of my knowledge the fore     Complete IVg-i)     c. Responsible Agency N     d. Phone:     % Non-Friable     signment are fully and accu-     r condition for transport by	IId-g) ication Space egoing is true g. Date ame and Acc urately desc highway acc	e and acc - / G -/ idress: ribed abov cording to	ve by proper ship, applicable intern	

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV If waste is  $\underline{\text{NOT}}$  asbestos waste, complete Sections I, II and III

REPUBLIC SERVICES. INC.

		b. Manifest D	ocument Number	9	c. Page	1 of	
d. Generator's Name and Location:				Mailing Address:	1		
Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334			1311 West Main Street Carmi, IL 62821 g. Phone:				
If owner of the generating facility differs	from the gene	rator, provide:	g. r none.				
h. Owner's Name:			i. Owner's Phon	No .			
j. Waste Profile #	k. Exp. Dat		Shipping Name and	m. Co	ontainers	n. Total	o. Unit
93180384 07/31/2018		Descript	ion bil - Unleaded	No.	Туре	Quantity	Wt/Vol
							-
						Tons	29,85
		Ti	cket#15.3	2			
GENERATOR'S CERTIFICATION: I he state law, has been properly described, waste is a treatment residue of a previo been treated in accordance with the req	classified and usly restricted i	packaged, and is in nazardous waste su	proper condition for tra bject to the Land Dispo	nsportation according al Restrictions. 10	ng to applic	cable regulations	AND if this
Matthew Rives		R.D.				9-13	
p. Generator Authorized Agent Name (FII. TRANSPORTER (Ger		q. Signature			r. Date		
7 Williamson Dr. Fairfield ,II 62837 b. Phone:	42	P-HK	, G		10.10	×	
c. Driver Name (Print)	d,	Signature	2				
		- X	tination Site comp				
III. DESTINATION (Gener	acor ouripio		the second of the second				
III. DESTINATION (Gener a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837		c. US EPA		ncy Indication Spa	ce.		
III. DESTINATION (Gener a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294			Number d. Discrepa	ancy Indication Spa		urate.	
III. DESTINATION (Gener a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294		accepted and to the	Number d. Discrepa	the foregoing is true			
III. DESTINATION (Gener a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named ma SCOTT Var Zourt	terial has been		Number d. Discrepa	the foregoing is true	e and accu		
III.       DESTINATION (Gener         a. Disposal Facility and Site Address:       Wayne County Landfill         RR 1 PO Box 214       Fairfield, IL 62837         b. Phone: 618.842.4294       I herby certify that the above named ma         SCOTT Vac Zourd       e. Name of Authorized Agent (Print)         IV.       ASBESTOS (Generator)	terial has been	accepted and to the	Number d. Discreps	the foregoing is true g. Date	e and accu j Q- E		
III. DESTINATION (Gener a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named ma SCOTT Vac Zocci e. Name of Authorized Agent (Print) IV. ASBESTOS (Generator	terial has been	accepted and to the	Number d. Discreps	the foregoing is tru	e and accu j Q- E		
III. DESTINATION (Gener a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named ma SCOTT Vac Zocct e. Name of Authorized Agent (Print) IV. ASBESTOS (Generato a. Operator's Name and Address:	terial has been	accepted and to the	Number d. Discreps	the foregoing is true g. Date	e and accu j Q- E		
III.       DESTINATION (Gener         a. Disposal Facility and Site Address:       Wayne County Landfill         RR 1 PO Box 214       Fairfield, IL 62837         b. Phone: 618.842.4294       I herby certify that the above named ma         Scort       Vac Zoct         e. Name of Authorized Agent (Print)         IV.       ASBESTOS (Generator         a. Operator's Name and Address:         b. Phone:	terial has been f. s or completes	accepted and to the Signature IVa-f and Opera	Number d. Discrepa	the foregoing is true g. Date	e and accu j Q- E		
III.       DESTINATION (Gener         a. Disposal Facility and Site Address:       Wayne County Landfill         RR 1 PO Box 214       Fairfield, IL 62837         b. Phone: 618.842.4294       I herby certify that the above named ma         SCOTT       VareZoutt         e. Name of Authorized Agent (Print)       IV.         IV.       ASBESTOS (Generator         a. Operator's Name and Address:       Bo         b. Phone:       Non-Friable       Bo         of Friable       Non-Friable       Bo         OPERATOR'S CERTIFICATION: I hered       and are classified, packed, marked and       Intervented	terial has been f. s or completes fitional Informa th by declare that	accepted and to the Signature IVa-f and Opera tion: % Friable the contents of this	Number d. Discrepa	the foregoing is true g. Date i) gency Name and Ad	e and accu - j Q- E Idress: ribed above	e by proper shipp	bing name ational and
III.       DESTINATION (Gener         a. Disposal Facility and Site Address:       Wayne County Landfill         RR 1 PO Box 214       Fairfield, IL 62837         b. Phone: 618.842.4294       I herby certify that the above named ma         SCOTT       VareZoutt         e. Name of Authorized Agent (Print)       IV.         IV.       ASBESTOS (Generator         a. Operator's Name and Address:       Bo         b. Phone:       Non-Friable       Bo         of Friable       Non-Friable       Bo         OPERATOR'S CERTIFICATION: I hered       and are classified, packed, marked and       Intervented	terial has been f. s or completes fitional Informa th by declare that	accepted and to the Signature IVa-f and Opera tion: % Friable the contents of this	Number d. Discrepa	the foregoing is true g. Date i) gency Name and Ad	e and accu - j Q- E Idress: ribed above	e by proper shipp	Ding name ational and
III.       DESTINATION (Gener         a. Disposal Facility and Site Address:       Wayne County Landfill         RR 1 PO Box 214       Fairfield, IL 62837         b. Phone: 618.842.4294       Inerby certify that the above named ma         SCOTT Vac Zocci       e. Name of Authorized Agent (Print)         IV.       ASBESTOS (Generator         a. Operator's Name and Address:       b. Phone:         e. Special Handling Instructions and Address       b. Phone:	terial has been f. S or completes litional Informa th by declare that labeled and are	accepted and to the Signature IVa-f and Operations tion: % Friable the contents of this in all respects in pr	Number d. Discrepa	the foregoing is tru g. the foregoing is tru g. Date i) gency Name and Ad ind accurately desc sport by highway ac i, Date	e and accu - j Q- E idress: ribed abov cording to	e by proper shipp applicable intern	ational and

ST REPUBLIC

Electronic Filing: Received, Clerk's Office 2/25/2021

If waste is asbestos waste, complete Sections I, II, III and IV If waste is  $\underline{NOT}$  asbestos waste, complete Sections I, II and III

I. GENERATOR (Gene a. Generator's US EPA ID Number	ator com	Jetes Id	b. Manifest Docu	ment Number		c. Page	1 of		
				LC			1		
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334	Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334				e. Generator's Mailing Address: 1311 West Main Street Carmi, IL 62821 g. Phone:				
If owner of the generating facility diffe	rs from the g	enerator,	provide:						
h. Owner's Name:				i. Owner's Phone No.:					
j. Waste Profile #				Shipping Name and m. Co		ontainers n. Total		o. Unit	
4293180384			LUST Soil -	Uploaded	No.	Туре	Quantity	Wt/Vol	
4200100004	0//3//2	.010	2001 001	Unicaded					
							Tons	17.32	
			Tict	(et=1533					
GENERATOR'S CERTIFICATION: I state law, has been properly describe waste is a treatment residue of a prev been treated in accordance with the re	d, classified a riously restric	and packa ted hazar	aged, and is in prop dous waste subjec	per condition for transporta t to the Land Disposal Re	ation accordin strictions. 1 c	ng to applic ertify and t	cable regulations; warrant that the w	AND, if this	
Matthew Rives	10.1.11								
p. Generator Authorized Agent Name II. TRANSPORTER (G			Signature	r. Date					
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone:		17				16-1	o.'		
c. Driver Name (Print)		d. Signa	<u>Angline</u>	~	e. Date	1-1-1	3		
III. DESTINATION (Gene	erator com			ation Site completes					
a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294			c. US EPA Nun	nber d. Discrepancy Ind	dication Spac				
I herby certify that the above named m		een acce	pted and to the bes	st of my knowledge the for	regoing is tru	e and accu	irate.		
Scott VanZant	* (1)	L	Sent L	m re	1-	-14-18	5		
e. Name of Authorized Agent (Print)		f. Signa			g. Date				
IV. ASBESTOS (Genera	tor comple	tes IVa	-f and Operator						
a. Operator's Name and Address:				c. Responsible Agency I	Name and Ad	idress:			
b. Phone:				d. Phone:					
e. Special Handling Instructions and A	dditional Info	rmation:							
	Both	% Fri		% Non-Friable					
ODEDATODIO OEDTIEICATIONI, I have	reby declare i	that the c	ontents of this con	signment are fully and acc	urately descr	ribed above	e by proper shipp	ing name	
and are classified, packed, marked an national governmental regulations.	d labeled and	are in al	I respects in prope	r condition for transport by	ringilway act	cording to		nonar and	
and are classified, packed, marked an	d labeled and	i are in al	respects in prope	r condition for transport by	Thighway act				
and are classified, packed, marked an		h. Siona	iture		i. Date				

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If waste is asbestos waste, complete Sections I, II, III and IV If waste is  $\underline{\text{NOT}}$  asbestos waste, complete Sections I, II and III

	10	b. 1	Manifest Docu	ment Number		c. Page	a 1 of	
The Interior's US EPA ID Number	-	- 2112		21		U. ray	1	
General r's Name and Loca tio		1	3	e. Generator's Mailing A	ddress:	1		
Martin & Bayley Inc 540 Airport Road								
	At. Vernon, IL 62864 Phone:618-382-2334			1311 West Main Street Carmi, IL 62821				
f. Phone:618-382-2334				g. Phone:			111 -	
If owner of the generating facility	ch is from the gene	erator, provi	ide:					
h. Owner's Name:				i. Owner's Phone No.:			- 1	
j. Waste Profile #	k. Exp. Da	ate	I. Waste Shir	pping Name and	m Cou	ntainers	L a Tatat	1 0.5
	~		Description		No.	Type	n. Total Quantity	o. Unit Wt/Vol
4293180384	07/31/201	8	LUST Soil - I	Jnleaded ,		1900	Quantity	000001
1 .	- X-							
7								
	.9.							22
Ŕ							TONS	32.0
								-
19				1. the second	1			
and the second sec			1 ic	Ket 1534				
GENERATOR CERTIFICATION:	hereby certify the	at the above	a named main	dat 6 1 1 1 1	1	17-11-11-11		
state law, has been properly describ	d, classified and	packaged,	and is in propi	or condition for transportation	e as define	d by 40 Cl	FR 261 or any ap	plicable
waste is a treatment residue of a pre	ously restricted	hazardous	waste subject	to the Land Disposal Restri	ictions. I ce	rtify and y	varrant that the w	AND, if this
been treated in accordance with the	equirements of 40	0 CFR 268	and is no long	er a hazardous waste as de	afined by 40	CFR 261	s.	*
Matthew Rives	•	1	1			1-10	2-18	-6- 
p. Generator Authorized Agent	(Print)	q. Signa	ature	Terration or constitution of the		r. Date	18	
II. TRANSPORTER (G	energior comp	letes Ila-	b and Tran	sporter completes IIc-	e)	1. Date		
a. Transporter's Name and Address:		-		The second second second	•/			
Carter Trucking	1							
0	. /						- 4	
7 Williamson Dr.	4.						-7 U	
7 Williamson Dr. Fairfield ,II 62837	4						~**	
7 Williamson Dr. Fairfield ,II 62837 b. Phone:	4	AN	1					
7 Williamson Dr. Fairfield , II 62837 b. Phone: MACTHE T911,4V	4		alt	T cmm		110		ko
7 Williamson Dr. Fairfield ,II 62837 b. Phone: MCACTH T911,4V c. Driver Name (Print)		Signature		Time_	e. Date	110		1
7 Williamson Dr. Fairfield ,II 62837 b. Phone: MMACTHY T9hh4V c. Driver Name (Print) III. DESTINATION (Gene	erator complet	Signature e IIIa-c ai	nd Destinat	ion Site completes IIIc	e. Date	110		
7 Williamson Dr. Fairfield ,II 62837 b. Phone: MMACTHY T9hpt4V c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address:	erator complet	Signature e IIIa-c ai			d-g)			
7 Williamson Dr. Fairfield ,II 62837 b. Phone:	erator complet	Signature e IIIa-c ai	nd Destinat	ion Site completes IIIo	d-g)			
7 Williamson Dr. Fairfield ,II 62837 b. Phone: <i>MM aCTHM T 9hp 4M</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214	erator complet	Signature e IIIa-c ai	nd Destinat		d-g)			
7 Williamson Dr. Fairfield ,II 62837 b. Phone: <i>MV a CTHV T 9hpt 4V</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618 842 4294	erator complet	Signature e IIIa-c ai c. L	nd Destinat JS EPA Numb	er d. Discrepancy Indica	d-g) ation Space:		118	
7 Williamson Dr. Fairfield ,II 62837 b. Phone:	erator complet	Signature e IIIa-c ai c. L	nd Destinat JS EPA Numb	er d. Discrepancy Indica	d-g) ation Space:		118	
7 Williamson Dr. Fairfield ,II 62837 b. Phone: MMACTHY T9/1/4W c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named m	erator complet	Signature e IIIa-c ai c. L	nd Destinat JS EPA Numb	er d. Discrepancy Indica	d-g) ation Space:	and accur	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield , II 62837 b. Phone: <i>MV aCTHV T 9111.4V</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named m Sca W VarCant	erator complet	Signature e Illa-c al c. L accepted ar	nd Destinat JS EPA Numb	er d. Discrepancy Indica	I-g) ition Space: oing is true i		<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield ,II 62837 b. Phone: <i>MV aCTH T 9hpt 4V</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named m Scatt Vartaatt e. Name of Authorized Agent (Print)	Paterial has been a	Signature e IIIa-c al c. L accepted ar Solution ignature	nd Destinat JS EPA Numb nd to the best	of my knowledge the forego	d-g) ation Space:	and accur	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield ,II 62837 b. Phone: MACTHE T 9111 44 c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named m Scatt VarCaatt e. Name of Authorized Agent (Print) IV. ASBESTOS (Generational Action of the second secon	Paterial has been a	Signature e IIIa-c al c. L accepted ar Solution ignature	nd Destinat JS EPA Numb nd to the best	of my knowledge the forego	d-g) ation Space: bing is true a 	and accur -/ 9-7	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield , II 62837 b. Phone: <i>MMACTHN T</i> 9/1/14// c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named m <i>Sca H VanCant</i> b. Name of Authorized Agent (Print) IV. ASBESTOS (Generating)	Paterial has been a	Signature e IIIa-c al c. L accepted ar Solution ignature	nd Destinat JS EPA Numb nd to the best	of my knowledge the forego	d-g) ation Space: bing is true a 	and accur -/ 9-7	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield , II 62837 b. Phone: <i>MV aCTHV T 9hpt 4V</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named m Sca H VarCast e. Name of Authorized Agent (Print)	Paterial has been a	Signature e IIIa-c al c. L accepted ar Solution ignature	nd Destinat JS EPA Numb nd to the best	of my knowledge the forego	d-g) ation Space: bing is true a 	and accur -/ 9-7	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield ,II 62837 b. Phone: <i>MUCTH T9hr4V</i> c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 herby certify that the above named m Scatt VanCant b. Name of Authorized Agent (Print) IV. ASBESTOS (Generational Address: a. Operator's Name and Address:	Paterial has been a	Signature e IIIa-c al c. L accepted ar Solution ignature	nd Destinat JS EPA Numb nd to the best fil _ n S Operator c	of my knowledge the forego	d-g) ation Space: bing is true a 	and accur -/ 9-7	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield , II 62837 b. Phone: MMAUTH T911, 4W c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 herby certify that the above named m Scatt Vantant e. Name of Authorized Agent (Print) V. ASBESTOS (Generational a. Operator's Name and Address: b. Phone:	erator complet	Signature e IIIa-c al c. L accepted ar ignature IVa-f and	nd Destinat JS EPA Numb nd to the best fil _ n S Operator c	of my knowledge the forego	d-g) ation Space: bing is true a 	and accur -/ 9-7	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield , II 62837 b. Phone: MMACTHY T911,4W c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 herby certify that the above named m Scatt Vantant e. Name of Authorized Agent (Print) IV. ASBESTOS (Generational a. Operator's Name and Address: b. Phone:	erator complet	Signature e IIIa-c al c. L accepted ar ignature IVa-f and	nd Destinat JS EPA Numb nd to the best fil _ n S Operator c	of my knowledge the forego	d-g) ation Space: bing is true a 	and accur -/ 9-7	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield , II 62837 b. Phone: MMACTHY T911,4W c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named m Scatt VanCaatt e. Name of Authorized Agent (Print) IV. ASBESTOS (Generational a. Operator's Name and Address: b. Phone: a. Special Handling Instructions and Address	erator complet	Signature e Illa-c al c. L accepted ar ignature IVa-f and	nd Destinat JS EPA Numb nd to the best fil _ n , s Operator c d d	er d. Discrepancy Indica of my knowledge the forego complete IVg-i) . Responsible Agency Nam	d-g) ation Space: bing is true a 	and accur -/ 9-7	<u>4 1 8</u> ate.	
7 Williamson Dr. Fairfield , II 62837 b. Phone: MACTHE T 9111 44 c. Driver Name (Print) III. DESTINATION (Gene a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named m Scatt Vartant a. Name of Authorized Agent (Print) IV. ASBESTOS (Generational a. Operator's Name and Address: b. Phone: b. Phone: c. Special Handling Instructions and Address (Constructions) D. Friable D Non-Friable Bo	erator complet	Signature e IIIa-c ai c. L accepted ar y tou ignature IVa-f and	nd Destinat JS EPA Numb nd to the best tt Operator c	er d. Discrepancy Indica of my knowledge the forego complete IVg-i) . Responsible Agency Nam . Phone:	d-g) ition Space: bing is true a g. Date te and Addr	and accur -/ 9-/ ess:	<u>ate.</u> 18	
7 Williamson Dr.         Fairfield , II 62837         b. Phone: <i>MMACTHN C. Driver Name (Print)</i> <b>III. DESTINATION (Gene</b> a. Disposal Facility and Site Address:         Wayne County Landfill         RR 1 PO Box 214         Fairfield, IL 62837         b. Phone: <b>Sca H</b> VanCant <b>Sca H</b> VanCant <b>B. Name of Authorized Agent (Print) IV. ASBESTOS (Generational Address: D. Phone: B. Special Handling Instructions and Address: D. Phone: B. Special Handling Instructions and Address:</b>	ditional Informatio	Signature e IIIa-c an c. L accepted ar y cont ignature IVa-f and	nd Destinat JS EPA Numb nd to the best ft Operator c d d gf this consign	er d. Discrepancy Indica of my knowledge the forego complete IVg-i) . Responsible Agency Nam . Phone:	d-g) ition Space: bing is true a g. Date ie and Addr	and accur -/ 9-, ess:	<u>ate.</u> 18	g name
7 Williamson Dr.         Fairfield , II 62837         b. Phone: <i>MMAUTH T 9hp44</i> c. Driver Name (Print) <b>III. DESTINATION</b> (Generation of the second sec	ditional Informatio	Signature e IIIa-c an c. L accepted ar y cont ignature IVa-f and	nd Destinat JS EPA Numb nd to the best ft Operator c d d gf this consign	er d. Discrepancy Indica of my knowledge the forego complete IVg-i) . Responsible Agency Nam . Phone:	d-g) ition Space: bing is true a g. Date ie and Addr	and accur -/ 9-, ess:	<u>ate.</u> 18	g name onal and
7 Williamson Dr.         Fairfield , II 62837         b. Phone: <i>MMAUTH T 9hp44</i> c. Driver Name (Print)         III.       DESTINATION (Generation of the second of th	ditional Informatio	Signature e IIIa-c an c. L accepted ar y cont ignature IVa-f and	nd Destinat JS EPA Numb nd to the best ft Operator c d d gf this consign	er d. Discrepancy Indica of my knowledge the forego complete IVg-i) . Responsible Agency Nam . Phone:	d-g) ition Space: bing is true a g. Date ie and Addr	and accur -/ 9-, ess:	<u>ate.</u> 18	g name onal and
7 Williamson Dr.         Fairfield , II 62837         b. Phone:         MMACTHE T 9/1/1 4V         c. Driver Name (Print)         III.       DESTINATION (Generation of the second sec	erator complet	Signature e IIIa-c an c. L accepted ar y cont ignature IVa-f and on: Friable ne contents n all respec	nd Destinat JS EPA Numb nd to the best ft Operator c d d gf this consign	er d. Discrepancy Indica of my knowledge the forego complete IVg-i) . Responsible Agency Nam . Phone:	d-g) ition Space: bing is true a g. Date ie and Addr	and accur -/ 9-, ess:	<u>ate.</u> 18	g name onal and
7 Williamson Dr.         Fairfield ,II 62837         b. Phone:         MMAUTH T911,4W         c. Driver Name (Print)         III.       DESTINATION (Generation of the second of the s	ditional Information	Signature e IIIa-c an c. L accepted ar y cont ignature IVa-f and on: Friable ne contents n all respect	nd Destinat JS EPA Numb nd to the best Coperator co coperator co d d g of this consigned ts in proper co	er d. Discrepancy Indica of my knowledge the forego omplete IVg-i) . Responsible Agency Nam . Phone:	d-g) ition Space: bing is true a g. Date le and Addr ely describe hway accor	and accur -/ 4/-/ ess: ed above t ding to ap	ate. 18-	onal and



## **NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV If waste is  $\underline{NOT}$  asbestos waste, complete Section: 1, If and 11

I. GENERATOR (Generat	or completes l	la-r)							
a. Generator's US EPA ID Number		b. Manifest Docur	nent Number 22		c. Page	1 of 1			
d, Generator's Name and Location: Martin & Bayley Inc 540 Airport Road ML Vernon, IL 62864 f, Phone:618-382-2334	artin & Bayley Inc 0 Airport Road . Vernon, IL 62864 Phone:618-382-2334			e. Generator's Mailing Address: 1311 West Main Street Carmi, IL 62821 g. Phone:					
If owner of the generating facility differs fr	om the generator	, provide:							
h. Owner's Name:				i. Owner's Phone No.: poing Name and m. Containers n. Total o. Unit					
j. Waste Profile #	k. Exp. Date	I. Waste Ship Description	ping Name and	m, Cor No.	Type	n. Total Quantity	o. Unit Wi/Vol		
4293180384	07/31/2018	LUST Soil - U	Jnleaded						
			-			Tons	28.58		
		Tict	kef71535						
GENERATOR'S CERTIFICATION: I here state law, has been properly described, c waste is a treatment residue of a previous been treated in accordance with the requ	lassified and pack sly restricted haza	kaged, and is in prop ardous waste subject	er condition for transportation to the Land Disposal Restrict	on accordin rictions, 1 ce	g to applic ertify and v 0 CFR 261	able regulations warrant that the v 1.	; AND, if this		
Matthew Rives		11-	in the second second		1-10	9-18			
p. Generator Authorized Agent Name (Pr		q. Signature			r. Date		,		
II. TRANSPORTER (Gene	erator complet	es IIa-b and Trai	nsporter completes IIc	с-е)					
a. Transporter's Name and Address: Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phonp: Dohm BANK. c. Driver Name (Print)	N drsig	her Rau	L	e. Dete	19	118			
III. DESTINATION (General			ation Site completes II						
a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294 I herby certify that the above named mate		c. US EPA Nun	iber d. Discrepancy India	cation Spac	and acc	urate.			
	-	1441	10000	1-	-14-1	8			
Scott Cuntant		Acrill	1. 30		111	0			
e. Name of Authorized Agent (Print)	f. Sigr		annalata Dita D	g. Date					
IV. ASBESTOS (Generator	completes IV	a-r and Operator		and Ad	des set				
a. Operator's Name and Address:			c. Responsible Agency Na	ame ano Ao	uless.	-			
b. Phone: e. Special Handling Instructions and Add	lional Information		d. Phone:						
e. opecial nationing instructions and Add									
		Friable	% Non-Friable						
f. Friable Non-Friable Bott OPERATOR'S CERTIFICATION: I hereb and are classified, packed, marked and la national governmental regulations.	v declare that the	contents of this cont	sionment are fully and accu	rately descr highway acc	ribed abov cording to	e by proper ship applicable interr	pping name national and		
g. Operator's Name and Title (Print)	h. Sig	nature	1	i. Date	. ronewate	d or the dam-	lion or		
*Operator refers to the company which or renovation operation or both	wns, leases, oper	ates, controls, or sup	pervises the facility being de	emolished o	rrenovate	A.R. 007	3		

Electronic Filing: Received, Clerk's Office 2/25/2021 **SERVICES, INC.** NON-HAZARDOUS SPECIAL WASTE & ASBESTO NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

> If waste is asbestos waste, complete Sections I, II, III and IV If waste is NOT asbestos waste, complete Sections I, II and III

Generator's US EPA ID Number b. Manifest Doci			ment Number 23		c. Page	1 of		
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road			e. Generator's Mailing Address: 1311 West Main Street					
Mt. Vernon, IL 62864 f. Phone:618-382-2334			Carmi, IL 62821 g. Phone:					
If owner of the generating facility differs	s from the gener	ator, provide:		<				
h. Owner's Name:	i. Owner's Phone No .:							
j. Waste Profile #	k. Exp. Date I. Waste Shipping Description		pping Name and	m. Co No.	ntainers Type	n. Total Quantity	o. Unit Wt/Vol	
4293180384	07/31/2018 LUST Soil -		Unleaded		1900	ausinity		
						Tons	26.3	
		Tie	KET 1536					
GENERATOR'S CERTIFICATION: I h state law, has been properly described waste is a treatment residue of a previo been treated in accordance with the red	, classified and pously restricted h	packaged, and is in prop nazardous waste subject	per condition for transport t to the Land Disposal Re	ation accordin strictions. 1 c	ig to applic ertify and i	cable regulations; warrant that the w	AND, if this	
Matthew Rives		Malle			1-1	9-18		
p. Generator Authorized Agent Name (		q. Signature			r. Date			
II. TRANSPORTER (Ge a. Transporter's Name and Address:	nerator comp	pletes IIa-b and Ira	nsporter completes	lic-e)				
Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone:	2							
c. Driver Name (Print)	d	Signature	KQ-	)-19-18 e. Date				
III. DESTINATION (Gene		the second se	ation Site completes					
a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294		c. US EPA Nur	nber d. Discrepancy In	dication Spac				
I herby certify that the above named ma	aterial has been	accepted and to the be	st of my knowledge the fo	regoing is true				
Sott Unizant		Statel 1	5	1-	19-1	18		
e. Name of Authorized Agent (Print)	f. S	Signature		g. Date	i i			
IV. ASBESTOS (Generation	or completes	IVa-f and Operato	r complete IVg-i)					
a. Operator's Name and Address:			c. Responsible Agency	Name and Ad	dress:			
h Dhanai			d. Phone:					
U. FIIONE:	ditional Informa	tion:						
b. Phone: e. Special Handling Instructions and Ac f.  Friable  Non-Friable  B	oth	% Friable	% Non-Friable					
e. Special Handling Instructions and Ac	eby declare that	the contents of this con	signment are fully and acc					
e. Special Handling Instructions and Ac f. Friable Non-Friable Bi OPERATOR'S CERTIFICATION: I here and are classified, packed, marked and	eby declare that	the contents of this con	signment are fully and acc					



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV If waste is  $\underline{NOT}$  asbestos waste, complete Sections I, II and III

I. GENERATOR (Generation of the second secon	ator comple		Manifest Docum	nent Number 72		c. Page	1 of		
				~ `	· · · · · · · · · · · · · · · · · · ·		1		
d. Generator's Name and Location: Martin & Bayley Inc 540 Airport Road Mt. Vernon, IL 62864 f. Phone:618-382-2334				e. Generator's Mailing Address: 1311 West Main Street Carmi, IL 62821 g. Phone:					
If owner of the generating facility differs	from the gene	rator, pro	vide:						
h. Owner's Name:				i. Owner's Phone No.:					
j. Waste Profile #	k. Exp. Da	te						o. Unit	
4293180384	07/31/2018	R	Description	Inleaded	No.	Туре	Quantity	Wt/Vol	
200100001							1 1		
							Tons	17.03	
			Tic	kef#1537				-	
GENERATOR'S CERTIFICATION: I has state law, has been properly described, waste is a treatment residue of a previo been treated in accordance with the rec	classified and usly restricted	packaged hazardou	d, and is in prope is waste subject	er condition for transporta to the Land Disposal Res	tion accordin strictions. I co	g to appli ertify and	cable regulations; warrant that the v	AND, if this	
Matthew Rives		1	- R	5		1	-19-18		
p. Generator Authorized Agent Name (F			gnature			r. Date			
II. TRANSPORTER (Ger	nerator com	pletes II	la-b and Tran	sporter completes II	c-e)				
a. Transporter's Name and Address: Carter Trucking 7 Williamson Dr. Fairfield ,II 62837 b. Phone:									
C. Driver Name (Print)	d	IC Signatur	2 March		e. Date	1 1 1 0			
III. DESTINATION (Gener	ator comple	te Illa-c	and Destina	tion Site completes	llld-g)				
a. Disposal Facility and Site Address: Wayne County Landfill RR 1 PO Box 214 Fairfield, IL 62837 b. Phone: 618.842.4294			c. US EPA Num						
I herby certify that the above named ma	iterial has been	accepted	d and to the bes	t of my knowledge the for	egoing is tru				
Scott Vintart		1	ati ()	-50	1-	-19-10	F		
e. Name of Authorized Agent (Print)		Signature			g. Date				
IV. ASBESTOS (Generate	or completes	s IVa-f a	and Operator						
a. Operator's Name and Address:				c. Responsible Agency N	Name and Ad	dress:			
b. Phone:				d. Phone:					
e. Special Handling Instructions and Ad	ditional Inform	ation:							
f. Friable Non-Friable Bc OPERATOR'S CERTIFICATION: I here and are classified, packed, marked and national governmental regulations.	by declare that	% Friable t the content te in all re	ents of this cons	% Non-Friable ignment are fully and acc condition for transport by	curately descr highway ac	ribed abov cording to	e by proper ship applicable intern	ping name ational and	
g. Operator's Name and Title (Print)	h.	Signatur	0		i. Date	1.1.1.1	A.R. 0075		
*Operator refers to the company which renovation operation or both	owns, leases, o	operates,	controls, or supe	ervises the facility being d	lemolished o	r renovate	ed, or the demoliti	on or	

NON-HAZARDOUS WASTE MANIFEST

	NON-HAZARDOUS WASTE MANIFEST		S EPA ID No.				Document No.	213913	of
	3. Generator's Name and Mailing Address HUCK 540 AIRPORT RD-1 4. Génerator's Phone ()	MT. VERA	VON,	IL.					
	5. Transporter 1 Company Name FIRST AMERICAN REC		6. 	US EPA ID N	lumber		A. State Transporter		575-48(
1	7. Transporter 2 Company Name		8.	US EPA ID I	Number		C. State Trans D. Transporter	2 Phone	
	9. Designated Facility Name and Site Address FIRST AMERICAN REC 535 THEOBOLD LN. PADUCAH, KY 42003	OVERY	10. I	US EPA ID			E. State Facilit F. Facility's Ph		
	11. WASTE DESCRIPTION					12. C No.	ontainers Type	13. Total Quantity	14 Un Wt./
and the	a. USED PETROLEUM (	OIL, N.O.S.				1	TT		G
GENE	DILY-WATER MIXTUR	RE, N.O.S.				1	TT	1950	G
R A T	C.							-	
0 - R -	d.								
1	G. Additional Descriptions for Materials Listed A	bove					H. Handling C	odes for Wastes Listed Ab	love
1 1 1 1 4	G. Additional Descriptions for Materials Listed A						H. Handling C	odes for Wastes Listed Ab	love
Kal Est May had be		US DOT	NE 888	-408-4801			H. Handling C	odes for Wastes Listed Ab	ove
	NOT REGULATED BY 15. Special Handling Instructions and Additional	US DOT				d and are regulation		codes for Wastes Listed Ab	
	NOT REGULATED BY	US DOT Information DNSE PHON recertify that the conter als described on this m				6			Date Date Date Date
TRAZSPO	NOT REGULATED BY	US DOT		pment are fully and ac not subject to federal h	ccurately describe hazardous waste	6	in all respects		Date Ionth Day
TRANSPORTER	NOT REGULATED BY	US DOT		prment are fully and action subject to federal h	ccurately describe hazardous waste	6	in all respects		Date Ionth Day Date Ionth Day
RANNPORT	NOT REGULATED BY	US DOT	nts of this ship manifest are n	Signature Signature Signature Signature	courately describe hazardous waste	3/0	in all respects		Date Nonth Day Date Nonth Day Date Date
RANSPORTER FA	NOT REGULATED BY	US DOT	nts of this ship manifest are n	Signature Signature Signature Signature	courately describe hazardous waste	3/0	in all respects		Date Nonth Day Date Nonth Day Date Date



	Hazardous Ma Rep	ort,081030	
	· · · · · · · · · · · · · · · · · · ·	Martin e on 2017-12-05 10:57:31	
Leaking Underground Storage Tank (LUST):		Leakingl	1STTechFile
Caller:	Matt Rieves		
Call Back #:	217/ 851-1404	م (معرب المعرب المع المعرب المعرب	19 Black Stat
Caller Represents:	Chase Environmental		110
Hazmat Incident Type:	Leak or spill	DEC 1.	4 2017
	INCIDENT		
Incident Location:	540 Airport Road	LOCATION REVIEWE	ER JRM
County:	Jefferson 128124	City:	Mount Vernon
Primary IEMA Region:	9	Secondary IEMA Region:	Not Applicable
Full Address:	540 Airport Road, Mount Verno	n, IL	
Latitude:	38.321828		-88. <del>879835 -</del>
Milepost:	N/A , 32 1718	Sec:	N/A.881208
Twp.:	N/A	Range:	N/A
Area Involved:	Fixed Facility		· · ·
Media or medium into which the release occurred:	Ground		
	WEATHER IN	FORMATION	
Temp (deg F):	36	Wind Dir/Speed m.p.h: W@	9 MPH
	MATERIALS	SINVOLVED	

Material Name:	Gasoline	Material Type:	Liquid
CHRIS Code:	UNK	CAS #:	UNK
UN/NA #:	UNK		•
Is this a 302(a) Extremely Hazardous Substance?	No		
Is this a RCRA Hazardous Waste?	No		
Is this a RCRA regulated facility?	No		
Container Type:	Under ground storage tank(s)-2	Container Size:	2 X 10,000 gallons-Gasoline
Amount Released:	UNK	Rate of Release/min:	UNK
Duration of Release:	UNK		
Cause of Release:	UNK		
Estimated Spill Extent:	UNK	Spill Extent Units:	

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Date/Time Occured:	(Date/Time Unknown)	(Date/Time Unknown)					
Date/Time Discovered:	2017-12-05 10:00						
Number Injured:	0	Where Taken:	N/A				
Number Killed:	0	# Evacuated:	0				
On Scene Contact:	Matt Rieves	On Scene Phone #:	217/ 851-1404				
Proper safety precautions to None needed	o take as a result of the release, incl	uding evacuation:					
Assistance needed from Sta NONE	ate Agencies:						
Containment/Cleanup actio Removal of LUSTs.	ns and plans:						
	Martin d Data da						

Responsible Party:	Martin and Bayley, Inc.
Contact Person:	Troy Deitz
Callback Phone Number:	618/ 382-2334
Facility Manager:	Troy Dietz
Facility Manager Phone #:	618/ 382-2334
Street Address:	1311 W. Main Street, P. O. Box 385
City:	Carmi State: IL Zip Code: 62821

<b>Emergency Units Contacted</b>	Contacted	On Scene	Agencies Contacted
ESDA			NONE
Fire			NONE
Police			NONE
Sheriff			NONE
Other			NONE

AGENCIES OR PERSONS NOTIFIED					
Agency Date/Time Name of Person Notification Ac					
IEPA, OSFM, IDNR-NRTP	2017-12-05 10:58	Emailed	Report Sent		
IEMA Region 9	2017-12-05 10:58	Emailed	Report Sent		

Narrative:

Follow-Up Information:

Attachments:

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ELECTIVORS EINVIRONWENTENTER'S PROTE/ET/RORI AGENCY

1021 NORTH GRAND AVENUE EAST, P.O. BOX 19276, SPRINGFIELD, ILLINOIS 62794-9276 (217) 782-3397 BRUCE RAUNER, GOVERNOR ALEC MESSINA, DIRECTOR

217/524-3300

December 8, 2017

Martin & Bayley, Inc. Attn: Troy Deitz 1311 West Main Street Carmi, IL 62821

Re: LPC #0810305287 -- Jefferson County Mt. Vernon/Martin & Bayley, Inc. 540 Airport Road Leaking UST Incident No. 20171116 Leaking UST Technical File NEPA-DIVISION OF RECORDS NATIVAGENIENT DEC 132017 REVIEWER: JNJ.C

Dear UST Owner or Operator:

The Illinois Environmental Protection Agency (Illinois EPA) received notification from the Illinois Emergency Management Agency that a release from an underground storage tank system(s) has occurred at the above-referenced site. As a result of this release, the owner or operator of the underground storage tank(s) is required to comply with the Leaking Underground Storage Tank (Leaking UST) Program requirements, including the submittal of applicable documentation on forms prescribed and provided by the Illinois EPA.

To obtain copies of the forms, as well as additional information regarding the Illinois EPA's Leaking UST Program, please visit our Web page at <u>http://www.epa.state.il.us/land/lust/index.html</u>.

- 1. The direct link to the technical forms page is <u>http://www.epa.state.il.us/land/lust/forms/technical-forms/index.html</u>.
- 2. If you intend to seek reimbursement from the Illinois Underground Storage Tank Fund for costs incurred, the direct link to the budget and reimbursement forms page is: <u>http://www.epa.state.il.us/land/lust/forms/budget-forms/index.html</u>.

If you do not have access to the Internet and/or have questions about the Leaking UST Program requirements, please contact the Leaking UST Program project manager on call at 217/524-3300. Sincerely,

egon h

Gregory W. Dunn, Manager Leaking Underground Storage Tank Section Division of Remediation Management Bureau of Land

GWD: jw

c: BOL File

4302 N. Main St., Rodkford, IL 61103 (815)987-7760 595 S. State, Bgin, IL 60123 (847)608-3131 2125 S. First St., Champaign, IL 61820 (217)278-5800 2009 Mall St., Collinsville, IL 62234 (618)346-5120

9511 Harrison St., Des Plaines, IL 60016 (847)294-4000 412 SW Washington St., Suite D, Peoria, IL 61602 (309)671-3022 2309 W. Main St., Suite 116, Marion, IL 62959 (618)993-7200 100 W. Randolph, Suite 10-300, Chicago, IL 60601



Waste Management • Remediation • Drilling Services

December 21, 2017

0810305287 - Jefferson County Martin & Bayley, Inc. Incident # 20171116 Leaking UST Technical File

Illinois Environmental Protection Agency Bureau of Land - #24 Leaking UST Section P.O. Box 19276 Springfield, IL. 62794-9276

RE: LPC# 0810305287 – Jefferson County **Hucks #134** 540 Airport Road Mt. Vernon, IL **IEMA # 20171116** 

IEPA - DIVISION OF RECORDS MANAGEMENT RELEASABLE IEMA # 20171116 IEMA # 20171116 JAN 16 2018 JAN 16 2018 JAN 16 2018 JAN 16 2018 IMR Enclosed please find one original and one copy of the 20-Day Certification form for the above-

referenced site.

Should you have any questions or need additional information, please call us at 217-670-1916.

Sincerely,

Chase Environmental Group, Inc.

Matthew D. Rives, P.E. **Environmental Engineer** 





# **Illinois Environmental Protection Agency**

Bureau of Land • 1021 North Grand Avenue East • P.O. Box 19276 • Springfield • Illinois • 62794-9276

The Illinois EPA is authorized to require this information under Section 4 and Title XVI of the Environmental Protection Act (415 ILCS 5/4, 5/57 - 57.17). Failure to disclose this information may result in a civil penalty of not to exceed \$50,000.00 for the violation and an additional civil penalty of not to exceed \$10,000.00 for each day during which the violation continues (415 ILCS 5/42). Any person who knowingly makes a false, fictilious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony (415 ILCS 5/44(h) and 57.17). This form has been approved by the Forms Management Center.

## Leaking Underground Storage Tank Program 20-Day Certification

#### A. Site Identification

IEMA Incident # (6- or 8-digit):	2017-1116	IEPA LPC # (10-digit):	0810305287
Site Name: Huck's #134			
Site Address (not a P.O. Box):	540 airport Rd.		
City: Mt. Vernon	County: Jefferson	Zip Code: 6286	4

#### B. Initial Abatement

- 1. I am/we are the owner and/or operator of the underground storage tank system(s) from which a release was reported under the IEMA incident correctly identified above;
- 2. As much of the regulated substance as necessary to prevent further release into the environment has been removed;
- 3. Any aboveground releases or exposed below ground releases have been visually inspected;
- Further migration of the released substance into surrounding soils and groundwater has been prevented;
- 5. Monitoring and mitigation of any fire and safety hazards posed by vapors or free product that has migrated from the UST excavation zone and entered subsurface structures (such as sewers or basements) will continue;
- 6. Hazards posed by contaminated soils that are excavated or exposed as a result of release confirmation, site investigation, abatement, or corrective action activities have been remedied;
- 7. If the remedies included treatment or disposal of soils, the owner or operator has complied DEC 21 2017 with 35 III. Adm. Code 722, 724, 725, and 807 through 815;
- 8. Measurement for the presence of a release has been conducted where contamination was most likely to be present at the UST site. In selecting sample types, sample locations and measurement methods, the nature of the stored substance, type of backfill, depth to groundwater, and other factors as appropriate for identifying the presence and source of the release have been considered; and
- 9. An investigation to determine the possible presence of free product has been conducted, and, if applicable, free product removal is being conducted in accordance with 35 III. Adm. Code 731.164 or 734.215.

#### C. Land Trust

If the release involves one or more USTs that are the subject of a land trust, check here, proceed with completion of Section D, then complete and return the Land Trust Beneficial Interest Disclosure. If a land trust is involved, this and all documents requiring owner or operator signature must be signed by a beneficiary of the land trust with sufficient beneficial interest to meet the definition of "owner" or "operator" as defined by 35 Ill. Adm. Code 734 or 731.

If a land trust is not involved, proceed with completion of Section D below.

#### D. Signatures

All plans, budgets, and reports must be signed by the owner or operator and list the owner's or operator's full name, address, and telephone number.

Consultant

#### **UST Owner or Operator**

Name: Martin & Bayley, Inc.	Company: Chase Environmental Group, Inc.
Contact: Troy Deitz	Contact: Alan Curtiss
Address: 1311 West St.	Address: 2701 E. Ash Street, Bldg. B
City: <u>Carmi</u>	City: Springfield
State: IL	State: Illinois
Zip Code: <u>62821</u>	Zip Code: 62703
Phone: 618-382-2334	E-mail:
Signature:	Phone: <u>217-670<sub>7</sub>1916</u>
Date: 12/19/17	Signature: <u>Un MCn</u>
	Date: 12/21/17

I certify under penalty of law that all activities that are the subject of this report were conducted under my supervision or were conducted under the supervision of another Licensed Professional Engineer or Licensed Professional Geologist and reviewed by me; that this report and all attachments were prepared under my supervision; that, to the best of my knowledge and belief, the work described in this report has been completed in accordance with the Environmental Protection Act [415 ILCS 5], 35 III. Adm. Code 734, and generally accepted standards and practices of my profession; and that the information presented is accurate and complete. I am aware there are significant penalties for submitting false statements or representations to the Illinois EPA, including but not limited to fines, imprisonment, or both as provided in Sections 44 and 57.17 of the Environmental Protection Act [415 ILCS 5/44 and 57.17].

#### Licensed Professional Engineer or Geologist

Name: Matthew D. Rives		- · ·
Company: Chase Environmental Group, Inc.		_
Address: 2701 E. Ash Street, Bldg. B		_ RECEIVED
City: Springfield	State: <u>IL</u>	Zip Code: <u>62703</u>
Phone: 217-670-1916		•
III. Registration No.: 062.069142		
License Expiration Date: 11/30/2019		L.P.E. or L.P.G. Seal EPA/BOL
Signature: Mall		E 10062.069142
Date: 12/21/2017		PROFESSIONAL
20-Day Certific	cation	PROFESSIONAL ENGINEER OF VIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII

#### LUST Technical Review Notes

#### Reviewed by: Steve Putrich

LPC#0810305287 – Jefferson County Mt. Vernon/Hucks #134 540 Airport Road Incident #20171116 LUST/Technical Reports

### Date Reviewed February 22, 2018

**Documents Reviewed:** 45-Day Report / Stage 1 Site Investigation Plan and Budget Prepared by: Chase Environmental Group (2/3/18) Received: February 6, 2018

## General Site Information:

IEMA date(s): 12/5/17 UST contents and capacity: Two (2) 10,000-gallon gasolinder, DIVISION OF RECORDS MANAGEMENT RELEASABLE MANAGEMENT MAR 29 2018 REVIEWER: JMR Current land use: Commercial Reimbursement: Yes OSFM facility ID#7-021661 SWAP mapping date: 2/22/18 MTBE: Not present Env. Justice: No

#### **Project Reviewer notes:**

The quantity of the release is unknown, but the release occurred with the UST tankhold. A site assessment was completed using direct push methods. Based on field observations made during collection for the confirmation sample, an incident was reported. Field activities began on 1/151/8 to remove the USTs. Closure samples were collected from walls and floor of the excavation for BETX and MTBE. Results indicate the Tier1 residential remediation objectives (ROs) had been exceeded.

The area surrounding the site is primarily residential and commercial in nature.

The site is served by city water. It appears the subsurface groundwater quality has been impacted by the USTs releases. An in-depth groundwater investigation will be completed during site investigational activities.

The SWAP was utilized to determine the location of potable wells, community supply wells and setback zones within 200 and 2,500-foot radius of the site. No wells were located with 2,500-foot radius of et subject property.

On 1/4/18, Chase contacted the Village of Public Works. The city of Mt. Vernon is supplied from purchased water from the Rend Lake Conservancy District. The water is stored in three (3) water towers and one (1) storage tank.

The subsurface soil appears to be mostly silty loam / soft clay based upon Early Action excavation activities. Depth to saturation at the boring location compel to confirm the area was approximately seven to eight feet below ground surface.

The underground sewer line exits the north side of the building and connects to the sewer beneath Airport Road.

The weather during field activities was extremely cold and breezy with a significant snow accumulation.

The subject property is currently a convenience store. Future use of the property is expected to remain the same following removal of the UST system.

#### 1/15-16/18

Tanks #1 and #2 were uncovered to the crown. Concrete covering the tankhold was piled on site and transported for disposal.

#### 1/17-18/18

*..*<sup>1</sup>

The tanks were removed of liquids, ventilated and removed. UST product piping and ventilation lines were also removed.

#### 1/19/18

Approximately 1,950 gallons of petroleum contaminated groundwater were removed from the tankhold and disposed of.

#### 1/22-23/18

The former UST tankhold was completely backfilled.

A total of 585.42 to of contaminated materials were removed from site.

#### Project Reviewer comments:

This report was submitted in the format of the Illinois EPA's 45-Day Report form. It includes the required signatures and was certified by an Illinois registered Professional Engineer.

This report addresses all of the items, required to be submitted in the 45-Day Report. It also includes a narrative of the UST removal activities. The analytical results do not meet

Tier 1 soil ROs; therefore, site investigation will be necessary to further delineate soil contamination.

Excluding the waste characterization sample (WC-1), and backfill (BF) sample, a total of fourteen (14) soil samples were collected from the tankhold following removal of the UST system. Two (2) of these samples were collected from the pump island areas. A total of two (2) samples contained one or more BETX constituents present in concentrations above the Tier 1 soil ROs. Both samples were collected from the pump island areas. It is noted that MTBE was not present above Tier 1 soil ROs.

Based on the final dimensions of the excavation cavity, it appears that an appropriate number of grab samples were collected from the excavation. The samples were analyzed for the correct indicator contaminants for a release of gasoline which are BETX and MTBE.

The consultant observed the presence of groundwater in the tankhold so they plan to do a groundwater investigation during Stage 1 site investigation activities. This water was removed but there is no indication as to whether any recharge was observed after the water was pumped out.

#### Recommendations/Plan:

This report will be approved. The approval letter will include language approving the Stage 1 Site Investigation Plan and budget.

Response due: 6/6/18 Electronic Filing: Received, Clerk's Office 2/25/2021 ILLINOIS ENVIRONMENTAL PROTECTION AGENCY



 1021 NORTH GRAND AVENUE EAST, P.O. BOX 19276, SPRINGFIELD, ILLINOIS 62794-9276 • (217) 782-3397

 BRUCE RAUNER, GOVERNOR

 ALEC MESSINA, DIRECTOR

217/524-3300

**CERTIFIED MAIL** 

7015 0640 0004 7916 1106

MAR 01 2018

Martin & Bayley, Inc. Attn: Troy Deitz 1311 West Main Street Carmi, IL 62821

Re: LPC #0810305287 -- Jefferson County Mt. Vernon/Hucks #134 540 Airport Road Leaking UST Incident No. 20171116 Leaking UST Technical File EPA - DAVISION OF RECURDS MANAGEMENT RELEASABLE

APR 0 5 2018

**REVIEWER JRM** 

Dear Mr. Deitz:

The Illinois Environmental Protection Agency (Illinois EPA) has reviewed the 45-Day Report (report), which included a Stage 1 Site Investigation Plan and Budget certification, for the abovereferenced incident. The report, dated February 3, 2018, was received by the Illinois EPA on February 6, 2018. Citations in this letter are from the Environmental Protection Act (415 ILCS 5) (Act) and Title 35 of the Illinois Administrative Code (35 Ill. Adm. Code).

The report is approved pursuant to 35 Ill. Adm. Code 734.505(b) and 734.510(a). Therefore, the 45-day reporting requirements of Section 57.6 of the Act and 35 Ill. Adm. Code 734.210(d) have been satisfied.

Pursuant to your certification, the Stage 1 Site Investigation Plan is approved and must be conducted in accordance with 35 Ill. Adm. Code 734.315. The budget, if applicable, is approved, and costs must not exceed the amounts set forth in 35 Ill. Adm. Code 734.Subpart H, Appendix D, and Appendix E. Please be advised that, if you do not meet the eligibility requirements as determined by the Office of the State Fire Marshal, you may not be entitled to payment from the Underground Storage Tank Fund for costs incurred. You must proceed with the Stage 1 site investigation in accordance with 35 Ill. Adm. Code 734.315.

Further, pursuant to 35 Ill. Adm. Code 734.145, it is required that the Illinois EPA be notified of field activities prior to the date the field activities take place. This notice must include a description of the field activities to be conducted; the name of the person conducting the activities; and the date, time, and place the activities will be conducted and shall be made to <u>EPA.FieldNotifications@illinois.gov</u>. This notification of field activities must be provided at least two weeks prior to the scheduled field activities. Besides providing at least two weeks' notice to Leaking UST Section staff in Springfield, notification must be provided to Rob Mileur either by telephone at (618) 993-7223 or by email at Robert.Mileur@illinois.gov. Page 2

The Illinois EPA requires that the owner or operator submit a Site Investigation Plan and Budget for the subsequent stage or a Site Investigation Completion Report within 90 days of the date of this letter pursuant to Sections 57.7(a) and 57.12(c) and (d) of the Act and 35 Ill. Adm. Code 734.305. Please note that the Illinois EPA does not require the submission of a budget if the owner or operator does not intend to seek payment from the Underground Storage Tank Fund.

This action does not constitute any decision or determination regarding the timeliness of the submittal of the report. This decision does not waive or otherwise preclude any enforcement action the Illinois EPA may initiate in response to any apparent violation of timely submittal requirements.

If you have any questions or need further assistance, please contact Steve Putrich at 217-524-4827.

Sincerely,

Michael T. Lowder Unit Manager Leaking Underground Storage Tank Section Division of Remediation Management Bureau of Land

MTL:STP:jab\

c: Chase Environmental Group, Inc. (electronic copy) BOL File ELENNIS EINTROGIMENTAL'PROTECTION AGENCY



1021 NORTH GRAND AVENUE EAST, P.O. BOX 19276, SPRINGFIELD, ILLINOIS 62794-9276 • (217) 782-3397 BRUCE RAUNER, GOVERNOR ALEC MESSINA, DIRECTOR

217/524-3300

**CERTIFIED MAIL** 

7015 0640 0004 7916 1106

MAR 01 2018

Martin & Bayley, Inc. Attn: Troy Deitz 1311 West Main Street Carmi, IL 62821

Re: LPC #0810305287 -- Jefferson County Mt. Vernon/Hucks #134 540 Airport Road Leaking UST Incident No. 20171116 Leaking UST Technical File IEPA-DIVISION OF RECORDS MANAGEMENT

APR 2 3 2318

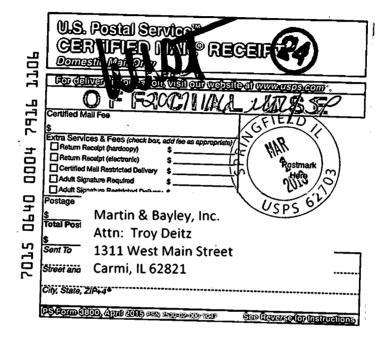
REVIEWER: EMI

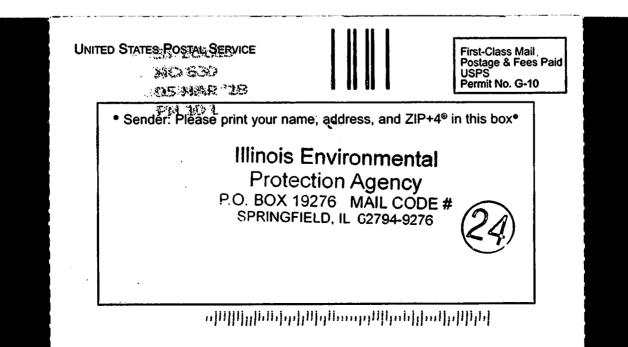
Dear Mr. Deitz:

The Illinois Environmental Protection Agency (Illinois EPA) has reviewed the 45-Day Report (report), which included a Stage 1 Site Investigation Plan and Budget certification, for the abovereferenced incident. The report, dated February 3, 2018, was received by the Illinois EPA on February 6, 2018. Citations in this letter are from the Environmental Protection Act (415 ILCS 5) (Act) and Title 35 of the Illinois Administrative Code (35 Ill. Adm. Code).

The report is approved pursuant to 35 Ill. Adm. Code 734.505(b) and 734.510(a). Therefore, the 45-day reporting requirements of Section 57.6 of the Act and 35 Ill. Adm. Code 734.210(d) have

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and coniso complete item 4 in Restricted Doliver, is desired.</li> <li>Print you name and corres on the reverse so that w cannot rin h, cord to you.</li> <li>Attach this card to me took k it the mailpièce, or on the fruit if once permits.</li> </ul>	A. Signature X Guilling Agent B. Received by (Printed Name) SCION WILS C. Date of Delivery SCION WILS C. Date of Delivery
1. Article Address of to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below: No
Martin & Bayley, Inc.	20171116 UNJSP
Attn: Troy Deitz 1311 West Main Street Carmi, IL 62821	3. Certified Mail <sup>®</sup> ☐ Priority Mail Express <sup>™</sup> Certified Mail <sup>®</sup> ☐ Priority Mail Express <sup>™</sup> Chegistered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7015 06	40 0004 7916 11 0 CAR. 00
PS Form 3811, July 2013 Domestic Ret	urn Receipt







Office of the Illinois State Fire Marshal

3/5/2018

Martin & Bayley, Inc 928 County Road 1350 N. Carmi, IL 62821

In Re: Facility No. 7021661 IEMA Incident No. 2017111 Huck's #134 540 Airport Road Mount Vernon, Jefferson, IL 62864

Per Brian Bauer, 201711/6 is the correct Incident # mc

Dear Applicant:

The Reimbursement Eligibility and Deductible Application received on March 02, 2018 for the above referenced occurrence has been reviewed. The following determinations have been made based upon this review.

It has been determined that you are eligible to seek payment of costs in excess of \$5,000. The costs must be in response to the occurrence referenced above and associated with the following tanks:

**Eligible Tanks** 

Tank 1 10,000 gallon Gasoline Tank 2 10,000 gallon Gasoline

You must contact the Illinois Environmental Protection Agency to receive a packet of Agency billing forms for submitting your request for payment.

An owner or operator is eligible to access the Underground Storage Tank Fund if the eligibility requirements are satisfied:

- Neither the owner nor the operator is the United States Government, 1.
- 2. The tank does not contain fuel which is exempt from the Motor Fuel Tax Law,
- The costs were incurred as a result of a confirmed release of any of the following substances: 3.

"Fuel", as defined in Section 1.19 of the Motor Fuel Tax Law

Aviation fuel

Heating oil

Kerosene

Used oil, which has been refined from crude oil used in a motor vehicle, as defined in Section 1.3 of the Motor Fuel Tax Law.

- The owner or operator registered the tank and paid all fees in accordance with the statutory 4. and regulatory requirements of the Gasoline Storage Act.
- The owner or operator notified the Illinois Emergency Management Agency of a confirmed release, 5. the costs were incurred after the notification and the costs were a result of a release of a substance listed in this Section. Costs of corrective action or indemnification incurred before providing that notification shall not be eligible for payment.
- The costs have not already been paid to the owner or operator under a private insurance policy, 6. other written agreement, or court order.
- 7. The costs were associated with "corrective action".

This constitutes the final decision as it relates to your eligibility and the set deductible. We reserve the right to change the deductible determination should additional information that would change the determination become available. An underground storage tank owner or operator may appeal the decision to the Illinois Pollution Control Board (Board), pursuant to Section 57.9 (c) (2). An owner or operator who seeks to appeal the decision shall file a petition for a hearing before the Board within 35 days of the date of issuance of the final decision, (35 Illinois Administrative Code 105.504(b)).

For information regarding the filing of an appeal, please contact:

Clerk Illinois Pollution Control Board State of Illinois Center 100 West Randolph, Suite 11-500 Chicago, Illinois 60601 (312) 814-3620

The following tanks are also listed for this site:

None

Your application indicates that there has not been a release from these tanks under this incident number. You may be eligible to seek payment of corrective action costs associated with these tanks if it is determined that there has been a release from one or more of these tanks. Once it is determined that there has been a release from one or more of these tanks you may submit a separate application for an eligibility determination to seek corrective action costs associated with this/these tanks.

If you have any questions, please contact our Office at (217) 785-1020.

Sincerely,

Deanne Lock Division of Petroleum and Chemical Safety

## Eligibility and Deductible Application - IEMA:20171119 - Facility #: 7021661

#### Applicant Information

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Applicant Info		Contact Info	
Applicant Name	Martin & Bayley, Inc	Contact Name	Matthew Rives
C/0		Company	Chase Environmental
Address	928 County Road 1350 N.	Phone Number	(217) 851-1404
	Carmi, IL 62821	Email	mrives@chaseenv.com
Email Address	Tdeitz@hucks.com		
	Current Property Owner Current Tank Owner		
		5	
Owner - U0009	763	Facility - 70216	61
Owner - U0009 Owner Name	<b>763</b> Martin & Bayley, Inc.	Facility - 70216	
Owner Name		Facility Name	
Owner Name	Martin & Bayley, Inc. 928 County Road 1350 N. Carmi, IL 62821	Facility Name Address	Huck's #134 540 Airport Road
Owner Name Address Contact Person	Martin & Bayley, Inc. 928 County Road 1350 N. Carmi, IL 62821	Facility Name Address	Huck's #134 540 Airport Road Mount Vernon, IL 62864 Jefferson

### Incident Information

IEMA Number: 20171119 Type of release: Underground Piping Leak, Overfill How release was discovered: Subsurface Investigation Is the UST owner/operator the US government: No Is the UST owner/operator a rail carrier: No Is the UST owner/operator located at an airport: No

#### Tanks

Associated with Release			×
1	······································	······································	

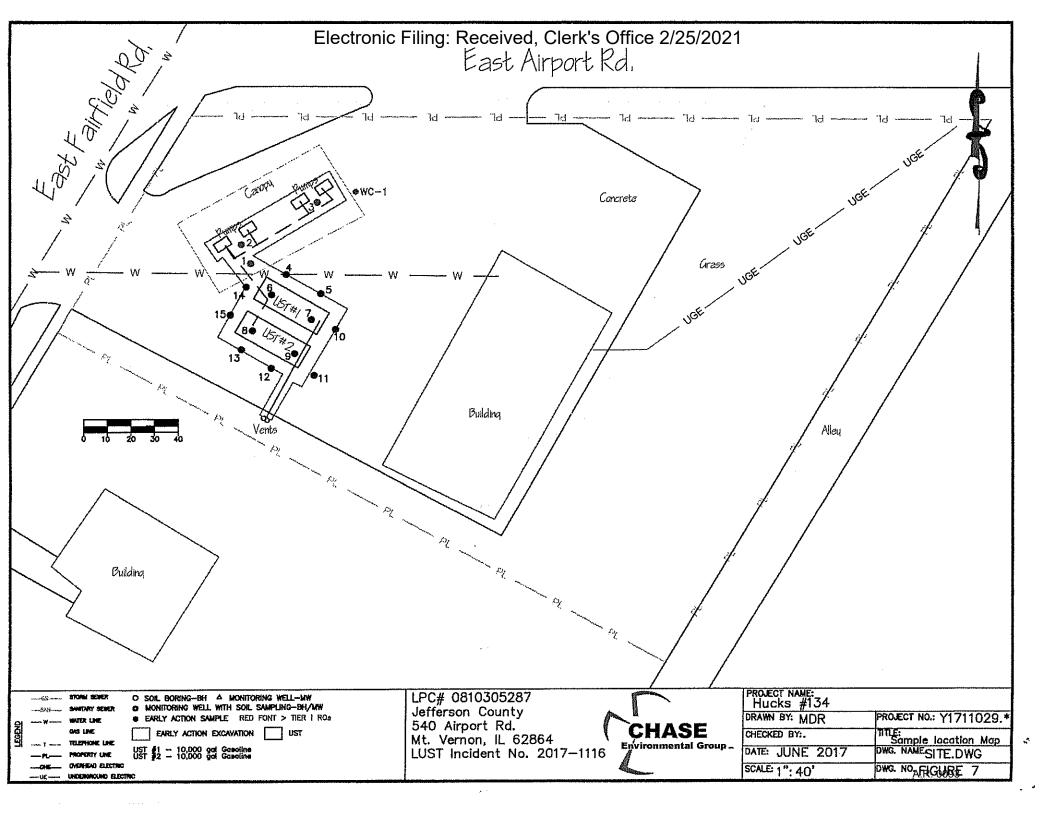
Tank No.	Current Product	Product at time of release	Sīze (gal)	Installed	First Notified	Last Used	Removed	Abandoned Date
1	Gasoline	Gasoline	10000	7/1/1978	5/5/1986		1/18/2018	
2	Gasoline	Gasoline	10000	7/1/1978	5/5/1986		1/18/2018	

#### All tanks for Huck's #134 on file

Tank No.	Current Product	Size (gal)	Installed	First Notified	Last Used	Removed	Abandoned Date
1	Gasoline	10000	7/1/1978	5/5/1986		1/18/2018	
2	Gasoline	10000	7/1/1978	5/5/1986		1/18/2018	

#### Attachments

Name	File Name(s)	Additional Information
Site Assessment Documents	Hucks 134 analytical.pdf	
IEMA Report	Hucks IEMA.pdf	
Site Plan	huck 134 site map.pdf	
Certificate of Good Standing	Huck Corp Stand.pdf	
Authorization to submit	Huck ed auth.pdf	



Huck's #134 Mount Vernon, IL 2017-1116

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Location	Depth	Date	Benzene	Ethylbenzene	Toluene	Total Xylene	МТВЕ
Tier 1 objectives			0.03	13	12	5.6	0.32
WC-1	3'	12/5/17	0.534	16.4	ND	103.0	ND
1	BF	1/17/18	18.8	46.5	174	231	ND
2	31	1/19/18	8.73	20.0	77.3	111	ND
3	3'	1/19/18	3.070	5.55	22.8	29.4	ND
4	7'	1/19/18	ND	ND	ND	ND	ND
5	7	1/19/18	ND	ND	ND	ND	ND
6	12'	1/19/18	ND	ND	ND	ND	• ND
7	12'	1/19/18	ND	ND	0.00884	0.0151	ND
8	12'	1/19/18	ND	ND	0.00645	ND	ND
9	12'	1/19/18	ND	ND	ND	ND	ND
10	7'	1/19/18	ND	ND	ND	ND	ND
11	7'	1/19/18	ND	ND	ND	ND	ND
12	7'	1/19/18	ND	ND	ND	ND	ND
13	7'	1/19/18	ND	ND	ND	ND	ND
14	7'	1/19/18	ND	ND	ND	ND	ND
15	7'	1/19/18	ND	ND	ND	ND	0.00495
· · · · · · · · · · · · · · · · · · ·							

# TABLE 1 Early Action Soil Analytical Summary results reported in mg/kg

Bold and Shaded - Exceeds Tier 1 Residential RO

(1) - Derived from 35 Ill. Adm. Code 742 Appendix A.Table A (For the Soil Component of the Groundwater Ingestion Exposure Route) (BF) Backfill



December 13, 2017

Marvin Johnson Chase Environmental Group P.O. Drawer AB Centralia, IL 62801 TEL: (618) 533-6740 FAX: (618) 533-6741



http://www.teklabinc.com/

**RE:** Hucks #134 T1711029.A

WorkOrder: 17120423

Dear Marvin Johnson:

TEKLAB, INC received 1 sample on 12/7/2017 8:32:00 AM for the analysis presented in the following report.

Samples are analyzed on an as received basis unless otherwise requested and documented. The sample results contained in this report relate only to the requested analytes of interest as directed on the chain of custody. NELAP accredited fields of testing are indicated by the letters NELAP under the Certification column. Unless otherwise documented within this report, Teklab Inc. analyzes samples utilizing the most current methods in compliance with 40CFR. All tests are performed in the Collinsville, IL laboratory unless otherwise noted in the Case Narrative.

All quality control criteria applicable to the test methods employed for this project have been satisfactorily met and are in accordance with NELAP except where noted. The following report shall not be reproduced, except in full, without the written approval of Teklab, Inc.

If you have any questions regarding these tests results, please feel free to call.

Sincerely,

Marin J. Darling I

Marvin L. Darling Project Manager (618)344-1004 ex 41 mdarling@teklabinc.com

Contraction of

Environmental Laboratory	Report Contents	http://www.teklabinc.com/			
Client: Chase Environmental Group		Work Order: 17120423			
Client Project: Hucks #134 T1711029.A		Report Date: 13-Dec-17			
This reporting package includes the following:		n an that an			
Cover Letter	1				
Report Contents	. 2				
Definitions	3				
Case Narrative	4				
Accreditations	5				
Laboratory Result	ds 6				
Receiving Check	List 7				
Chain of Custody	Appended				



Definitions

http://www.tekiabinc.com/

Work Order: 17120423

Report Date: 13-Dec-17

Client: Chase Environmental Group

#### Client Project: Hucks #134 T1711029.A

Abbr Definition

- \* Analyles on report marked with an asterisk are not NELAP accredited
- CCV Continuing calibration verification is a check of a standard to determine the state of calibration of an instrument between recalibration,
- DF Dilution factor is the dilution performed during analysis only and does not take into account any dilutions made during sample preparation. The reported result is final and includes all dilutions factors.
- DNI Did not ignite
- DUP Laboratory duplicate is an aliquot of a sample taken from the same container under laboratory conditions for independent processing and analysis independently of the original aliquot.
- ICV Initial calibration verification is a check of a standard to determine the state of calibration of an instrument before sample analysis is initiated.
- IDPH IL Dept. of Public Health
- LCS Laboratory control sample, splked with verified known amounts of analytes, is analyzed exactly like a sample to establish intra-laboratory or analyst specific precision and bias or to assess the performance of all or a portion of the measurement system. The acceptable recovery range is in the QC Package (provided upon request).
- LCSD Laboratory control sample duplicate is a replicate laboratory control sample that is prepared and analyzed in order to determine the precision of the approved test method. The acceptable recovery range is listed in the QC Package (provided upon request).
- MBLK Method blank is a sample of a matrix similar to the batch of associated sample (when available) that is free from the analytes of interest and is processed simultaneously with and under the same conditions as samples through all steps of the analytical procedures, and in which no target analytes or interferences should present at concentrations that impact the analytical results for sample analyses.
- MDL Method detection limit means the minimum concentration of a substance that can be measured and reported with 99% confidence that the analyte concentration is greater than zero.
- MS Matrix spike is an aliquot of matrix fortified (spiked) with known quantities of specific analytes that is subjected to the entire analytical procedures in order to determine the effect of the matrix on an approved test method's recovery system. The acceptable recovery range is listed in the QC Package (provided upon request).
- MSD Matrix spike duplicate means a replicate matrix spike that is prepared and analyzed in order to determine the precision of the approved test method. The acceptable recovery range is listed in the QC Package (provided upon request).
- MW Molecular weight
- ND Not Detected at the Reporting Limit
- NELAP NELAP Accredited
  - PQL Practical quantitation limit means the lowest level that can be reliably achieved within specified limits of precision and accuracy during routine laboratory operation conditions. The acceptable recovery range is listed in the QC Package (provided upon request).
  - RL The reporting limit the lowest level that the data is displayed in the final report. The reporting limit may vary according to customer request or sample dilution. The reporting limit may not be less than the MDL.
  - RPD Relative percent difference is a calculated difference between two recoveries (ie. MS/MSD). The acceptable recovery limit is listed in the QC Package (provided upon request).
  - SPK The spike is a known mass of target analyte added to a blank sample or sub-sample; used to determine recovery deficiency or for other quality control purposes.
  - Surr Surrogates are compounds which are similar to the analytes of interest in chemical composition and behavior in the analytical process, but which are not normally found in environmental samples.
  - TIC Tentatively identified compound: Analytes tentatively identified in the sample by using a library search. Only results not in the calibration standard will be reported as tentatively identified compounds. Results for tentatively identified compounds that are not present in the calibration standard, but are assigned a specific chemical name based upon the library search, are calculated using total peak areas from reconstructed ion chromatograms and a response factor of one. The nearest Internal Standard is used for the calculation. The results of any TICs must be considered estimated, and are flagged with a "T". If the estimated result is above the calibration range it is flagged "ET"

Qualifiers

TNTC Too numerous to count ( > 200 CFU )

E - Value above quantitation range

# - Unknown hydrocarbon

- 1 Associated internal standard was outside method criteria
- ND Not Detected at the Reporting Limit
- S Spike Recovery outside recovery limits
- X Value exceeds Maximum Contaminant Level

- B Analyte detected in associated Method Blank
- H Holding times exceeded
- M Manual Integration used to determine area response
- R RPD outside accepted recovery limits
- T TIC(Tentatively identified compound)



Case Narrative

Client: Chase Environmental Group Client Project: Hucks #134 T1711029.A

Cooler Receipt Temp: 2.82 °C

http://www.teklabinc.com/

Work Order: 17120423 Report Date: 13-Dec-17

			Locations		
	Collinsville		Springfield		Kansas City
Address	5445 Horseshoe Lake Road	Address	3920 Pintail Dr	Address	8421 Nieman Road
	Collinsville, IL 62234-7425		Springfield, IL 62711-9415		Lenexa, KS 66214
Phone	(618) 344-1004	Phone	(217) 698-1004	Phone	(913) 541-1998
Fax	(618) 344-1005	Fax	(217) 698-1005	Fax	(913) 541-1998
Email	jhriley@teklabinc.com	Email	KKlostermann@teklabinc.com	Email	jhriley@teklabinc.com
	Collinsville Air	<u> </u>	Chicago		
Address	5445 Horseshoe Lake Road	Address	1319 Butterfield Rd.		
	Collinsville, IL 62234-7425		Downers Grove, IL 60515		
Phone	(618) 344-1004	Phone	(630) 324-6855		
Fax	(618) 344-1005	Fax			
Email	EHurley@teklabinc.com	Email	arenner@teklabinc.com		



Accreditations

http://www.teklabinc.com/

Client: Chase Environmental Group

Client Project: Hucks #134 T1711029.A

Work Order: 17120423 Report Date: 13-Dec-17

State	Dept	Cert #	NELAP	Exp Date	Lab
Illinois	IEPA	100226	NELAP	1/31/2018	Collinsville
Kansas	KDHB	E-10374	NELAP	4/30/2018	Collinsville
Louisiana	LDEQ	166493	NELAP	6/30/2018	Collinsville
Louisiana	LDEQ	166578	NELAP	6/30/2018	Collinsville
Texas	TCEQ	T104704515-12-1	NELAP	7/31/2018	Collinsville
Arkansas	ADEQ	88-0966		3/14/2018	Collinsville
Illinois	IDPH	17584		5/31/2019	Collinsville
Indiana	ISDH	C-IL-06		1/31/2018	Collinsville
Kentucky	KDEP	98006		12/31/2017	Collinsville
Kentucky	UST	0073		1/31/2018	Collinsville
Louisiana	LDPH	LA170027		12/31/2017	Collinsville
Missouri	MDNR	930		1/31/2018	Collinsville
Missouri	MDNR	00930		5/31/2017	Collinsville
Oklahoma	ODEQ	9978		8/31/2018	Collinsville
Tennessee	TDEC	. 04905		1/31/2018	Collinsville



# Laboratory Results

Environmental Lab	aratory					http://www.tekla	binc.com/							
Client: Chase Enviror	nmental Group				W	ork Order: 171204	423							
Client Project: Hucks #1347	F1711029.A				R	eport Date: 13-Dec	-17							
Lab ID: 17120423-00			Client San	iple ID: WC		•								
Matrix: SOLID			Collection Date: 12/05/2017 10:00											
Analyses	Certification	RL Qual	l Result	Units	DF	Date Analyzed	Batch							
ASTM D92 Ignitability, Open Cup	*	60	>200	۴F	1	12/07/2017 12:20	R240946							
EPA SW846 3550C, 5035A, A	STM D2974													
Percent Moisture	*	0.1	17.0	%	1	12/11/2017 16:44	R241100							
SW-846 9045C		· · ·	•											
pH (1:1)	NELAP	1.00	6.49		1	12/07/2017 16:39	R240973							
SW-846 9095					• • • • • • • • • • • • • • • • • • • •		۱							
Paint Filter	NELAP	0	Pass	Pass/Fail	1	12/07/2017 12:00	R240977							
SW-846 1311, 3010A, 6010B,	METALS IN TOLP I	EXTRACT BY ICP	•	•										
Lead	NELAP	0.0075	< 0.0075	mg/L	1	12/11/2017 20:59	137036							
SW-846 5035, 8260B, VOLAT	LE ORGANIC COM	POUNDS BY GC/M	S		• • •	• • •								
Benzene	NELAP	100	534	µg/Kg-dry	50	12/11/2017 16:58	137099							
Ethylbenzene	NELAP	501	16400	µg/Kg-dry	50	12/11/2017 16:58	137099							
Methyl tert-butyl ether	NELAP	201	ND	µg/Kg-dry	50	12/11/2017 16:58	137099							
Toluene	NELAP	501	ND	µg/Kg-dry	50	12/11/2017 16:58	137099							
Xylenes, Total	NELAP	1290	103000	µg/Kg-dry	125	12/12/2017 16:41	137145							
Surr: 1,2-Dichloroethane-d4	ŧ	72.2-131	101.7	%REC	50	12/11/2017 16:58	137099							
Surr: 4-Bromofluorobenzene	*	82.1-116	105.8	%REC	50	<b>12/11/2017</b> 16:58	137099							
Surr: Dibromofluoromethane	÷	77.7-120	100.5	%REC	50	12/11/2017 16:58	137099							
Surr: Toluene-d8	*	86-116	102.5	%REC	50	12/11/2017 16:58	137099							
Elevated reporting limit due to high	levels of larget and/or	non-target analytes.												

Receiver States Inc. Rec	ceiving Cho	eck List	httr	.//www.teklabinc.com/
Client: Chase Environmental Group			Work	Order: 17120423
Client Project: Hucks #134 T1711029.A			Repor	t Date: 13-Dec-17
Carrier: Kelly Tensmeyer	R	eceived By: AM		
On: 07-Dec-17 Amber M. Dilallo	<i>.</i>	Reviewed by: On: 7-Dec-17	Elizabeth A. Hurley	rlig
Pages to follow: Chain of custody 1 Shipping container/cooler in good condition? Type of thermal preservation? Chain of custody present? Chain of custody signed when relinquished and received? Chain of custody agrees with sample labels? Samples in proper container/bottle?	Extra pages inclu Yes None Yes Yes Yes Yes Yes Yes	No     ce 12  No     No     No	Not Present Blue Ice	Temp °C 2.82 Dry Ice
Sample containers intact? Sufficient sample volume for indicated test? All samples received within holding time? Reported field parameters measured: Container/Temp Blank temperature in compliance? When thermal preservation is required, samples are compliant	Yes ⊻ Yes ⊻ Yes ⊻ Field □ Yes ⊻ t with a temperat	No    No    Lab    No    No	NA 🗹	
0.1°C - 6.0°C, or when samples are received on ice the same Water at least one vial per sample has zero headspace?			No VOA vials 🔽	<u>.</u>
Water - TOX containers have zero headspace?	Yes 🗌	No 🗌	No TOX containers 🗹	
Water - pH acceptable upon receipt?	Yes 🗖	No 🗌	NA 🗹	•
NPDES/CWA TCN Interferences checked/treated in the field?	Yes 📙	No 🗌	NA 🗹	
Any No responses n	nust be detailed i	below or on the	• COC.	

Electronic Filing: Received, Clerk's Office 2/25/2021 CHAIN OF CUSTODY pg. 1\_ of 1

pg. 1 of 1 Work Order # 17121423

TEKLAB, INC. 5445 Horseshoe Lake Road ~ Collinsville, IL 62234 ~ Phone: (618) 344-1004 ~ Fax: (618) 344-1005

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Address: PO Box AB	• • •						_	- 24					lLab		ΞF					3.USI					
City / State / Zip: Centralia, IL 628	301 :			•				20.00	Lab		9 W I											<u>L. 1</u>			
Contact: Marvin Johnson		one: 618	-533	3-67	40	····	-	000000																	
E-Mail: mjohnson@chaseenv.c		040		3-67				00000	Con	nme	ants.								<u></u>						
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<ul> <li>Are these samples known to be involved in I</li> <li>Are these samples known to be hazardous?</li> </ul>	tigation? If	yes, a surcha	irge w	vill ap	ply. 🗆	l Yeş	X	No	soil	ob	ject	ive	5						~~~		15-1 A	1.1.5	SIUG	nyan	
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limits in comment section. XYes INO Project Name / Number	· · ·	Sample Co						8	1			<u>.</u>													
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PDC Laboratories, Inc.

Monday, February 5, 2018

Matt Rives Chase Environmental 2701 E Ash Springfield, IL 62704

TEL: (217) 670-1916 FAX: (217) 670-1682

RE: Hucks #134

## PDC WO: 18A0448

PDC Laboratories, Inc. received 15 sample(s) on 1/24/2018 for the analyses presented in the following report.

All applicable quality control procedures met method specific acceptance criteria unless otherwise noted.

This report shall not be reproduced, except in full, without the prior written consent of PDC Laboratories, Inc.

If you have any questions, please feel free to contact me at (217) 753-1148.

Respectfully submitted,

Kristen A. Potter Project Manager

**Certifications:** 

NELAP/NELAC - IL #100323

1210 Capital Airport Drive 9114 Virginia Road Suite #112 Springfield, IL 62707 Lake in the Hills, IL 60156 1.217.753.1148 1.847.651.2604

\*

1.217.753.1152 Fax 1.847.458.0538 Fax

## PDC Laboratories, Inc.

Date: 2/5/2018

			LAB	ORAT	ORY REST	JLTS	· · · · · · · · · · · · · · · · · · ·			
Client:	Chase Environm	nental								
Project:	Hucks #134						Lab Order: 18	3A0448		
Client Sample ID:	1						Lab ID: 12	8A0448-01		
Collection Date:	1/17/18 15:00				•		Matrix: Se	olid		
Analyses		Result	Limit	Qual	Units	DF	Dato Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS									
*Benzene		18.8	3.00		mg/Kg dry	500	1/29/18 10:27	1/30/18 2:42	SW8260B R2	JKK
*Ethylbenzene		46.5	3.00		mg/Kg dry	500	1/29/18 10:27	1/30/18 2:42	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.150		mg/Kg dry	25	1/26/18 8:00	1/26/18 23:02	SW8260B R2	JKK
*Toluene		174	30.0		mg/Kg dry	5000	1/31/18 8:00	1/31/18 11:10	SW8260B R2	JKK
*Xylenes (total)		231	8.99		mg/Kg dry	500	1/29/18 10:27	1/30/18 2:42	SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		83,4	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	2						Lab ID: 18	3A0448-02	<u></u>	
Collection Date:	1/19/18 10:00						Matrix: So	olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS									
*Benzene	•	8.73	0.667		mg/Kg dry	100	1/26/18 8:00	1/26/18 23:31	SW8260B R2	JKK
*Ethylbenzene		20.0	0,667		mg/Kg dry	100	1/26/18 8:00	1/26/18 23:31	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.167		mg/Kg dry	25	1/25/18 10:00	1/25/18 14:15	SW8260B R2	JKK
*Toluenc		77.3	3.34		mg/Kg dry	500	1/29/18 10:27	1/29/18 12:34	SW8260B R2	JKK
*Xylenes (total)		111	10.0		mg/Kg dry	500	1/29/18 10:27	1/29/18 12:34	SW8260B R2	JKK
Conventional Chemistry	Parameters				ж.					
Percent Solids		75.0	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	3						Lab ID: 18	3A0448-03		
Collection Date:	1/19/18 10:30						Matrix: Sc	olid		
Analyses		Result	Linit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	ands by GC-MS									
*Benzene		3.07	0,158		mg/Kg dry	25	1/25/18 10:00	1/25/18 14:43	SW8260B R2	JKK
*Ethylbenzene		5.55	0,158		mg/Kg dry	25	1/25/18 10:00	1/25/18 14:43	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.158		mg/Kg dry	25	1/25/18 10:00	1/25/18 14:43	SW8260B R2	1KK
*Toluenc		22.8	0.633		mg/Kg dry	100	1/26/18 8:00	1/26/18 23:59	SW8260B R2	JKK.
*Xylencs (total)		29.4	1.90		mg/Kg dry	100	1/26/18 8:00	1/26/18 23:59	SW8260B R2	JKK.
Conventional Chemistry	Parameters									
Percent Solids		79.0	0,100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS

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PDC Laboratories, Inc.

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Date: 2/5/2018

			LAB	ORAT	ORY RESU	LTS				
Client: Project:	Chase Environ Hucks #134	mental					Lab Order:	18A0448		
Client Sample ID:	4							18A0448-04		
Collection Date:	1/19/18 13:45						Matrix:			
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS								······	
*Benzene		Ŭ	0.00495		mg/Kg dry	1	1/25/18 10:00	0 1/25/18 16:36	SW8260B R2	JKK
*Ethylbenzene		U	0.00495		mg/Kg dry	1	1/25/18 10:00	0 1/25/18 16:36	SW8260B R2	JKK
*Methyl tert-butyl ether		ប	0.00495		mg/Kg dry	1	1/25/18 10:00	0 1/25/18 16:36	SW8260B R2	JKK
*Toluene		U	0,00495		mg/Kg dry	1	1/25/18 10:00		SW8260B R2	JKK
*Xylenes (total)		U	0.0148		mg/Kg dry	1	1/25/18 10:00		SW8260B R2	JKK
Conventional Chemistry	Parameters									
Percent Solids		78.6	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample 1D:	5						Lab ID:	18A0448-05		
Collection Date:	1/19/18 14:00						Matrix:			
Analyses		Result	Limit	Quai	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	inds by GC-MS									
*Benzene	-	υ	0.00512		mg/Kg dry	1	1/25/18 10:00	1/25/18 17:04	SW8260B R2	JKK
*Ethylbenzene		υ	0.00512		mg/Kg dry	1	1/25/18 10:00		SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00512		mg/Kg dry	1	1/25/18 10:00	) 1/25/18 17:04	SW8260B R2	JKK
*Toluene		ប	0.00512	-	mg/Kg dry	1	1/25/18 10:00	) 1/25/18 17:04	SW8260B R2	JKK
*Xylenes (total)		U	0.0154		mg/Kg dry	1	1/25/18 10:00	) 1/25/18 17:04	SW8260B R2	JKK
Conventional Chemistry	Parameters						c		r X	
Percent Solids		79,4	0,100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	б		<u> </u>				Lab D:	18A0448-06		·····
Collection Date:	1/19/18 14:10						Matrix:			
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compou	nds by GC-MS									
*Benzene		U	0.0112		mg/Kg dry	1	1/26/18 8:00	1/27/18 0:27	SW8260B R2	JKK
*Ethylbenzene		U	0,0112		mg/Kg dry	1	1/26/18 8:00		SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.0112		mg/Kg dry	1	1/26/18 8:00		SW8260B R2	JKK
*Toluene		U	0.0112		mg/Kg dry	1	1/26/18 8:00		SW8260B R2	JKK
*Xylenes (total)		U	0.0337		mg/Kg dry	1	1/26/18 8:00		SW8260B R2	JKK
Conventional Chemistry	Parameters									
Southerstrought Chromitan 2										

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PDC Laboratories, Inc. Date: 2/5/2018 LABORATORY RESULTS . Client: Chase Environmental Project: Hucks #134 Lab Order: 18A0448 7 Client Sample ID: Lab ID: 18A0448-07 Collection Date: 1/19/18 14:20 Matrix: Solid Result Qual Units DF Analyses Limit **Date Prepared** Date Analyzed Method Analyst Volatile Organic Compounds by GC-MS \*Benzene U 0.00431 mg/Kg dry 1 1/25/18 10:00 1/25/18 18:00 SW8260B R2 JKK \*Ethylbenzene U 0.00431 mg/Kg dry 1/25/18 10:00 1 1/25/18 18:00 SW8260B R2 JKK \*Methyl tert-butyl ether U 0.00431 mg/Kg dry 1 1/25/18 10:00 1/25/18 18:00 SW8260B R2 JKK \*Toluene 0.00884 0.00431 mg/Kg dry 1/25/18 10:00 1 1/25/18 18:00 SW8260B R2 JKK \*Xylenes (total) 0.0151 0.0129 mg/Kg dry 1/25/18 10:00 1 1/25/18 18:00 SW8260B R2 JKK **Conventional Chemistry Parameters** Percent Solids 84.0 0.100 1 % 1/26/18 9:55 1/29/18 8:46 ASTM D2974 DMS Client Sample ID: 8 Lab ID: 18A0448-08 **Collection Date:** Matrix: Solid 1/19/18 14:30 Result Limit Qual Units DF **Date Prepared** Analyses Date Analyzed Method Analyst Volatile Organic Compounds by GC-MS \*Benzene U 0.00482 mg/Kg dry 1 1/25/18 10:00 1/25/18 18:29 SW8260B R2 JKK \*Ethylbenzene U 0.00482 mg/Kg dry 1 1/25/18 10:00 1/25/18 18:29 SW8260B R2 ЈКК \*Methyl tert-butyl ether U 0.00482 1/25/18 10:00 mg/Kg dry 1 1/25/18 18:29 SW8260B R2 JKK \*Toluene 0.00645 0.00482 mg/Kg dry 1 1/25/18 10:00 1/25/18 18:29 SW8260B R2 JKK \*Xylenes (total) U 0.0145 1/25/18 10:00 1/25/18 18:29 mg/Kg dry 1 SW8260B R2 JKK **Conventional Chemistry Parameters** Percent Solids 79.9 0.100 % 1 1/26/18 9:55 1/29/18 8:46 ASTM D2974 DMS 9 Client Sample ID: Lab ID: 18A0448-09 **Collection Date:** 1/19/18 14:40 Matrix: Solid Analyses Result Limit Qual Units DF **Date Prepared** Date Analyzed Method Analyst Volatile Organic Compounds by GC-MS 1/25/18 10:00 \*Benzene U 0.00442 mg/Kg dry 1 1/25/18 18:57 SW8260B R2 JKK \*Ethylbenzene U 0.00442 mg/Kg dry 1 1/25/18 10:00 1/25/18 18:57 SW8260B R2 JKK \*Methyl tert-butyl ether U 0.00442 mg/Kg dry 1 1/25/18 10:00 1/25/18 18:57 SW8260B R2 JKK U \*Toluene 0.00442 mg/Kg dry 1 1/25/18 10:00 1/25/18 18:57 SW8260B R2 JKK \*Xylenes (total) U 0.0133 1/25/18 10:00 mg/Kg dry 1 1/25/18 18:57 SW8260B R2 JKK **Conventional Chemistry Parameters** Percent Solids 82.2 0.100 % 1 1/26/18 9:55 1/29/18 8:46 ASTM D2974 DMS

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PDC Laboratories, Inc.

Date: 2/5/2018

			LAB	ORAT	ORY RESU	ILTS				· · · · · · · · · · · · · · · · · · ·
Client:	Chase Environm	nental								
Project:	Hucks #134						Lab Order: 1	8A0448		
Client Sample ID:	10						Lab ID: 1	8A0448-10		
Collection Date:	1/19/18 14:50						Matrix: S			
Analyses		Result	Linit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	_Analyst
Volatile Organic Compou	inds by GC-MS									
*Benzene		U	0.00453		mg/Kg dry	1	1/25/18 10:00	I/25/18 19:26	SW8260B R2	JKK
*Ethylbenzene		U	0.00453		mg/Kg dry	ľ	1/25/18 10:00	1/25/18 19:26	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00453		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:26	SW8260B R2	JKK
*Toluene		U	0.00453		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:26	SW8260B R2	ЈКК
*Xylenes (total)		U	0.0136		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:26	SW8260B R2	лкк
Conventional Chemistry 1	Parameters						,			
Percent Solids		81.9	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	11				•		Lab ID: 1	840449 11		
Collection Date:	1/19/18 15:00							olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Ånalyst
Volatile Organic Compou	nds by GC-MS									
*Benzene	•	U	0.00531		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	жк
*Ethylbenzene		ប	0.00531		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00531		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
*Toluene		U	0.00531		mg/Kg đry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
*Xylenes (total)		U	0.0159		mg/Kg dry	1	1/25/18 10:00	1/25/18 19:54	SW8260B R2	JKK
Conventional Chemistry I	arameters						,		C.	
Percent Solids		82.9	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	12						Lab ID: 18	3A0448-12		
Collection Date:	1/19/18 15:10							olid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
olatile Organic Compour	ads by GC-MS									
*Benzene		U	0.00525		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	JKK
*Ethylbenzene		ប	0.00525		mg/Kg dry	I	1/25/18 10:00	1/25/18 20;22	SW8260B R2	JKK
*Methyl tert-butyl ether		U	0.00525		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	JKK
*Toluene		U	0.00525		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	JKK
*Xylenes (total)		Ŭ	0.0157		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:22	SW8260B R2	JKK
Conventional Chemistry P	arameters									
Percent Solids		79.7	0,100		%	1.	1/26/18 9:55	1/29/18 8:46	<b>ASTM D2974</b>	DMS

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## PDC Laboratories, Inc.

Date: 2/5/2018

· · · · · · · · · · · · · · · · · · ·		·	LAB	ORAT	ORY RESU	LTS				
Client:	Chase Environm	nental								
Project:	Hucks #134						Lab Order:	18A0448		
Client Sample ID:	13						Lab ID;	18A0448-13		
Collection Date:	1/19/18 15:20						Matrix:	Solid		
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS									
*Benzene		ប	0.00522		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	ЈКК
*Ethylbenzene		U	0.00522		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	JKK
*Methyl tert-butyl ether		ប	0.00522		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	JKK
*Toluene		U	0.00522		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	JKK
*Xylenes (total)		υ	0.0156		mg/Kg dry	1	1/25/18 10:00	1/25/18 20:51	SW8260B R2	JKK
Conventional Chemistry	Parameters		·							
Percent Solids		78.4	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	14	<u> </u>					Lab M:	18A0448-14		- =
Collection Date:	1/19/18 15:30						Matrix:			
Analyses		Result	Limit	Qual	Units	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	unds by GC-MS									
*Benzene	•	U	0.00594		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	SW8260B R2	<b>ЈКК</b>
*Ethylbenzene		ប	0.00594		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	SW8260B R2	ЛКК
*Methyl tert-butyl ether		ប	0.00594		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	SW8260B R2	JKK
*Toluene		U	0.00594		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	SW8260B R2	JKK
*Xylenes (total)		U	0,0178		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:19	5W8260B R2	JKK
Conventional Chemistry	Parameters				× *			•		
Percent Solids		74.3	0.100		%	1	1/26/18 9:55	1/29/18 8:46	ASTM D2974	DMS
Client Sample ID:	15						Lab ID: 1	L8A0448-15		
Collection Date:	1/19/18 15:40						Matrix: 8			
Analyses		Result	Limit	Qual	Vaits	DF	Date Prepared	Date Analyzed	Method	Analyst
Volatile Organic Compo	inds by GC-MS									
*Benzene		υ	0.00481		mg/Kg dry	1	1/25/18 10:00		SW8260B R2	JKK
*Ethylbenzene		U	0.00481		mg/Kg dry	1	1/25/18 10:00		SW8260B R2	JKK
*Methyl tert-butyl ether		0.00495	0.00481		mg/Kg dry	I	1/25/18 10:00		SW8260B R2	JKK
*Toluene		υ	0.00481		mg/Kg dry	1	1/25/18 10:00		SW8260B R2	JKK
*Xylenes (total)		U	0.0144		mg/Kg dry	1	1/25/18 10:00	1/25/18 21:47	SW8260B R2	ТКК
Conventional Chemistry	Parameters									
Percent Solids		78.3	0.100		%	I	1/26/18 9:55	1/29/18 8:46	ASTM D2974	

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S	Spike recovery outside acceptance limits.								
R.	RPD outside acceptance limits,								
*	NELAC certified compound.								
ប	Analyte not detected (i.e. less than RL or MDL)	•							
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Illinois Environmental Protection Agency

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The Agency is authorized to require this information under Section 4 and Title XVI of the Environmental Protection Act (415 ILCS 5/4, 5/57 – 57,17). Failure to disclose this information may result in a civil penalty of not to exceed \$50,000.00 for the violation and an additional civil penalty of not to exceed \$10,000.00 for each day during which the violation continues (415 ILCS 5/42). Any person who knowingly makes a false material statement or representation, orally or in writing, in any label, manifest, record, report, permit, or license, or other document filed, maintained or used for the purpose of compliance with Title XVI commits a Class 4 felony. Any second or subsequent offense after conviction hereunder is a Class 3 felony (415 ILCS 5/44 and 57.17). This form has been approved by the Forms Management Center.

## Leaking Underground Storage, Tank Program Laboratory Certification for Chemical Analysis

## A. Site Identification

IEMA Incident # (6- or 8-digit): 2617 - 1116	IEPA LPC# (10-digit): 0810305787
Site Name: Huck's #134	
Site Address (Not a P.O. Box): 540 Air Port KD.	
city: M. Vernon County: Jefferson	ZIP Code: 62864
Leaking UST Technical File	

## **B. Sample Collector**

I certify that:

- 1. Appropriate sampling equipment/methods were utilized to obtain representative samples.
- 2. Chain-of-custody procedures were followed in the field.
- 3. Sample integrity was maintained by proper preservation.
- 4. All samples were properly labeled.

## C. Laboratory Representative

I certify that:

- 1. Proper chain-of-custody procedures were followed as documented on the chain-of-custody forms
- 2. Sample integrity was maintained by proper preservation.
- 3. All samples were properly labeled.
- 4. Quality assurance/quality control procedures were established and carried out.
- 5. Sample holding times were not exceeded.

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- 6. SW-846 Analytical Laboratory Procedure (USEPA) methods were used for the analyses.
- 7. An accredited lab performed quantitative analysis using test methods identified in 35 IAC 186,180 (for samples collected on or after January 1, 2003).

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## **D.** Signatures

I hereby affirm that all information contained in this form is true and accurate to the best of my knowledge and belief. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Samp	le	Coll	ector

Sample Collector	Laboratory Representative
Name Matthew Rives	Name Kristen Potter
Title Engineer	Title Project Maragle
Company Chase Environmental Inc.	Company Prairie Analytical Systems, Inc. PDC. Sofid, 14
Address 2701 East Ash St. Bldg. B	Address 1210 Capital Airport Drive
City Springfield	City Springfield
State IL	State IL
Zip Code 62703	Zip Code 62702
Phone 2176701916	Phone 217-753-1148
Signature Mac	Signature this fact
Date 1/19/18	Date 2/5/18
	~~/ <i>*/*</i>

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# Electronighting Baceiyed Compare States

T Return to the main IEMA website

Hazardous Materials Incident Report	
NOTE: The following fields have been deleted or redacted from some of the reports contained in this umber killed, On Scene Contact Phone, Responsible Party Contact Person, Responsible Party Callback	database: Callback Phone, Number Injured, Phone.
Incident Number:	H-2017-1116
Incident Report Date:	12/5/2017 10:57:31 AM
Street Address of Incident Location:	540 Airport Road
Incident Location City:	Mount Vernon
Incident Location County:	Jefferson
Entered By:	Swinburne, Gayle (IEMA)
Data Input Status:	Closed
Leaking Underground Storage Tank (LUST)?:	Yes
Caller:	Matt Rieves
Caller Represents;	Chase Environmental
Hazmat Incident Type: HAZMAT:	-
Incident Location	•
Date/Time Occurred:	
Street:	540 Airport Road
City:	Mount Vernon
. State:	
County:	Jefferson
Milepost:	N/A
· Section:	N/A
Township:	N/A
Range:	N/A
Area Involved:	Fixed Facility
Latitude:	38.321828
Longutude:	-88.879835
Media or medium into which the release occurred:	Ground
Weather Information	
Temp:	36
Wind:	W @ 9 MPH
Materials Involved	
Name:	Gasoline
Τγρε:	Liquid

http://tier2.iema.state.il.us/FOIAHazmatSearch/HazmatDetails.aspx?RptNum=H-2017-1116

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CHRIS CODE:	UNK
CAS#:	UNK
UN/NA #:	UNK
Is this a 302(a) Extremely Hazardous Substance?:	No
Is this a RCRA Hazardous Waste?:	No
Is this a RCRA regulated facility?:	No
Container Type:	Under ground storage tank(s)-2
Container Size:	2 X 10,000 gallons-Gasoline
Amount Released:	UNK
Rate of Release/min:	UNK
Duration of Release:	UNK
Cause of Release:	UNK
Estimated Spill Extent:	UNK
Spill Extent Units:	
Date/Time Incident Occurred:	
Check if Unknown (Occurrence):	$\checkmark$
. Date/Time Discovered:	2017-12-05 10:00
Check if Unknown (Discovered):	
WhereTaken:	N/A
On Scene Contact:	Matt Rieves
Proper safety precautions to take as a result of the release, including evacuation:	None needed
Number of People Evacuated:	0
Assistance needed from State Agencies:	NONE
Containment/cleanup actions and plans:	Removal of LUSTs.
Responsible Party	
Name:	Martin and Bayley, Inc.
Facility Manager:	Troy Dietz
Facility Manager Phone #;	618/ 382-2334
Street:	1311 W. Main Street, P. O. Box 385
Emergency Units Contacted	
Contacted ESDA?:	
ESDA on Scene?:	
Specific ESDA Agency Contacted:	NONE
Contacted Fire Department?:	
Fire Department on Scene?: Name of Fire Department Contacted:	NONE
	NONE
Contacted Police Department?: Police Department on Scene?:	
Fonce Department on Scenes:	

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## IEMA | FOIA | Hazmat Search

# Electronic Filing: Received a Clerk's Office 2/25/2021

	5		
	s	heriff Police Department?;	
	Sheri	iff Department on Scene?:	
	Name of Sher	iff Department Contacted:	NONE
Was a	n Agency Other than ESDA, Fire Po	lice or Sheriff Contacted?:	`
	Was this	Other Agency On Scene?:	
	Name of	f Other Agency Contacted:	NONE
	Agency or Pers	sons Notified	
Аделсу	Date/Time	Name of Person	Notification Action
IEMA Region 9	2017-12-05 10:58	Emailed	Report Sent
IEPA, OSFM, IONR-NRTP	2017-12-05 10:58	Emailed	Report Sent
	Narra	*?	

http://tier2.iema.state.il.us/FOIAHazmatSearch/HazmatDetails.aspx?RptNum=H-2017-1116

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CORP/LLC - File Detail Report Electronic Filina: Received, Clerk's Office 2/25/2021

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	<b>FSSE WHITE</b>		and the second and the	
	OTTORNAL CONCERNENCE	1. 1. 1. 1. 1. 1.		
Sector Se	SECRETARY OF STATE	N	S	74
CORPORATION FILE DETAIL REPORT				-

File Number	49877137	• •			
Entity Name	MARTIN & BAYLEY, INC.				
Status	ACTIVE				
Entity Type	CORPORATION	Type of Corp	DOMESTIC BCA		
Incorporation Date (Domestic)	08/12/1971	State	, ILLINOIS		
Agent Name	KEVIN KNAPP	Agent Change Date	09/25/2006		
Agent Street Address	RR4	President Name & Address	MARK BAYLEY 1311 A WEST MAIN ST CARMI IL 62821		
Agent City	CARMI	Secretary Name & Address	KEVIN KNAPP SAME		
Agent Zip	62821	Duration Date	PERPETUAL		
Annual Report Filing Date	05/09/2017	For Year	2017		
Assumed Name	INACTIVE - RURAL ROUTE COUNTRY COOKIN', INC. INACTIVE - CIRCUS VIDEO, INC. INACTIVE - HUCK'S INC, INACTIVE - HUCK'S INC, INACTIVE - HUCK'S TRAVEL CENTER, INC. INACTIVE - HUCK'S CONVENIENCE FOOD STORE, INC, ACTIVE - HUCK'S CONVENIENCE FOOD STORE, INC, ACTIVE - HUCK'S CONVENIENCE FOOD STORE, INC, ACTIVE - HUCK'S CONVENIENCE STORES INACTIVE - HUCK'S CONVENIENCE STORES INACTIVE - HUCKS CONVENIENCE STORES INACTIVE - HUCKS INACTIVE - HUCKS				
Old Corp Name   12/26/1980 - BIG JOHN SUPER STORE'S, INC.					
Return to the Search	Screen	Select Certificate	of Good Standing for Purchase		

(One Certificate per Transaction)

OTHER SERVICES

OF

File Annual Report

Adopting Assumed Name

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Bruce Rauner, Governor

Matt Perez, State Fire Marshal



# Office of the State Fire Marshal

## AUTHORIZATION TO SUBMIT ELIGIBILITY AND DEDUCTIBLE APPLICATION

The undersigned owner or operator for the underground storage tanks for facility number 7021661 located at 540 Airport Rd. Mount Vernon, IL 62864 ("this facility") certifies that:

- (1) Chase Environmental Group, located at 2701 East Ash Springfield, IL 62703 (address of representative/consultant) is fully authorized by the undersigned to submit an Eligibility and Deductible Application to the Office of the State Fire Marshal for IEMA incident number 2017-1116; and
- (2) that the undersigned owner or operator of this facility has authority to direct remediation at this facility and has directed the above representative or consultant to take all actions necessary to perfect the Eligibility and Deductible Application for this facility, including the submittal of any necessary additional information; and
- (3) that the undersigned is a corporate officer, managing member, managing partner, individual owner, or other employee or other representative of the owner/operator with full authority to direct submittals concerning the remediation in this matter and make these representations on behalf of the owner/operator.

### SIGNED:

Under penalties for perjury as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

Owner/Operator Signature

Diecoror of Perno/eum Title (if not a sole proprietor)

12/19/17

Tdeitz@hucks.com

E-mail Address for Person Signing

1035 Stevenson Dr., Springfield, IL 62703, (217) 785-0969 JRTC, 100 W. Randolph St., Ste. 4-600, Chicago, IL 60601, (312) 814-2693 2309 W. Main St., Marion, IL 62959, (618) 993-7085 TDD: 217-785-0969 Web site: WWW,SFM.ILLINOIS.GOY



Office of the Illinois State Fire Marshal Division of Petroleum and Chemical Safety 1035 Stevenson Drive Springfield, IL 62703 2177851020 FOR OFFICE USE ONLY

Facility # 7021661 Permit # 01262-2016UPG Request Rec'd 09/30/2016 Amended Date Approval Date 10/3/2016 DS Permit Expires 4/4/2017

### Permit for UPGRADE or REPAIR of Underground Storage Tank(s) and Piping for Petroleum and Hazardous Substances.

Permission to upgrade or repair underground storage tank(s) or piping is hereby granted. Such upgrade or repair must be in complete accordance with acceptable materials as specified in the Federal Register, Part II Environmental Protection Agency, 40 CFR Parts 280 and 281, and also with all sections of 41 Illinois Administrative Code, Parts 174, 175 and 176. The contractor the permit was issued to or an employee of that contractor (this does not include a subcontractor) shall submit a required job schedule for underground piping upgrade, leak detection, spill and overfill prevention of underground storage tank(s) to the Office of the State Fire Marshal, Division of Petroleum and Chemical Safety.

(1) <u>OWNER OF TANKS</u> - Corporation, partnership, or other business entity:	(2) <u>FACILITY</u> - name and address where tanks are located:
Martin & Bayley, Inc.	Huck's #134 540 Airport Road Mount Vernon, IL 62864
Contact: Troy Dietz (618) 382-2334 Ext. 248	Contact: Sue Dennis (618) 382-2334

### (3) UPGRADE OR REPAIR OF TANKS:

- (a) Number and size of tanks being upgraded or repaired: (TK # 2) 10,000
- (b) Type of tanks:
- (c) Type of piping:
- (d) Product to be stored in each tank: (TK # 2) Gasoline
- (e) Type of leak detection being used:

Tank:

Piping:

(f) Corrosion Protection being used:

Tank:

Piping:

(g) Spill containment devices, piping, and dispenser containment devices: (TK # 2) Spill Contain Device - Pre-manufactured OPW ISC-2100DEVR spill containment manhole

(h) Overfill prevention devices:

(i) Manway accessible at grade:

- (4) The owner must notify this Office when completion of tank upgrade/repair has occurred, on the Notification for Underground Storage Tank Form and the licensed contractor must submit the required job schedule for underground piping upgrade, leak detection, spill and overfill prevention to the OSFM prior to the work being performed. Both forms can be obtained at www.sfm.illinois.gov or by calling (217)785-1020.
- (5) SPECIAL CONTINGENCIES :

### (6) PERSON, FIRM OR COMPANY PERFORMING WORK:

Hinderliter Construction & Maint., Inc. 3601 North St. Joseph Avenue Evansville, IN 47720 Contact Person: Mark Hinderliter Phone: (812) 425-4137 Contractor Registration # IL646 Exp. 4/2/2018

Sincerely, Daniel J. Starke .

Daniel Starks

cc: Storage Tank Safety Specialist Division File

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## OFFICE OF THE ILLINOIS STATE FIRE MARSHAL

### Upgrade Permit Application - 7021661 - Hinderliter Construction & Maint., Inc. - State ID: IL646

#### Permit Application Summary

**Permit Application Status: Approved** 

Received Date: 9/30/2016

Owner - U0009763	
Owner ~ 00003703	
Owner Name	Martin & Bayley, Inc.
Address	PO Box 385
	Carmi, IL 62821
Contact Person	Troy Dietz
Phone Number	(618) 382-2334
-	

Facility - 7021661 Facility Name Huck's #134 Address 540 Airport Road Mount Vernon, IL 62864 County Jefferson Contact Person Sue Dennis Phone Number (618) 382-2334

Facility Information is different

Cowner Information is different

#### Tanks on the Permit

Tank #	Capacity	Product	Tank Status
2	10,000	Gasoline	Currently in use

#### Equipment Summary

#### Tank 2

Equipment Type	Equipment
Spill Contain Device	Pre-manufactured OPW 1SC-2100DEVR spill containment manhole

#### Summary of Work

Replace spill bucket on plus tank.

### Islands/Canopy/Dispensers

Islands:	C Existing to remain C Installing new	C Reconstructing (explain below) C None
Canopy:	€ Existing to remain C Installing new	C Reconstructing (explain below) C None
Dispensers:	🕫 Existing to remain C Installing new	C Reconstructing (explain below) C None

### Islands/Canopy/Dispensers Work Explanation\_

Replace Plus tank spill bucket.

### Minimum Setbacks

Clearance distances must be given on the site plans in dimensions from the UST system to all buildings, structures and objects with a setback requirement. The minimum setback requirements for all tanks and all piping are at least:

Yes	No	
6	C	20 feet to property lines or right of way lines
C	С	20 feet to storm sewer lines, sanitary sewer lines or similar underground drainage systems
C	C	20 feet to basements or similar underground structures
G	C	300 feet to any mine shaft, air or escape shaft to a mine
e	C	85 feet to any school, institution, public assembly or theater occupancy
C	C	400 feet to any potable wells on or near the facility. If no, contact IEPA Groundwater section at (217) 78514787

### Is facility operated as a Motor Fuel Dispensing Facility?

#### C Yes C No

Facility will be operated as:

An Attended Self-Service Motor Fuel Dispensing Facility

#### Supplemental Documents Uploaded for the Application

Document Type	Document name	Last Uploaded	
There are no documents to display.			

Name of the Authorized Representative: Mark Hinderliter

Title or Position: President

 ${\ensuremath{\overline{\mathbf{V}}}}\, I$  agree to the Terms and Conditions

### Payment

### Permit Application Status: Approved

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Bill To Name	Payment Received	Applied Amount	Received	Authorization Code	Transaction ID
 Eric Hinderliter	\$200.00	(\$200.00)	.,,	01799J	1436523

### Piping or Sump

Will this upgrade cause piping or containment sump to be broken?

€ Yes ⊛No

Office of the Illinois State Fire Marshal

1035 Stevenson Dr. Springfield, IL 62704 | (217) 785-1020



Office of the Illinois State Fire Marshal Division of Petroleum and Chemical Safety 1035 Stevenson Drive Springfield, IL 62703 2177851020 FOR OFFICE USE ONLY Facility # 7021661

Permit # 01568-2017REM Request Rec'd 12/14/2017 Amended Date Approval Date 12/18/2017 DS Permit Expires 6/19/2018

### Permit for REMOVAL of Underground Storage Tank(s) and Piping for Petroleum and Hazardous Substances.

Permission to remove underground storage tank(s) or piping is hereby granted. Such removal shall not commence until the contractor the permit was issued to or an employee of that contractor (this does not include a subcontractor) shall establish a date certain to perform the UST activity by contacting the Office of the State Fire Marshal, Division of Petroleum and Chemical Safety, at which time the UST activity shall be scheduled. THIS **PERMIT IS VALID FOR SIX MONTHS FROM THE APPROVAL DATE**.

(1) <u>OWNER OF TANKS</u> - Corporation, partnership, or other business entity:	(2) <u>FACILITY</u> - name and address where tanks are located:
Martin & Bayley, Inc.	Huck's #134 540 Airport Road Mount Vernon, IL 62864
Contact: Troy Dietz (618) 382-2334 Ext. 268	Contact: Jina Henry (618) 382-2334

### (3) <u>REMOVAL OF TANKS:</u>

- (a) Number and size of tanks being removed: (TK # 1, 2) 10,000
- (b) Description/location of piping being removed:
- (c) Product to be stored in each tank: (TK # 1, 2) Gasoline
- (d) Reason of tanks being removed:
- (e) If tank(s) is leaking, indicate IEMA incident number: 2017-1116
- (f) Date each tank was last used: (TK # 1, 2) Unknown
- (4) The owner must notify this Office when completion of tank removal has occurred, on the Notification for Underground Storage Tank Form. This form can be obtained at www.sfin illinois.gov or by calling (217)785-1020. After removal is completed, the owner/operator shall perform a site assessment by measuring for the presence of a release where contamination is most likely to be present at the UST site. This is in accordance with the Illinois Administrative Code 176.360 (a) regulations and 40 CFR Part 280.72 (a) Federal Register Requirement.

(5) SPECIAL CONTINGENCIES : UST, piping and vent lines to be removed.

### (6) PERSON, FIRM OR COMPANY PERFORMING WORK:

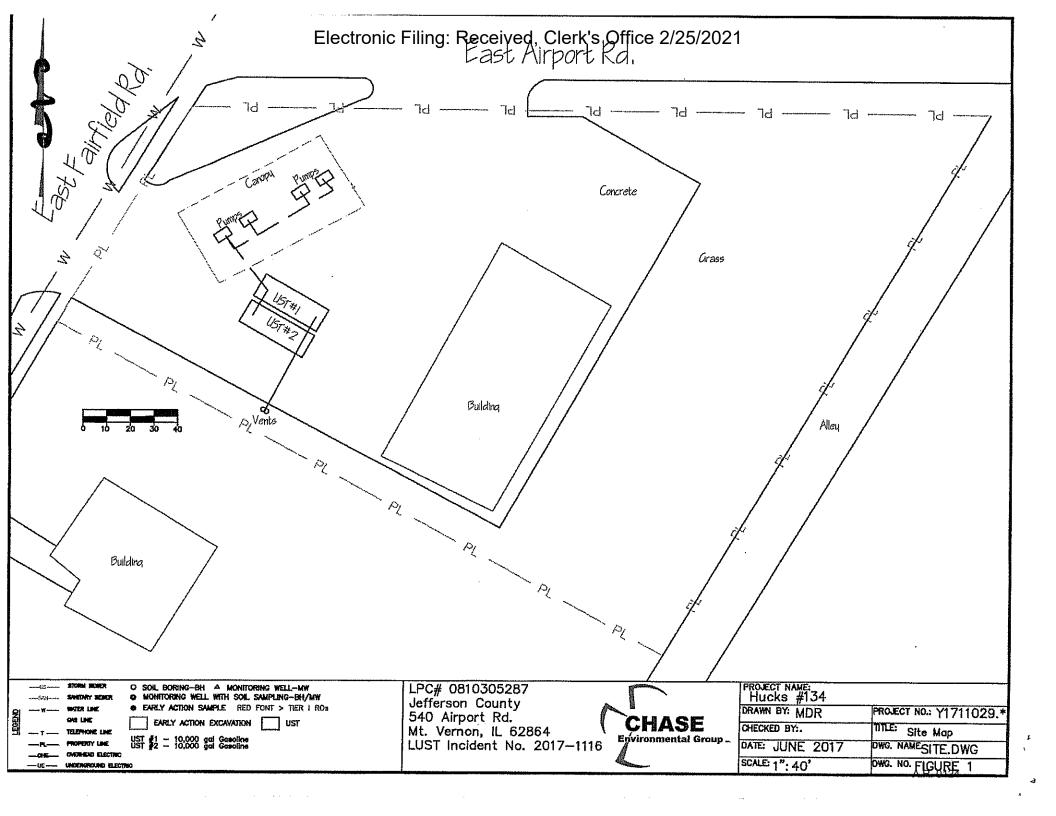
Chase Environmental Group Inc. 11450 Watterson Court Louisville, KY 40299 Contact Person: Matt Rives Phone: (618) 533-6740 Contractor Registration # IL2036 Exp. 3/17/2019

Sincerely,

Daniel J. Starker

Daniel Starks

cc: Storage Tank Safety Specialist Division File





R.C

## **OFFICE OF THE ILLINOIS STATE FIRE MARSHAL**

Removal Permit Application - 7021661 - Chase Environmental Group Inc. - State ID: IL2036

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### Permit Application Summary

Permit Application Status: Approved

Received Date: 12/14/2017

Owner - U0009763 Owner Name Address Address Martin & Bayley, Inc. 1311 A. W. Main Street P.O. Box 385 Carmi, IL 62821 Troy Dietz Phone Number (618) 382-2334 

 Facility - 7021661

 Facility Name
 Huck's #134

 Address
 540 Airport Road

 Mount Vernon, IL 62864
 Jefferson

 Contact Person
 Jina Henry

 Phone Number
 (618) 382-2334

Facility Information is different

Owner Information is different

### Tanks on the Permit

Tank #	Capacity	Product	Tank Status	Pre-1974	Last Used Date	Comment
1	10,000	Gasoline	Currently in use	No		
2	10,000	Gasoline	Currently in use	No	and the state of the	

#### Summary of Work

UST, piping and vent lines to be removed.

### IEMA Number

1017 1116	 
2017-1110	

### Site Plans

Document Type	Document name	Last Uploaded	
Site Plans	huck 134 site map.pdf	12/14/2017 4:36:26 PM	

### Supplemental Documents Uploaded for the Application

Document Type	Document name	Last Uploaded
There are no documents to display.	, references	

#### Terms and Conditions

Name of the Authorized Representative: Matthew Rives

Title or Position: Engineer

🕅 I agree to the Terms and Conditions

#### Payment

### Permit Application Status: Approved

Bill To Name	Payment Received	Applied Amount	Received	Authorization Code	Transaction ID
Matthew Rives	\$200.00	(\$200.00)	12/14/2017	081860	2724935

Office of the Illinois State Fire Marshal

1035 Stevenson Dr. Springfield, IL 62703 | (217) 785-1020

# Electronic Filingrune ware were and the state of the stat

Reviewer:	Melissa Owens	Queue Date: _ Subject to Program:	<u>4/16/18</u> 734	Initial Re	eview Date	e: 7/11/18
LPC # & County:	0810305287 / Jefferson	Subject to Frogram.		PM: Pu	utrich	
Site Name:	Mt. Vernon / Martin & Bayley,	Inc.		1 M. <u>1 C</u>		· · · ·
LUST IncidentClaim #			lling Period:	12/5/17	to	2/2/18
Early Action	xxxxxxxxxx Site Class.:	Low Priority:		High Priority:		
Free Product			ctive Action:			
Amount requested for	Early Action:			75,067.8	6	
SUB TOTAL:				\$75,067.	86	
Less: STANDARD DE	DUCTIBLE:		:	(5,000.0		
Less: DEDUCTIONS:	-				,	
rem & dsip-ETD will pay	/ 350.24 cubic yards at \$72.05	plus trucking concrete	450	(1,897.3	9)	
rem & disp-gw removal				(604.50	))	
cons mat-postage no do	oc			(22.50	)	
cons mat-copies cut				(30.00	)	
SUMMARY D	ATE:	_		_		
NFR DATE		-				
OPT-IN DAT	ſE:	Total Amount	Due:	\$67,513.	47	=:
Payee:	Martin & Bayley	«»»»»»»»»»»»»»»»»»»»»»»»»»»»»»»»»»»»»»	Facility:	Martin & Bayley,	Inc.	
Attention:	c/o Chase Environmental Gro	pup, inc.		540 Airport Road		······································
	······			Mt. Vernon, IL 6		
Address:	2701 E. Ash Street, Bldg. B		County:	Jefferson		······
City/St./Zip:	Springfield, IL 62703					

TO:	Greg Dunn
FROM:	Melissa Owens

Initial Review Date: 7/11/18 Project Manager: Putrich

Subject	to	Program:	734

LPC # & County:	0810305287 / Jefferson
Site City & Name:	Mt. Vernon / Martin & Bayley, Inc.
Site Address:	540 Airport Road
LUST Incident-Claim #	2017111669210
Queue Date:	4/16/2018
LUST / FISCAL FILE	

The above referenced facility's consultants/contractors submission regarding invoices and billings has been reviewed.

The consultant/contracto	or in this billing pack	age is:	Chase Environn	tental Group, In	C.	
Queue Date: _	4/16/18			Revised	120 Day Date: I 120 Day Date:	
IEMA:	12/5/17			59 D	ays After IEMA:	2/2/18
OSFM:				Date of	45 Day Report:	
F.P. Discovered:			45 Days After		as Discovered:	
E.A. Ext Date:			Da	te of Site Class.	Comp. Report:	
NFR Date:					Comp. Report:	
Opt-In Date:			Or Stage of	of Site Invest. we	ork being billed:	
Opt-In as New Owner:	<u>.</u>					
# of Eligible Tanks: _ Tank Pull: _	2	Planned:	2-10,000 gasolii	ne	Not Planned:	
The <b>Billing Period</b> for th	nis claim covers:		12/5/17	to	2/2/18	
The Amount Requested	<u>d</u> in this billing pack	age is:	-	\$75,067.86	*	
The Budget Amount Ap	oproved for this site	is:	-		-	
The <b>Deductible Applied</b>	<u>I</u> to this billing pack	age is:	-	(\$5,000.00)	-	
Early Action:	xxxxxxxxx	Site Class.:		Low Priority:		High Priority:
Free Product:		Site Invest.:		Co	prrective Action:	

## **MANDATORY DOCUMENTS:**

x	1.	Payment Certification Form.
x	2.	Owner/Operator & Professional Engineer/Geologist Billing Certification Form.
x	З.	Private Insurance Coverage Questionnaire & Affidavit Forms.
x	4.	Federal Taxpayer Identification Number &/or W-9 Form(s):
x	5.	Copy of OSFM Eligibility / Deductibility Letter.
x	6.	Women / Minority Business Enterprise Form.

## Owens, Melissa

From:	Matthew Rives <mrives@chaseenv.com></mrives@chaseenv.com>
Sent:	Tuesday, July 24, 2018 9:44 AM
То:	Owens, Melissa
Subject:	[External] Re: Martin & Bayley 20171116 early action claim
Attachments:	Hucks landfill invoice.pdf; ED rates example.pdf

Attached response for reimbursement questions in bold. Please fell free to call me if you need anything or do not agree with response

Martin & Bayley 20171116 early action claim

Hi Matt,

I'm working on the above referenced claim. I think I've mentioned previously that I normally ask Brian about all early action claims.

1. I think you've discussed this with Brian previously, but he said we will pay for 350.24 cubic yards of ETD at \$72.05 per cubic yard plus \$450.00 in concrete trucking. We get a total of \$25.684.79. I have discussed this with Greg and Brian and explain how separation of this material is not allowed and explained how E&D rates are calculated. I have attached an example for calculation of the E&D rates for you and Brian's reference. I am aware EPA has made the stance that they are not paying for recycling of concrete as it is not disposal, but no such costs are included in the calculation for the rate so the complete cost can be approved.

2. Can you please email a complete copy of the Republic invoice? I only see page 1. Attached

3. The documentation provided for groundwater removal appears to be a statement. Can you please email a copy of the invoice? Also, the statement shows \$955.50, so can you please let me know how you arrived at \$1,560.00 for groundwater removal? Finally, it appears that the proof of payment submitted is for the other amount on the statement and not for the \$955.50. Can you please provide proof of payment for the \$955.50? Cut to \$955.50. The Check submitted looks correct to me, It references both invoices on statement. The statement provided references both Invoice #'s if the actual invoice is still required let me know and I will contact the company for a copy.

4. I don't see documentation for the postage line item. Do you want to submit it? Cut

5. As far as I can tell, we aren't paying for any copies unless you provide an invoice showing that an outside entity did the copies. **Cut** 

Quoting "Owens, Melissa" <<u>Melissa.Owens@illinois.gov</u>>:

Hi Matt,

I'm working on the above referenced claim. I think I've mentioned previously that I normally ask Brian about all early action claims.

- 1. I think you've discussed this with Brian previously, but he said we will pay for 350.24 cubic yards of ETD at \$72.05 per cubic yard plus \$450.00 in concrete trucking. We get a total of \$25.684.79.
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- 3. The documentation provided for groundwater removal appears to be a statement. Can you please email a copy of the invoice? Also, the statement shows \$955.50, so can you please let me know how you arrived at \$1,560.00 for groundwater removal? Finally, it appears that the proof of payment submitted is for the other amount on the statement and not for the \$955.50. Can you please provide proof of payment for the \$955.50?
- 4. I don't see documentation for the postage line item. Do you want to submit it?
- 5. As far as I can tell, we aren't paying for any copies unless you provide an invoice showing that an outside entity did the copies.

Thanks,

Melissa

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Matthew D. Rives, P.E. Chase Environmental Group, Inc. 2701 E. Ash, Bldg. B Springfield, IL 62704 P: 217-670-1916 F: 217-670-1682 M: 217-851-1404

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## Owens, Melissa

From:	Matthew Rives <mrives@chaseenv.com></mrives@chaseenv.com>
Sent:	Tuesday, July 24, 2018 10:07 AM
То:	Owens, Melissa
Subject:	[External] Re: Martin & Bayley 20171116 early action claim
Attachments:	Hucksliquid Disp invoice.pdf

I went ahead and got the invoice for the liquid disposal. Attached Quoting Matthew Rives <<u>mrives@chaseenv.com</u>>:

# Attached response for reimbursement questions in bold. Please fell free to call me if you need anything or do not agree with response Martin & Bayley 20171116 early action claim

Hi Matt.

I'm working on the above referenced claim. I think I've mentioned previously that I normally ask Brian about all early action claims.

1. I think you've discussed this with Brian previously, but he said we will pay for 350.24 cubic yards of ETD at \$72.05 per cubic yard plus \$450.00 in concrete trucking. We get a total of \$25.684.79. I have discussed this with Greg and Brian and explain how separation of this material is not allowed and explained how E&D rates are calculated. I have attached an example for calculation of the E&D rates for you and Brian's reference. I am aware EPA has made the stance that they are not paying for recycling of concrete as it is not disposal, but no such costs are included in the calculation for the rate so the complete cost can be approved.

2. Can you please email a complete copy of the Republic invoice? I only see page 1. Attached

3. The documentation provided for groundwater removal appears to be a statement. Can you please email a copy of the invoice? Also, the statement shows \$955.50, so can you please let me know how you arrived at \$1,560.00 for groundwater removal? Finally, it appears that the proof of payment submitted is for the other amount on the statement and not for the \$955.50. Can you please provide proof of payment for the \$955.50? Cut to \$955.50. The Check submitted looks correct to me, It references both invoices on statement. The statement provided references both Invoice #'s if the actual invoice is still required let me know and I will contact the company for a copy.

4. I don't see documentation for the postage line item. Do you want to submit it? Cut

5. As far as I can tell, we aren't paying for any copies unless you provide an invoice showing that an outside entity did the copies. **Cut** 

Quoting "Owens, Melissa" <<u>Melissa.Owens@illinois.gov</u>>:

Hi Matt,

I'm working on the above referenced claim. I think I've mentioned previously that I normally ask Brian about all early action claims.

- 1. I think you've discussed this with Brian previously, but he said we will pay for 350.24 cubic yards of ETD at \$72.05 per cubic yard plus \$450.00 in concrete trucking. We get a total of \$25.684.79.
- 2. Can you please email a complete copy of the Republic invoice? I only see page 1.
- 3. The documentation provided for groundwater removal appears to be a statement. Can you please email a copy of the invoice? Also, the statement shows \$955.50, so can you please let me know how you arrived at \$1,560.00 for groundwater removal? Finally, it appears that the proof of payment submitted is for the other amount on the statement and not for the \$955.50. Can you please provide proof of payment for the \$955.50?
- 4. I don't see documentation for the postage line item. Do you want to submit it?
- 5. As far as I can tell, we aren't paying for any copies unless you provide an invoice showing that an outside entity did the copies.

Thanks,

Melissa

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Matthew D. Rives, P.E. Chase Environmental Group, Inc. 2701 E. Ash, Bldg. B Springfield, IL 62704 P: 217-670-1916 F: 217-670-1682 M: 217-851-1404



www.chaseenv.com

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## Matthew D. Rives, P.E. Chase Environmental Group, Inc. 2701 E. Ash, Bldg. B Springfield, IL 62704

P: 217-670-1916 F: 217-670-1682 M: 217-851-1404

www.chaseenv.com

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## QUEUE DATE TRACKING SHEET LUST CLAIMS UNIT

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LPC # <u>0810305287</u> INCIDENT # <u>20171116</u> -- <u>69210</u>

QUEUE DATE	<u>4/16/2018</u>			120-DAY DATE		<u>8/14/2018</u>	
SITE NAME:	Martin & Bayley, Inc.						
OWNER/ OPERATOR:	MARTIN	& BAY	<u>LEY, INC.</u>	<u>.</u>		IEMA	> obly
CLASS CODE:	<u>EA</u>		PROGRAM:		<u>734</u>	12/5/17	$\rightarrow 2/2/18$
AMOUNT REQUESTED:	<u>\$75,067.86</u>						
BILLING PERIOD	FROM:	<u>12/5/2</u>	<u>017</u>	TO:	<u>2/2/2018</u>		
CONSULTANT:	CHASE ENVIRONMENTAL GROUP, INC.						
OPT-IN:	\$5,000.00 deductible						
NFR:	- ask for full Republic unitie - ask for full Republic unitie - mutte for Fuel american + proof of programment - allow 350 24 mid-3x 72 05= 25, 234 79						
SENT TO DIVISION FILE:					4 proof of prayment - Allow 350.24 yels × 72.05= 25,234.79 + trucking 450.00=25,684.79		
COMMENTS: We are appear to ve planting tank puck - gu ark							
- postage dec							
First claim for this Incident Number? Yes No							
Yearly breakdowns required? Yes No							



Waste Management • Remediation • Drilling Services

April 13, 2018

Illinois Environmental Protection Agency Bureau of Land LUST Unit P.O. Box 19276 Springfield, IL. 62794-9276

RE: LPC# 0810305287 - Jefferson County Martin & Bayley, Inc. – Hucks #134 540 airport Road Mt. Vernon, IL 62864 IEMA # 20171116 RECEIVED

APR 1 6 2018

IEPA-BOL PERMIT SECTION

To Whom It May Concern:

Enclosed please find one original of the Early Action Billing Application for the above referenced site.

Should you have any questions or need additional information, please call Matthew Rives of Chase Environmental Group, Inc. at 217-670-1916.

Sincerely,

Chase Environmental Group, Inc.

Matthew Rives, PE Sr. Professional Engineer

RECEIVED

APR 1 6 2018

EPA/BOL

## EARLY ACTION BILLING APPLICATION FOR LPC #0810305287—Jefferson County Martin & Bayley, Inc. – Hucks #134 540 Airport Road, Mt. Vernon 62864 LUST INCIDENT # 20171116

## CEG PROJECT #T1711029.A

Prepared for:

Martin & Bayley, Inc. – Hucks #134 540 Airport Road Mt. Vernon, IL 62864

Prepared By:

Chase Environmental Group, Inc. 2701 East Ash Springfield, IL 62703



APR 1 6 2018

IEPA/BOL

## **TABLE OF CONTENTS**

- 1.0 PROOF OF OFSM DETERMINATION OF ELIGIBILITY ACCESS THE FUND
- 2.0 WBE/MBE FORM
- 3.0 ACCOUNTING OF EARLY ACTION COSTS
- 4.0 OWNER/OPERATOR P.E. BILLING CERTIFICATION
- 5.0 PRIVATE INSURANCE AFFIDAVIT AND QUESTIONAIRRE
- 6.0 PAYMENT CERTIFICATION FORM
- 7.0 W-9 FORM

RECEIVED APR 1 6 2018 IEPA/BOL

Martin & Bayley – Hucks #134 Mt. Vernon, Illinois LPC # 0810305287 IEMA #20171116

1.0

# PROOF OF OSFM DETERMINATION OF ELIGIBILITY TO

## ACCESS THE FUND



Office of the Illinois State Fire Marshal

3/5/2018

Martin & Bayley, Inc. 928 County Road 1350 N. Carmi, IL 62821

In Re: Facility No. 7021661 IEMA Incident No. 20171119 Huck's #134 540 Airport Road Mount Vernon, Jefferson, IL 62864

Dear Applicant:

The Reimbursement Eligibility and Deductible Application received on March 02, 2018 for the above referenced occurrence has been reviewed. The following determinations have been made based upon this review.

It has been determined that you are eligible to seek payment of costs in excess of \$5,000. The costs must be in response to the occurrence referenced above and associated with the following tanks:

**Eligible Tanks** 

Tank 1 10,000 gallon Gasoline Tank 2 10,000 gallon Gasoline

You must contact the Illinois Environmental Protection Agency to receive a packet of Agency billing forms for submitting your request for payment.

An owner or operator is eligible to access the Underground Storage Tank Fund if the eligibility requirements are satisfied:

- Neither the owner nor the operator is the United States Government, 1.
- 2. The tank does not contain fuel which is exempt from the Motor Fuel Tax Law,
- 3. The costs were incurred as a result of a confirmed release of any of the following substances:

"Fuel", as defined in Section 1.19 of the Motor Fuel Tax Law

Aviation fuel

Heating oil

Kerosene

Used oil, which has been refined from crude oil used in a motor vehicle, as defined in Section 1.3 of the Motor Fuel Tax Law,

- 4. The owner or operator registered the tank and paid all fees in accordance with the statutory and regulatory requirements of the Gasoline Storage Act.
- 5. The owner or operator notified the Illinois Emergency Management Agency of a confirmed release. the costs were incurred after the notification and the costs were a result of a release of a substance listed in this Section. Costs of corrective action or indemnification incurred before providing that notification shall not be eligible for payment.
- The costs have not already been paid to the owner or operator under a private insurance policy, 6. other written agreement, or court order.
- 7, The costs were associated with "corrective action".

This constitutes the final decision as it relates to your eligibility and the set deductible. We reserve the right to change the deductible determination should additional information that would change the determination become available. An underground storage tank owner or operator may appeal the decision to the Illinois Pollution Control Board (Board), pursuant to Section 57.9 (c) (2). An owner or operator who seeks to appeal the decision shall file a petition for a hearing before the Board within 35 days of the date of issuance of the final decision, (35 Illinois Administrative Code 105.504(b)).

For information regarding the filing of an appeal, please contact:

Clerk Illinois Pollution Control Board State of Illinois Center 100 West Randolph, Suite 11-500 Chicago, Illinois 60601 (312) 814-3620

The following tanks are also listed for this site:

None

Your application indicates that there has not been a release from these tanks under this incident number. You may be eligible to seek payment of corrective action costs associated with these tanks if it is determined that there has been a release from one or more of these tanks. Once it is determined that there has been a release from one or more of these tanks you may submit a separate application for an eligibility determination to seek corrective action costs associated with this/these tanks.

If you have any questions, please contact our Office at (217) 785-1020.

Sincerely,

Deanne Lock Division of Petroleum and Chemical Safety

Martin & Bayley – Hucks #134 Mt. Vernon, Illinois

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LPC # 0810305287 IEMA #20171116

2.0

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# WBE/MBE FORM

# AND QUESTIONAIRE

# Women and Minority Business Enterprises Form

The Illinois EPA is required to report State and Federal funds paid to Women Business Enterprises (WBE) and Minority Business Enterprises (MBE). Therefore, please provide the required information for all Prime Consultants/Contractors and Subcontractors used to perform the work for this billing:

Name of Leaking UST site:	Martin and Bayley - Hucks #134	Incident No.: 20171116
Rame of Loaking Oor old.	$\pi \alpha \alpha \alpha \alpha \beta \alpha \gamma \alpha \gamma \alpha \gamma \gamma \gamma \gamma \gamma \gamma \gamma \gamma \gamma \gamma$	

The work for this billing was performed from 12/5/17

to 1/26/18

Prime Consultant: Chase Environmental Group, Inc.

FIRM'S NAME, ADDRESS, AND TELEPHONE NUMBER	IS THIS FIRM A WBE OR MBE?	IF WBE OR MBE, WHAT IS ITS STATE OF ILLINOIS VENDOR NUMBER?	AMOUNT PAID OR DUE THIS BILLING (\$)
Chase Environmental Group, Inc. 2701 East Ash Springfield IIL 62703	NO		55,353.53
Republic Services Wayne County Landfill 716 Skyline Dr. Marion, IL 62959	NO		10,507.20
Charles Carter Trucking PO Box 68 Fairfield, IL 62837	NO		5,440.96
Teklab, Inc. 5445 Horseshoe Lake Road Collinsville, IL 62801	NO		269.00
Prairie Analytical Systems, Inc. 1210 Capital Airport Drive Springfield, IL 62707 217-753-1148	NO		1,595.70
	NO		
	NO		

#### BILLING TOTAL \$ 73,166.39

The Illinois EPA is authorized to request this information under the Environmental Protection Act, 415 ILCS 5/1 et seq. (formerly Ill. Rev. Stat. Ch 111-1/2, 1001 et seq.). Disclosure of this information is required. Failure to properly complete this form in its entirety may result in the delay or denial of any payment requested hereunder. This form has been approved by the Forms Management Center.

Martin & Bayley – Hucks #134 Mt. Vernon, Illinois

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LPC # 0810305287 IEMA #20171116

3.0

# **ACCOUNTING OF EARLY ACTION COSTS**

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# Illinois Environmental Protection Agency

Bureau of Land • 1021 N. Grand Avenue E. • P.O. Box 19276 • Springfield • Illinois • 62794-9276

#### General Information for the Budget and Billing Forms

LPC #: 0810305287	County: Jefferson	
City: <u>Mt. Vernon</u>	Site Name: Martin & Bayley, Inc	c Hucks #134
Site Address: 540 Airport Road		······
IEMA Incident No.: 20171116		
IEMA Notification Date: Dec 5, 2017		
Date this form was prepared: Mar 20, 20	18	
This form is being submitted as a (cheo	k one, if applicable):	
Budget Proposal		
Budget Amendment (Budget am	endments must include only the costs ov	er the previous budget.)
Billing Package		
	date(s) of report(s) documenting the cos	sts requested:
Name(s): <u>45 Day</u>		· · · · · · · · · · · · · · · · · · ·
Date(s): <u>Mar 1, 2018</u>		· · · · · · · · · · · · · · · · · · ·
This package is being submitted for the	site activities indicated below:	RECEIVED
35 III. Adm. Code 734:		APR 1 6 2018
Early Action		
Free Product Removal after Earl	-	IEPA/BOL
Site Investigation	·	Stage 3:
Corrective Action	Actual Costs	
35 III. Adm. Code 732:		
Early Action		
Free Product Removal after Earl	ly Action	
Site Classification		
Low Priority Corrective Action		
High Priority Corrective Action		
35 III. Adm. Code 731:		
Site Investigation		
Corrective Action		
		м.

#### General Information for the Budget and Billing Forms

The following address will be used as the mailing address for checks and any final determination letters regarding payment from the Fund.

Pay to the order of: Martin & Bayley		
Send in care of: Chase Environmental G	roup, Inc.	
Address: 2701 E. Ash Street, Bldg. B		
City: Springfeild	State: IL	Zip: <u>62703</u>
The payee is the: Owner 🛛	Operator 🔀 (Check one or	r both.)
Jun hat		W-9 must be submitted.
Signature of the owner or operator of the U	ST(s) (required)	Click here to print off a W-9 Form.
Number of petroleum USTs in Illinois prese parent or joint stock company of the owner or joint stock company of the owner or ope	r or operator; and any company o	vner or operator; any subsidiary, wned by any parent, subsidiary
Fewer than 101: 🖾 10	01 or more: 🔲	
Number of USTs at the site: <u>2</u> have been removed.)	(Number of USTs includes UST	s presently at the site and USTs that
Number of incidents reported to IEMA for	this site: 1	
Incident Numbers assigned to the site due		116

Please list all tanks that have ever been located at the site and tanks that are presently located at the site.

Product Stored in UST	Size (gallons)	Did UST have a release?		Incident No.	<b>Type of Release</b> Tank Leak / Overfill / Piping Leak
Gasoline	10,000	Yes 🛛	No 🗌	20171116	Tank Leak
Gasoline	10,000	Yes 🛛	No 🗌	20171116	Tank Leak
		Yes 🗌	No 🗌		
		Yes 🗌	No 🗌		
		Yes 🗌	No 🗌		
		Yes 🗌	No 🗌	· · · · · · · · · · · · · · · · · · ·	
		Yes 🗌	No 🗌		-
		Yes 🗌	No 🗌		
		, Yes 🗌	No 🔲	444 4 14	

Add More Rows

Undo Last Add

# **Billing Summary**

	\$ Amount Approved in the Budget	\$ Amount Requested for Payment from the Fund
1. Drilling and Monitoring Well Costs Form		1,516.86 V
2. Analytical Costs Form		2,193.34 🗸
3. Remediation and Disposal Costs Form		36,837.74 39,339.63
4. UST Removal and Abandonment Costs Form		7,963.50
5. Paving, Demolition, and Well Abandonment Costs Form		
6. Consulting Personnel Costs Form		20,351.96 🗸
7. Consultant's Materials Costs Form		1,748.60 1,801.10
Total Amount Approved in the Budget *		NOT APPLICABLE
Subtotal of lines 1-7:	NOT APPLICABLE	70,612.00 \$73,166.39
8. Handling Charges Form		1,901.47
TOTAL AMOUNT REQUESTED FOR PAYMENT	NOT APPLICABLE	72,513.47 \$75,067.86

<5,000.00> deductible 67,513.47

\*Date(s) this Budget(s) was approved: Feb 6, 2018

# **Drilling and Monitoring Well Costs Form**

1. Drilling

Number of Borings to Be Drilled	Type HSA/PUSH/ Injection	PUSH/ of Each Drilled		Reason for Drilling
1	PUSH	10.00	10.00	WC sampling for LF acceptance

		Total Feet	Rate per Foot (\$)	Total Cost (\$)
🛛 Subpart H	Total Feet via HSA:			
minimum payment amount applies.	Total Feet via PUSH:	10.00	22.53	225.30
	Total Feet for Injection via PUSH:			
			Total Drilling Costs:	1,516.86 *

#### 2. Monitoring / Recovery Wells

\* adjusted to reflect Subpart H minimum payment amount

Number of Wells	Type of Well HSA / PUSH / 4" or 6" Recovery / 8" Recovery	Diameter of Well (inches)	Depth of Well (feet)	Total Feet of Wells to Be Installed (\$)	

Well Instaliation	Total Feet	Rate per Foot (\$)	Total Cost (\$)
Total Feet via HSA:			
Total Feet via PUSH:			
Total Feet of 4" or 6" Recovery:			
Total Feet of 8" or Greater Recovery:			
<b>L</b>	<u> </u>	Total Well Costs:	

Total Drilling and Monitoring Well Costs:	\$1,516.86
---	------------

icle how and have	GENERATOR:	PHONE NO. NAME ADDRESS CITY CUSTOMER P.O. ERGENCY	AMERICAN AND RECYCLE, ONE OF THE REIGLE ( S35 THEOBALL PADUCAH, KY HUCKS S40 Air, NO. CONTACT: 1-8	INC. COMPANIES D LANE 42003 $A_{2003}$	2 FAX: 2 US EPA NO. KYR 000049	270 270	PHONE NO. NAME (7) ADDRESS 27 CIDS 27 CIDS 27 MANIFEST	□ PURC □ SHIPI 1 (110) 1 (11)	CE No. 213 CHASE ORD PING ORDE	ER
/	pa	JSED OIL	(NON-	HAZARDOUS)		-	US DOT DES	U	SED PETROLEU	
<i>′</i>				40 CFR 2	79					BY US DOT/EPA)
	(	GALLONS	US DOT DES	CRIPTION	UNIT PRICE	I	CHARGE	CREDIT	TOTAL	HALDGEN TEST
		11-	USED OIL, COL	·						PPM
		450	OILY WATER MI	······································	.49	1	455.50		955.50	Ррм
			ON SPEC USED	OIL DELIVERED	·	╀	-			PPM
	<del></del>		SERVICE CHARGE		-	-				1
	αι	ISED ANT		HAZARDOUS)			US DOT DESC	I. RIPTION	SPENT ANTIFREEZ FLASH GREATER	E FOR RECYCLE THAN 200°F BY US DOT/EPA)
	G/	ALLONS				T	CHARGE	CREDIT	TOTAL	BY US DUITEPA)
			ANTI-FREEZE			T		······	-	
		DILY SOLI	DS (non-hazardo	us)			US DOT Desc	RIPTION	FLASH GREATER	RECYCLE/DISPOSAL THAN 200°F BY US DOT/EPA)
	DR	UNIS			UNIT PRICE	T	CHARGE	CREDIT	TOTAL	
	<del></del>	]	Used Filters	······································		T				1
			USED SORBENTS		1	T				
	•	.	OILY SLUDGE (NON	HAZARDOUS)		T				
	·		EMPTY DRUMS FOR	RECYCLE		1				· .
					]					].
								CREDIT TAX		-
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	DIIY U	44311104 10208	ATION: This is to certify the aged, marked and labe to the applicable regulation of the applicable regulation.	ier she sta to proma	a manafélan di s		shipper's withle	CONDITION	INDICATES ACCEPTA S LISTED ABOVE AN S DOCUMENT.	ANCE OF TERMS AND ID ON THE REVERSE
	unin 2	RATOR'S CERT 20 lbs. (100 kg) I cation number,	FICATION: I cartify that for the calandar month and	my hazardous waste str d that I am not required to	earns total less o obtain an EPA	QI	ENERATOR'S INITIALS	GENERATOR'S EIGNAT		
<b></b>		······································	ал I.	•	<b>ا</b> <sup>1</sup>			' Mat	theos Rive	>



Waste Management • Remediation • Drilling Services

**INVOICE NO** 27243

**INVOICE DATE** 3/27/2018

**TERMS** Net 120 **DUE DATE** 7/25/2018

Martin & Bayley Inc P.O. Box 385 Carmi, IL 62821

PROJECT NO.	CLIENT PO	CHASE WORK ORDER	PROJECT NAME	PROJ MGR
T1711029			Hucks#134-Mt. Vernon, IL	MR

CEG person to contact for this project is Matthew Rives

For: Early Action Activities

EPA#: 2017-1116

DESCRIPTION	UNIT	UNIT PRICE	TOTAL
Drilling and Monitoring Wells Costs Form:	1	1,516.86	1,516.86
Analytical Costs Form:	1	2,193.34	2,193.34
Remediation and Disposal Costs Form:	1	39,339.63	39,339.63
ETD 382.82 yds @ \$72.05=\$427,582.18			
BF 403.38 yds @ \$25.28=\$10,197.45			
Liquid Disposal 1950 @ \$0.80=\$1560			
UST Removal Costs Form:	1	7,963.50	7,963.50
(2) 10,000 gal UST @ \$3981.75 each			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Consulting Personnel Costs Form:	1	20,351.96	20,351.96
(As broken down on the Consulting Personnel Costs Form)			20,001.00
Consulting's Material Costs Form:	1	1,801.10	1,801.10
(As broken down on the Consultant's Material Costs Form)			1,001.10
Handling Charges Cost Form:	1	1,901.47	1,901.47
(As broken down on the Handling Charges Form)			~,~ ~ 1

TOTAL AMOUNT 75,067.86

Payment Policy - Invoices not remitted by prescribed due date will be assessed a 1.5% late fee per month until payment is received.

We gladly accept Mastercard & VISA

# **Analytical Costs Form**

Laboratory Analysis	Number of Samples		Cost (\$) per Analysis		Total per Parameter		
Chemical Analysis	Chemical Analysis						
BETX Soil with MTBE EPA 8260	V 15	x	106.38	=	\$1,595.70		
BETX Water with MTBE EPA 8260		X					
COD (Chemical Oxygen Demand)		X		=			
Corrosivity		X					
Flash Point or Ignitability Analysis EPA 1010	$\vee^1$	X	36.00	=	\$36.00		
Fraction Organic Carbon Content (foc) ASTM-D 2974-00		X		3E)			
Fat, Oil, & Grease (FOG)		X		=			
LUST Pollutants Soil - analysis must include volatile, base/ neutral, polynuclear aromatics and metals list in Section 732. Appendix B and 734.Appendix B		X		F			
Dissolved Oxygen (DO)		X		0			
Paint Filter (Free Liquids)	1	X	15.00	E State	\$15.00		
PCB / Pesticides (combination)		X		=			
PCBs		X	03.00.000.000				
Pesticides		X		II			
рН	1	X	15.00		\$15.00		
Phenol		X		=			
Polynuclear Aromatics PNA, or PAH SOIL EPA 8270		X		1			
Polynuclear Aromatics PNA, or PAH WATER EPA 8270		X		H			
Reactivity		X		-			
SVOC - Soil (Semi-Volatile Organic Compounds)		X		11			
SVOC - Water (Semi-Volatile Organic Compounds)		X		I			
TKN (Total Kjeldahl) "nitrogen"		X		=			
TPH (Total Petroleum Hydrocarbons)		X		a an			
VOC (Volatile Organic Compounds) - Soil (Non-Aqueous)		X		=			
VOC (Volatile Organic Compounds) - Water		X					
BTEX+MTBE, Solid by GC/MS	L 1	X	96.00	=	\$96.00		
8270 Semi-Volatile Organics, Solid by GC/MS SIMS		X					
		X		=			
		X		-			
		X		=			
Geo-Technical Analysis	1		Т	r			
Soil Bulk Density (pb) ASTM D2937-94	jess aastisjes aandewskiere	X	. Na water and the second	<b>-</b>			
Ex-situ Hydraulic Conductivity / Permeability		<b>X</b>					
Moisture Content (w) ASTM D2216-92 / D4643-93	a yang dari kenara sebarah seb	X	a an isa sa s	= 0.00000	i		
Porosity		<b>X</b>	6464646846	22.2 d			
Rock Hydraulic Conductivity Ex-situ	NA COMPANY DOWN	X		<b>=</b>	n andre gelande beste ferste en en en er e		
Sieve / Particle Size Analysis ASTM D422-63 / D1140-54	101512121212	X					
Soil Classification ASTM D2488-90 / D2487-90	and a state of the second second second	X		=			
Soil Particle Density (ps) ASTM D854-92		X					
	an fathan ta 11 ann an 18	X	· Sanda and and a state of the	<b>=</b>	<ol> <li>State and a state of the state</li></ol>		
		्र					
		X		=			

# **Analytical Costs Form**

Metals Analysis					
Soil preparation fee for Metals TCLP Soil (one fee per soil sample)	/1	X	J 98.87		\$98.87
Soil preparation fee for Metals Total Soil (one fee per soil sample)		Х		=	
Water preparation fee for Metals Water (one fee per water sample)		X			
			Nysaa oo la mada ahaa ahaa ahaa	197619-01-04	
Arsenic TCLP Soil		x			
Arsenic Total Soil		X	A MARKAN AND A DAMAGE	=	
Arsenic Water		X			
Barium TCLP Soil		Х		=	
Barium Total Soil		X		<b>.</b>	
Barium Water		X		=	
Cadmium TCLP Soil		्र			
Cadmium Total Soil		Х		=	A
Cadmium Water		X			
Chromium TCLP Soil .		X		=	
Chromium Total Soil	MARKED PLAN	X	15. C. 18. C. 18. 24.		ne an seas
Chromium Water		Х		=	
Cyanide TCLP Soil		X	Giller Harrison (		
Cyanide Total Soil		Х		=	
Cyanide Water		X			
Iron TCLP Soil		Х		=	
Iron Total Soil		X		-	
Iron Water		X	_	=	
Lead TCLP Soil	✓ 1	X	8.13		\$8.13
Lead Total Soil		X	<u>.</u>	=	
Lead Water		X			Alexandria establistica
Mercury TCLP Soil		Х		=	
Mercury Total Soil		X			
Mercury Water		X		=	
Selenium TCLP Soil		X			
Selenium Total Soil		Х		=	
Selenium Water		X			
Silver TCLP Soil		Х		=	
Silver Total Soil		X			
Silver Water		X		=	
Metals TCLP Soil (a combination of all metals) RCRA		X			
Metals Total Soil (a combination of all metals) RCRA		X		=	
Metals Water (a combination of all metals) RCRA		X	BOG GARAGE		
		X		=	
		x		-	
		X		=	<u>a series de la </u>
		X			
Other	<ul> <li>Sector sector state to the state (1)</li> </ul>	<u> </u>	<ul> <li>A set of the set of</li></ul>	1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
EnCore® Sampler, purge-and-trap sampler, or equivalent	16	X	12.64	-	\$202.24
sampling device					
Sample Shipping per sampling event <sup>1</sup>	2	X	63.20	=	\$126.40

<sup>1</sup>A sampling event, at a minimum, is all samples (soil and groundwater) collected in a calendar day.

Total Analytical Costs: \$ 2,193.34

5445 Coilli TEL:	AB, INC unts Receivable Horseshce Lake Road asville, IL 62234-7425 (618) 344-1004 I: <u>AccountsReceivable@teklat</u>	HUCKS #B	INV E	INVOIC DATE: Dec 13 DATE: Jan 12 VOICE No: 20	3, 2017 , 2018	
P.O. I	e Environmental Group Drawer AB alia, IL 62801			<u>PO Number;</u>		
Attention: Russ ( Project Name: Hucks Project Contact: Marvir	#134 T1711029.A		Semples Recel Quote Num Tekleb Work Ord			
Item	Remar	ka	Qty	Unit Price	Test Total	
BTEX + MtBE, Solid, by ( Ignitability, Open Cup Paint Filter pH (1:1) TCLP Lead by ICP	JC/MS		1 1 1 1 1	\$96.00 \$36.00 \$15.00 \$15.00 \$107.00	\$96.00 \$36.00 \$15.00 \$15.00 \$107.00	98.87+8.13
			S	ubtotal: Discount: urcharge: Lharges:	\$2,69.00 0.00% 0.00% \$0.09	
Depart: Job# <u>T[1]</u> Equip#: Account#: Cost Code#:_ Approved By Date: <u>12-2</u>	5170 r: MR	34	Payment   INVOICI		\$0.00 \$269.00	

We appreciate your businessi!!!

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#### **Chase Online**

#### ANALYSIS BUS CHKG (...9729)

Check Number: 92065 Post Date: 01/16/2018 Amount of Check: \$4,009. `\ CHASE JPMorgan Chase Bank, N.A. www.Chase.com 21-13/830 92065 CHASE ENVIRONMENTAL GROUP, INC. 11450 WATTERSON CT LOUISVILLE, KENTUCKY 40299-2389 (502) 267-1455 92065 · DATE AMOUNT 1/10/2018 \*\*\*\*\*\*\*4,009.00 THE SUM OF FOUR THOUSAND NINE DOLLARS AND NO CENTS \*\*\*\*\* PAY TO THE ORDER OF Teklab, Inc 5445 Horseshoe Lake Road Collinsville, IL 62234 #092065# #083000137# 979089729#

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https://resources.chase.com/commonui/javascripts/nisi/ui/html/Print.html

# Show: Current Register | Checking Accord Checking Accord Check Register Check Register CHASE ENVIRONMENTAL GROUP, INC. 3/20/2018

Account: CHASE BANK - Chase Bank

<u>Check R Date</u> 92065 R 1/10/2018	Period Jan, 2018	Vendor Number and Name TEKLA Teklab, Inc 5445 Horseshoe Lake Road Collinsville, IL 62234	<u>Voucher</u> 12879 12880 12881 12883 Account CH/	Invoice 208434 208459 208436 208318 ASE BANK - Chase Bank	Payable/ <u>Payroll</u> 269.00 1,209.00 1,131.00 <u>1,400.00</u> <u>4,009.00</u> <u>4,009.00</u>	Retention           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00           0.00	<u>Cash</u> -269.00 -1,209.00 -1,131.00 <u>-1,400.00</u> -4,009.00 -4,009.00 -4,009.00	Discount 0.00 0.00 0.00 0.00 0.00 0.00	Workers <u>Comp.</u> 0.00 0.00 0.00 0.00 0.00 0.00 0.00
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Page 1 3/20/18 11:05 10 12:0.180227

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	PDC Laboratories, Inc.				INVOICE
Remit To:	Accounts Receivable		Invoice Nur	nber I8	000024
	PDC LABORATORIES - SPRINGFIELD				
	PO BOX 9071		Invoice Date:	Februa	гу 05, 2018
	Peoria, IL 61612-9071		Due Date:	March	07, 2018
	217.753.1148				
Invoice To:	Chase Environmental	Project:	Hucks #134		
	2701 E Ash				
	Springfield, IL 62704	PO:			
		Received:	01/24/2018		
Attn:	Matt Rives	Work Order(s):	18A0448		
Phone:	(217) 670-1916				
Quantity	Analysis/Description	Matrix	Ľ	Jnit Cost	Extended Cost
15	ASTM D2974 % Solids [5 day]	Solid		\$0.00	\$0.00
15	SW 8260B BETX+MTBE [5 day]	Solid	:	\$106.38	\$1,595.70
10	SW 8260B BETX+MTBE [5 day]	Solid		\$0.00	\$0.00

Invoice Total:

\$1,595.70

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Depart: 03	52
Job# ZT	1711029.4
Equip#:	
Account#:	5120
Cost Code#:	A
Approved By: Date:	105/18
Dater	1

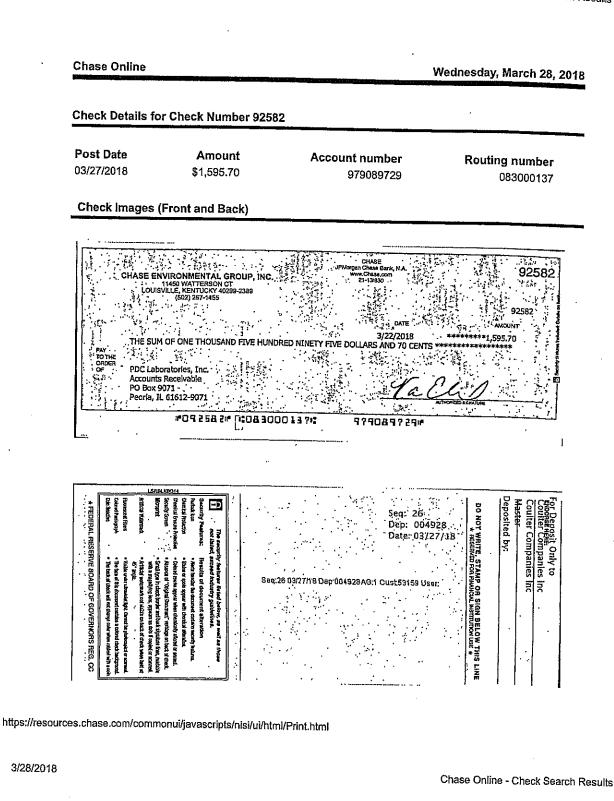
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<u>A.R. 0155</u>	_
Page 1 of 1	
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3/28/2018

Chase Online - Check Search Results



This information is provided for your convenience and does not replace your monthly account statement(s), which are the official records of your accounts and does not replace any other notice we send you. JPMorgan chase Bank, N.A. Member FDIC

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# **Remediation and Disposal Costs Form**

A. Conventional Technology

Excavation, Transportation, and Disposal of contaminated soil and/or the 4-foot backfill material removal during early action activities:

	max: 252+252 = 504	MAX 72.05		
	Number of Cubic Yards	Cost per Cubic Yard (\$)	Total Cost	-104
	382.82	72.05	\$27,582.18	25,684.79
350.24 YB\$	Backfilling the Excavation: h1ax : 312+312 = 624	1Y 350.24 x 72.05 = 25,234: Max 25.28	19+450 = 25,684.79	
ETK	Number of Cubic Yards	Cost per Cubic Yard (\$)	Total Cost	
	403.38	25.28	\$10,197.45	

#### Overburden Removal and Return:

Number of Cubic Yards	Cost per Cubic Yard (\$)	Total Cost

#### B. Alternative Technology

.

Alternative Technology Selected: $5350.24 + 72.05 =$	
350.24 + 12.	
Number of Cubic Y & = 234.79	
1251	
Total Non-Consulting	
Total Non-Consulting Total Remediation Ma Total Remediation Ma Concrete 25,684. 10	79
25,609.	uks doc
Total Cost of the Syster	EL DICASON.
Total Cost of the Syster	107 400

# **Remediation and Disposal Costs Form**

#### C. Groundwater Remediation and/or Free Product Removal System

Total Nor	-Consulting Personnel Costs Summary Sheet (\$)	
Total Rer	nediation Materials Costs Summary Sheet (\$)	
Total Cos	t of the System	

#### D. Groundwater and/or Free Product Removal and Disposal

Subpart H minimum payment amount applies.

	max.86	
Number of Gallons	Cost per Gallon (\$)	Total Cost (\$)
1,950	0.80	1,560.00

#### E. Drum Disposal

Subpart H minimum payment amount applies.

Number of Drums of Solid Waste	Cost per Drum (\$)	Total Cost (\$)
Number of Drums of Liquid Waste	Cost per Drum (\$)	Total Cost (\$)
Total Drum D	inneral Coste	
Total Drum D	isposal Costs	.00

Total Remediation and Disposal Costs:	\$39,839.63

36,837.74

755.50 755.50

Wayne County Landfill 716 Skyline Dr Marion, IL 62959

լիկիլորըպեսինենինը, հետրոկընին հերկիլըըննվերիշնիներինը հետև

CHASE ENVIRONMENTAL GROUP INC

L2RSMSDTRN 000212

418 S POPLAR ST PO DRAWER AB

CENTRALIA, IL 62801



#### INVOICE

Invoice Date Invoice No Customer No 01/31/2018 4293-000003131 4-4293-0002034

Page No Due Date

1 of 4 03/02/2018

 Current Charges
 Total Amount Due

 \$10,507.20
 \$10,507.20

#### Please Pay Total Amount Due

Billing Questions? Call 618-993-8982

Date Code Description Reference Rate Quantity Amount 06/30 **Balance** Forward 9,489.00 Approved Job# Date: Cost Code#: Account#: Equip# Depart: 08/14 Payment 090162 -9,489.00 01/18 VH SW-CONT SOIL W/FUEL 01 932968 20.00 18.58 TN 371.60 01/18 VH Reference: 13971514 01/18 VH Contract: 4293180384 B 01/18 VH SW-CONT SOIL WIFUEL 01 932969 20.00 16.20 TN  $\hat{\mathbf{x}}$ 324.00 029 01/18 VH { Reference: 13971515 01/18 VH  $\gamma$ Contract: 4293180384 VH 01/18 SW-CONT SOIL W/FUEL 01 932970 20.00 24.40 TN 488.00 È 01/18 VH Reference: 13971516 01/18 VH Contract: 4293180384 01/18 VH SW-CONT SOIL W/FUEL 01 932971 20.00 16.64 TN 332,80 01/18 VH Reference: 13971517 01/18 VH Contract: 4293180384 ACCOUNT STATUS Current 31-60 Days 61-90 Days Over 90 Days \$10,507.20 0.00 0.00 0.00 \$10,507.20 🗸 🕹 Please return this portion below with your payment. Do not attach check to stub. 🕹 🦆 Wayne County Landfill Invoice Date 01/31/2018 Invoice No. 716 Skyline Dr 4293-000003131 Marion, IL 62959 Customer No. 4-4293-0002034 REPUBL Current Charges: \$10,507.20 Total Amount Due: \$10,507.20 Please check if address has changed, and indicate change(s) on reverse side or call phone number above. Amount Paid: Please write your account number on your check and make payable to: CHASE ENVIRONMENTAL GROUP INC ┖┎┨╍┨┫╢┲╍┨╍┨╍┨╍┨╍┨┲╋╗┹┲┙┨╍╋╗╅╋╗╍┨┨┱╍┥┨┥ 418 S POPLAR ST Wayne County Landfill PO DRAWER AB Please Return PO BOX 677839 CENTRALIA, IL 62801 Payment To: DALLAS, TX 75267-7839 ۱

#### 4429300020340000000031310010507200010507200

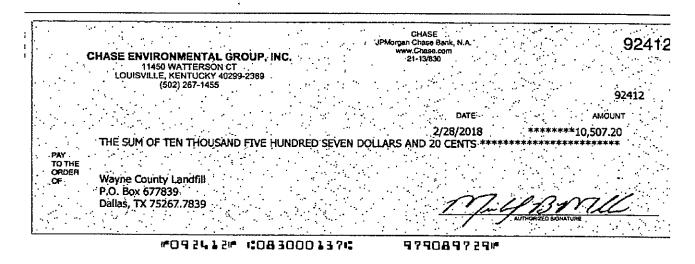
#### Chase Online

ANALYSIS BUS CHKG (...9729)

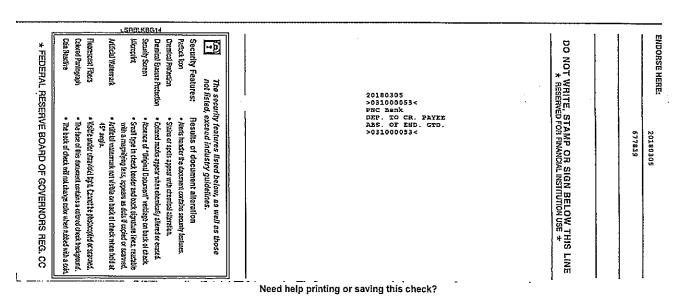
Check Number: 92412

Post Date: 03/05/2018

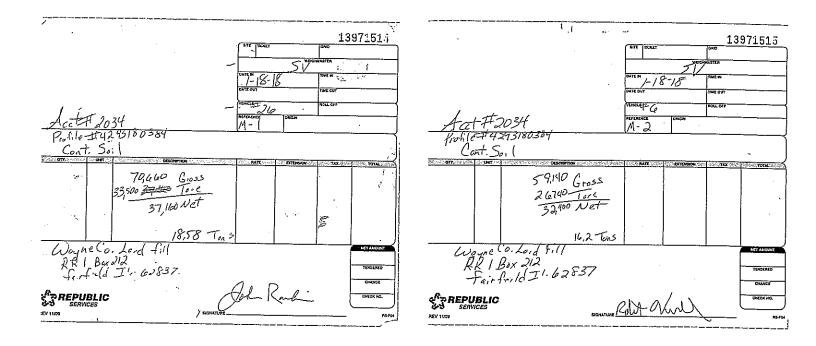
Amount of Check: \$10,507.

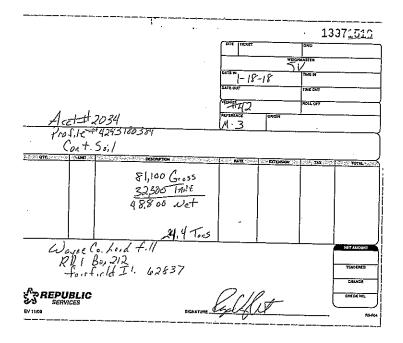


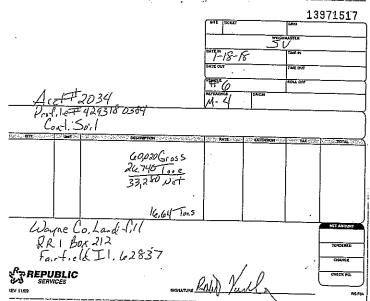
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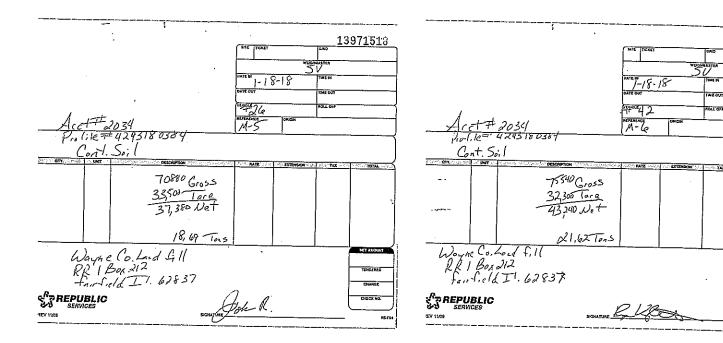
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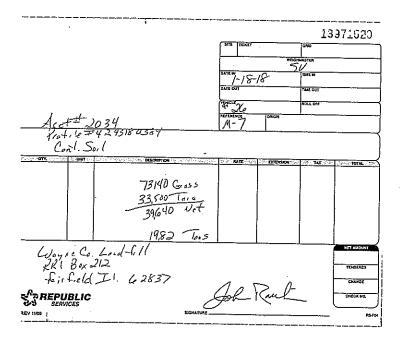


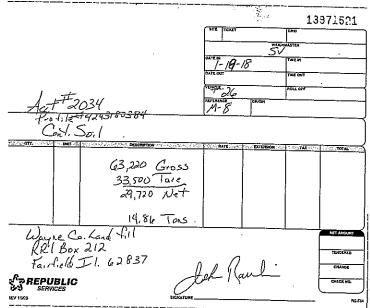




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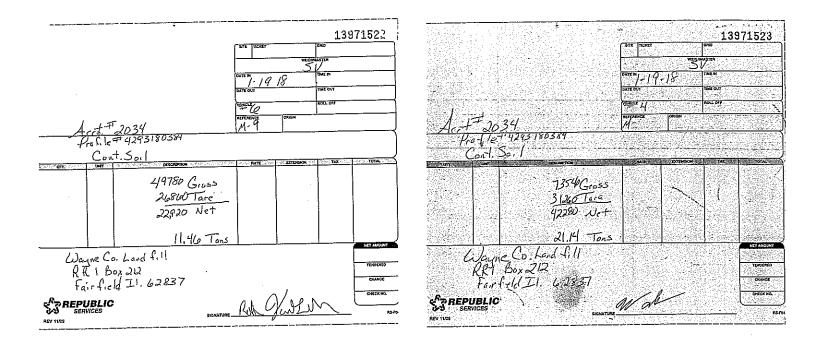




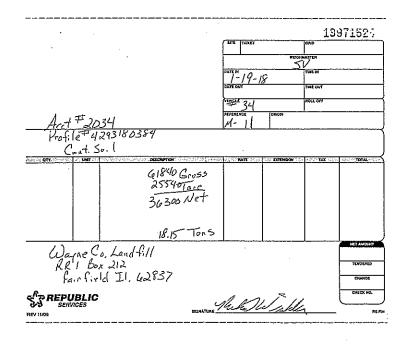
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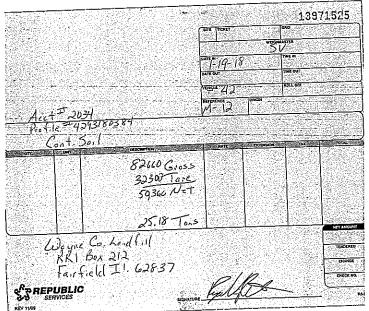
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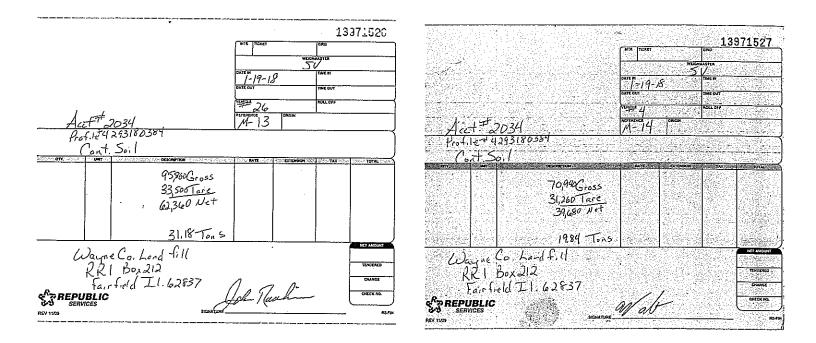
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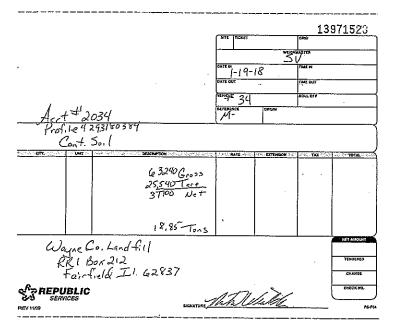


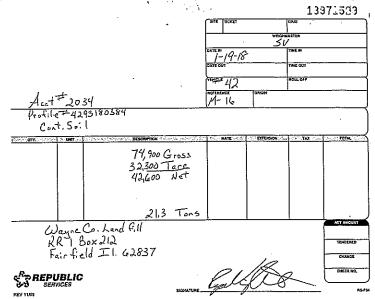
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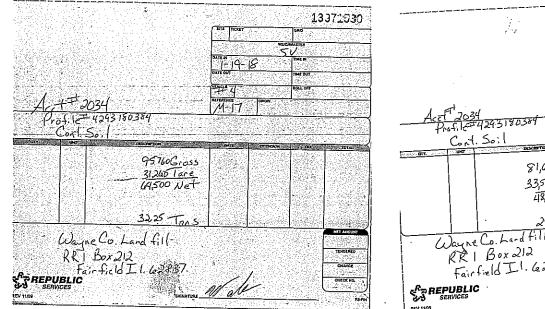


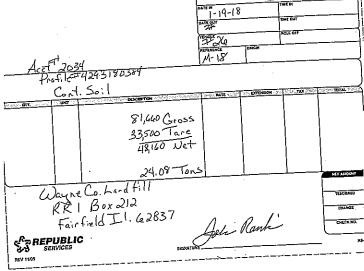




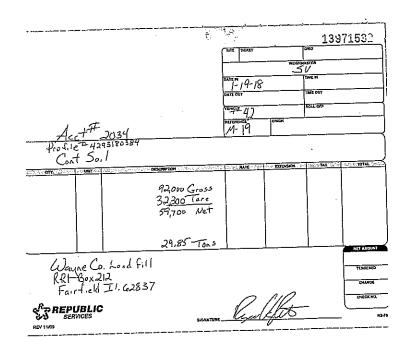
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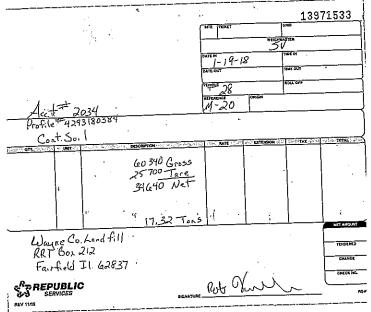
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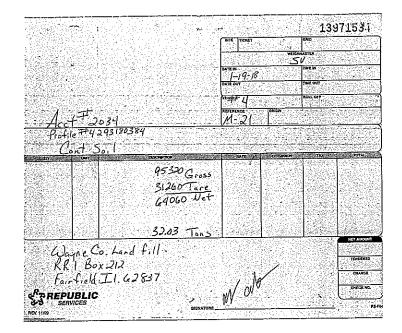


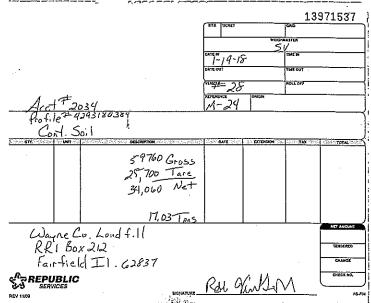


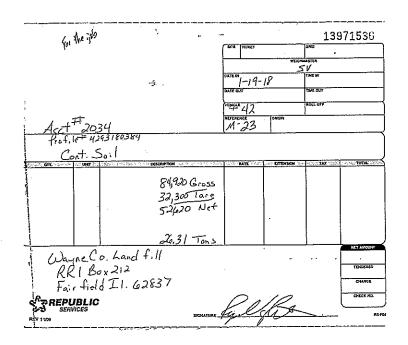
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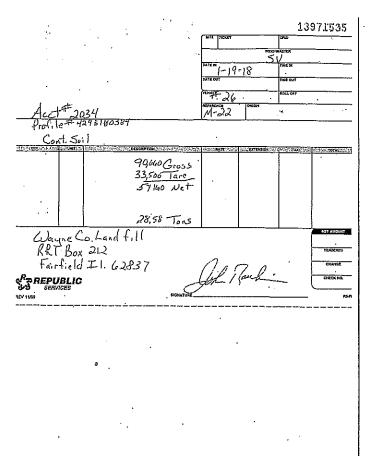












Charles H. Carter & Soling Receive	d, Charles H.2/Carter & Son, Inc.
Nº 27690 Date 1,18,18	Nº 27692 Date 1,18,16
Iob No Material Hauled Concreties	Job No Material Hauled ConCICTE
IOD Item Chase environmental	Job Item
Start TimeStop Time	Start TimeStop Time
fruck Downtime Hrs.	Truck Downtime Hrs
Total Hours	Total Hours
)rivers Name	Drivers Name
'ruck No.	Truck No.
ìross	Gross
are 263218 load 1 load	Tare 26340 load load 2
1er56300 62588	Net58000 55400
/HITE - Office 14.9₽T 18,07T ELLOW - Truck Driver	WHITE-Office 15.83T 10.4T YELLOW-Truck Driver
ompany Signature	Company Signature
59.27-1	

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584.63 - 1.5 = 389.75

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Electronic Filing: R	eceived, Clerk's Office 2/25/2021 ReceiveD 바입고공교망D 바입고공교망D
CHARLES H. CARTER & SON, INC. PO BOX 68 FAIRFIELD, IL 62837 (618) 842-2022	HUCKS # 134- INVOICE FINANCE CHARGE: 1.5% INTEREST PER MONTH WILL BE CHARGED IS DAYS AFTER DUE DATE
CHASE ENVIRONMENTAL	Depart: <u>.032</u>

GROUP,INC. 418 S.POPLAR ST. CENTRALIA, IL 62801

Depart: 00 L
Job# T1711029,A
Equip#:
Account#: 5120
Cost Code#:
Approved By: MC
Date: <u>Z-8-18</u>

Terms: Net Due 30 Days

Due Date 02/22/2018

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			Invoice Date 0	1/23/2018 LM	SIN082		Page 1 d	of I
Date	Bill of Ladine	Origin	Destination	Description	Quantity	aUn (a	Unit Rate	Amount
01/18/2018	13971514	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	18.58	TON	9.5000	176.51
01/18/2018	13971515	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	16.20	TON	9.5000	153.90
01/18/2018	13971516	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	24.40	TON	9.5000	231.80
01/18/2018	13971517	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	16.64	TON	9.5000	158.08
01/18/2018	13971518	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	18.69	TON	9.5000	177.56
01/18/2018	13971519	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	21.62	TON	9.5000	205.39
01/18/2018	13971520	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	19.82	TON	9.5000	188.29
01/19/2018	13971520	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	31.18	TON	9.5000	296.21
01/19/2018	13971521	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	14.86	TON	9.5000	141.17
ò1/19/2018	13971522	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	11.46	TON	9.5000	108.87
01/19/2018	13971523	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	21.14	TON	9.5000	200.83
01/19/2018	13971524	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	18.15	TON	9.5000	172.43
01/19/2018	13971525	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	25.18	TON	9.5000	239.21
01/19/2018	13971527	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	19.84	TON	9.5000	188.48
01/19/2018	13971528	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	18.85	TON	9.5000	179.08
01/19/2018	13971529	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	21.30	TON	9.5000	202.35
01/19/2018	13971530	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	32.25	TON	9.5000	306.38
01/19/2018	13971531	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	24.08	TON	9.5000	228.76
01/19/2018	13971532	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	29.85	TON	9.5000	283.58
01/19/2018	13971533	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	17.32	TON	9.5000	164.54
01/19/2018	13971534	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	32.03	TON	9.5000	304.29
01/19/2018	13971535	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	28.58	TON	9.5000	271.51
01/19/2018	13971536	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	26.31	TON	9.5000	249.95
01/19/2018	13971537	HUCK'S/MT VERNON, IL	WAYNE COUNTY LAND	HAUL CONTAMINATED D	17.03	TON	9.5000	161.79
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THANK YOU FOR YOUR BUSINESS.

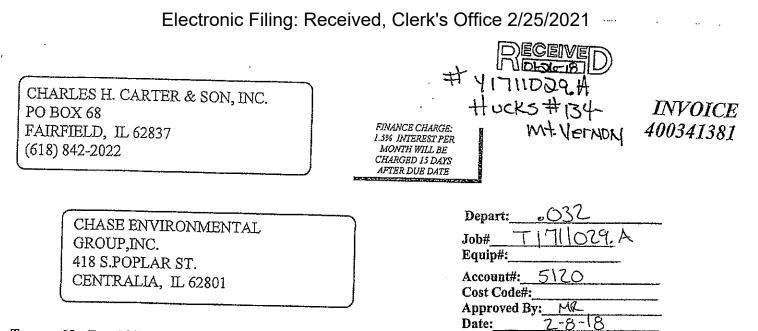
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Total Quantity 525.36

\$4,990.96

Amount Due

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#### Terms: Net Due 30 Days

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	Bill of Lading			2 01/23/2018	LMSIN082	Page 1 of 1
/18/2018 /18/2018	27689 ~ CONCRETE 27693	MT.VERNON, IL MT.VERNON, IL	MT. VERNON, IL MT. VERNON, IL	HOURS HOURS HOURS	Quantity atini	L Unit Rate Amou 120.0000 210.0
19/2018	27699	MT.VERNON, IL	MT.VERNON, IL	HOURS	1.00 HF 1.00 HF	

THANK YOU FOD YOUD DUOD DIO	Due Date 02/22/2018	Total Quantity $3.75$ V	Amount Due	\$450.00
LILANA TOUFOR TOUR BUSINESS.		THANK YOU FOR YOU	JR BUSINESS.	

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#### **Chase Online**

#### ANALYSIS BUS CHKG (...9729)

Post Date: 02/27/2018 Check Number: 92313 Amount of Check: \$5,440. CHASE JPMorgan Chase Bank, N.A. www.Chaso.com 21-13/830 92313 CHASE ENVIRONMENTAL GROUP, INC. 11450 WATTERSON CT LOUISVILLE, KENTUCKY 40299-2389 (502) 267-1455 92313 AMOUNT ... DATE 2/21/2018 \*\*\*\* \*5,440.96 THE SUM OF FIVE THOUSAND FOUR HUNDRED FORTY DOLLARS AND 96 CENTS PAY TO THE ORDER Charles H. Carter & Sons, Inc. 7 Williamson Drive ÔF P.O. Box 68 Fairfield, IL 62837

#092313# #08300013?# 979089729#

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https://resources.chase.com/commonui/javascripts/nisi/ui/html/Print.html

CHARLES H. CARTER & SON, INC. PO BOX 68 FAIRFIELD, IL 62837 (618) 842-2022

FINANCE CHARGE: 1.5% INTEREST PER MONTH WILL BE CHARGED 15 DAYS AFTER DUE DATE

*INVOICE* 400341407

MARTIN & BAYLEY 928 CO. RD. 1350 N CARMI, IL 62821

#### Terms: Net Due 30 Days

			Invoice Date 0	1/23/2018 L	MSIN082	Page 1 of 1
Date	BillottEading	Origin	Destination	Description	<ul> <li>Quantity Unit</li> </ul>	Unit Rate Amount
01/19/2018	20736	CARTER YARD	MT.VERNON, IL	CA16 Chips Sales Tax	26.05 TO	1
01/19/2018	24828	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	27.00 TOP	1 19.7500 533.25
01/19/2018	27698	CARTER YARD	MT. VERNON, IL	CA16 Chips	20.25 TOP	
01/19/2018	29051	CARTER YARD	MT, VERNON, IL	Sales Tax CA16 Chips	26.33 TOM	
				Sales Tax		0.0700 29.03
					99.63 - 1	5=66.47
				۰,		

Due Date 02/22/2018	Total Quantity 99.63	Amount Due	\$2,077.55
	THANK YOU FOR YOUR BUSINESS.		

CHARLES H. CARTER & SON, INC. PO BOX 68 FAIRFIELD, IL 62837 (618) 842-2022

FINANCE CHARGE: 1.5% INTEREST PER MONTH WILL BE CHARGED 15 DAYS AFTER DUR DATE

MARTIN & BAYLEY 928 CO. RD. 1350 N CARMI, IL 62821

#### Terms: Net Due 30 Days

			Invoice Date 0	1/30/2018	LMSIN082		Page I a	of 2
Date	Billiof Ladings 2005	Origin	Destination	Description	Quantity	Unit	Unit Rate	Amount
01/22/2018	220814	HASTIE MINING COMPAT	MT.VERNON, IL	CA16 Chips Sales Tax	23.64	TON	19.7500 0.0700	466.89 16.13
01/22/2018	29052	CARTER YARD	MT.VERNON, IL	CA16 Chips Sales Tax	26.47	TON	19.7500 0.0700	522,78 29,18
01/22/2018	29053	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	24.88	TON	19,7500 0,0700	491.38 27.43
01/22/2018	29054	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	26.29	TON	19.7500 <u>.</u> 0.0700	519.23 28.98
01/22/2018	29130	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	19.21	TON	19.7500 0.0700	379.40 21.18
01/22/2018	29131	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	20.17	TON	19.7500 0.0700	398.36 22.24
01/22/2018	29132	CARTER YARD	MT.VERNON, IL	CA16 Chips Sales Tax	21.46	TON	19.7500 0.0700	423,84 23,66
01/22/2018	29133	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	19.60	TON	19.7500 0.0700	387.10 21.61
01/22/2018	29134	CARTER YARD	MT.VERNON, IL	CA16 Chips Sales Tax	20.33	TON	19.7500	401.52
01/22/2018	29921	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	18.73	TON	19.7500 0.0700	369.92 20.65
01/22/2018	29922	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	17.84	TON	19.7500	352.34 19.67
01/22/2018	29923	CARTER YARD	MT.VERNON, II.	CA16 Chips Sales Tax	19.36	TOŅ	19.7500 0.0700	382.36
01/22/2018	29924	CARTER YARD	MT.VERNON, IL	CA16 Chips Sales Tax	17.21	TON	19.7500	21.34 339.90
01/22/2018	29925	CARTER YARD	MT. VERNON, IL	CA16 Chips	21.11	TON	0.0700	18.97 416.92
01/22/2018	30256	CARTER YARD	MT.VERNON, IL	Sales Tax CA16 Chips Sales Tax	18.72	TON	0.0700 19.7500 0.0700	23.27 369.72

**INVOICE** 

400341454

# **INVOICE** 400341454

						40034	-1434
			Invoice Date	01/30/2018	LMSIN082	Page 2 d	pf2
Date	Bill of Lading	Origin	Destinution	Description	Constitutive Wi	nit Unitara	Autount
01/22/2018	30257	CARTER YARD	MT.VERNON, IL	CA16 Chips Sales Tax	18.26 T	ON 19.7500 0.0700	360.64 20.13
01/22/2018	30258	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	16.71 T	ON 19.7500 0.0700	330.02 18.42
01/22/2018	30259	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	17.72 T	ON 19.7500 0.0700	349.97 19.54
01/22/2018	30260	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	. 18.45 T	ON 19.7500 0.0700	364.39 20.34
01/22/2018	30301	CARTER YARD	MT.VERNON, IL	CA16 Chips Sales Tax	14.39 To	ON 19.9500 0.0700	287.08
01/22/2018	30302	CARTER YARD	MT.VERNON, IL	CA16 Chips Sales Tax	14.58 '14	ON 19.9500 0.0700	290.87 16.28
01/22/2018	30303	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	14.83 T	ON 19.9500 0.0700	295.86 16.56
01/22/2018	30304	CARTER YARD	MT. VERNON, IL	CA16 Chips Sales Tax	15.13 TO	ON 19.9500 0.0700	301.84 16.89
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					Ra	16.73	
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Due Date 03/01/2018

Total Quantity 445.09

Amount Due

\$9,283.92

THANK YOU FOR YOUR BUSINESS.

CHARLES H. CARTER & SON, INC. PO BOX 68 FAIRFIELD, IL 62837 (618) 842-2022

FINANCE CHARGE: 1.5% INTEREST PER MONTH WILL BE CHARGED 15 DAYS AFTER DUE DATE

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*INVOICE* 400341455

MARTIN & BAYLEY 928 CO. RD. 1350 N CARMI, IL 62821

#### Terms: Net Due 30 Days

·			Invoice Date 0		MSIN082	Page 1 of 1
Date	Billfof/Lading	Origin et al.	Destination	Description	Quantity (	Juil UnitRate Amoun
01/22/2018	29135	CARTER YARD	MT.VERNON, IL	CA6 Road Pack Sales Tax	20.61	TON 19.7500 407.0 0.0700 22.7
01/22/2018	29927	CARTER YARD	MT.VERNON, IL	CA6 Road Pack Sales Tax	19.44 1	TON 19.7500 383.9 0.0700 21.4
01/22/2018	30261	CARTER YARD	MT. VERNON, IL	CA6 Road Pack Sales Tax	20.00	TON 19.7500 395.00 0.0700 22.03
						40.03
				L	,0.05 -	1.5= 40.03
				66.42		
				296.73		
				40.03		
				403.18		

Due Date 03/01/2018	Total Quantity 60.05	Amount Due	\$1,252.19
	THANK YOU FOR YOUR BUSINESS.		

Ele	ectronic Filing: Received,	Clerk's Office 2/25/20	21
Charles H. Carter & Son, Inc.	ctronic Filing: Received, Charles H. Carter & Son, Inc.	Charles H. Carter & Son, Inc.	Charles H. Carter & Son, Inc.
Nº- 29132 Due 1, ZZ, 18	Nº 33258 De 12,22,18	Nº 29054	Nº 20303 pite 1, 22, 18
is Job No Material Fauled CLPS	Job HaMaterial Havied Chips	Job NoMaterial Hauled <u>C 9 16</u>	Job No Material Handred C.A. 16
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m 25000	100 10n	Tom 30840	Te 26,400
Na 42920 (21:46)	33420 1471	на 52590 2629	15,137
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Charles H. Carter & Son, Inc.	Charles H. Carter & Son, Inc
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THE <u>25000</u>	26 5000
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	Electro	nic Fi	ling: R	eceiv	/ed,	Clerk's Office 2/25/20	21
	Hastie Mining & Trucking	STE		: 220814 1/22/2018		Charles H. Carter & Son, Inc.	Luaries H. Carter & Son, Inc.
	RR1 Box 55 Cave in Rock IL, 62919 Phone: (616) 229-4536		-	ocation: -1 ; 50692-04		随 37257 <u>1.22.18</u>	Nº 29131 Des 1,22,18
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Charles H. Carter & Son, Inc.	Charles H. Carter & Son, Inc.
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Electronic Filing: Received, Clerk's Office 2/25/2021					
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varter & Son, Inc.
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Electronic Filing: Received, Clerk's Office 2/25/2021					
Charles H. Carter & Son, Inc.	Charles H. Carter & Son, Inc.	Charles H. Carter & Son, Inc.	Charles H. Carter & Son, Inc.		
№ 29134 par 1,22,18	NE 20304 <u>- 1', 22, 18</u>	№ 29925 Due 1-1, 22, 2018	Nº 07269 Date 122,18		
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# NON-HAZARDOUS WASTE MANIFEST

ease print or type (Form designed for use on elite	(12 pitch) typewriter)			· · · · · · · · · · · · · · · · · · ·		L
NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No	<b>.</b>		Manifest Document No	213913	2. Page 1 of 문
3. Generator's Name and Mailing Address						· - •
$\leq \langle M \rangle \ \square \square \square \square \square \square \square \square \square \square$	MT. VERNON,	jl.			•	
4. Génerator's Phone ( )					······································	
T ZEDOT AASEDMAA DEG		US EPA ID Number		A. State Tran		575-4801
7. Transporter 2 Company Name	8.	US EPA ID Number		B. Transporte C. State Tran		
	-			D. Transporte		
9. Designated Facility Name and Site Address FIRST AMERICAN REC	OVERY 10.	US EPA ID Number		E. State Facil	ity's ID	
535 THEOBOLD LN. PADUCAH, KY 42003	1	KYR00004934	6	F. Facility's P	hone	· · · · · · · · · · · · · · · · · · ·
	I		· 12. C	Intainers	13. Total	14. Unit
11. WASTE DESCRIPTION			No.	Туре	Quantity	Wt./Vol,
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G. Additional Descriptions for Materials Listed Ab						
NOT REGULATED BY	US DOT					
15. Special Handling Instructions and Additional I	nformation					
EMERGENCY RESPO	NSE PHONE 888	-408-4801				
				1 🗐 .		
16. GENERATOR'S CERTIFICATION: I hereby in proper condition for transport. The material	certify that the contents of this ship s described on this manifest are n	oment are fully and accurately de lot subject to federal hazardous w	scribed and are in aste regulations.	all respects	· · · · · · · · · · · · · · · · · · ·	
		······	-			Date
Rinted/Typed Name	Contract of the Contract, May Service States of the Service	Signature MaH	heis R	1×es	Mo	nth Day Yea   9  19
	of Materials		71			Date
17. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name 18. Transporter 2 Acknowledgement of Receipt of Printed/Typed Name	Koick	Signature	20)	1-	Mo	nth Pay Yea
18. Transporter 2 Acknowledgement of Receipt &	if Materials	<u> </u>			<u> </u>	Date
Printed/Typed Name		Signature	4		Ма	nth Day Yea
19. Discrepancy Indication Space					<u></u>	1
20. Facility Owner or Operator; Certification of re	ceipt of the waste materials cover	ed by this manifest, except as no	ted in item 19.		· · · · · · · · · · · · · · · · · · ·	
Printed/Typed Name		Signature				Date nth Day Yea
						0179

**NON-HAZARDOUS WASTE** 

First American Recover	y & Recycle
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P.O. Box 7644 Paducah, KY 42002

> Phone # 270-575-4801 or 888-408-4801 Fax # 270-575-0344

Statement

Date

1/31/2018

To: ·

Chase Environmental (Springfield) 2701 East Ash Springfield, IL 62703 Attn: Matt Rives

Depart: 032
Job# 41 709015. A (\$ 944.50) T1711029. A (\$ 955.50)
Equip#:
Account#:
Cost Code#: <u>5/60</u>
Approved By: MK
Date: <u>2-8-18</u>

Terms	Due Date	P.O. #	Account #	Amount Due	Amount Enc.
	1/31/2018			\$1,900.00	· · · · · · · · · · · · · · · · · · ·
Date		Transaction Amount		Amount	Balance
01/19/2018	INV #213913. Due Oily Water, 1,95	01/19/2018. Orig. Amo	unt \$955.50.	955.50	955.50
01/29/2018	INV #213860. Due ( Oily Water, 1,45) Services, 1 @ \$8	01/29/2018. Orig. Amo 0 @ \$0.59 = 855.50	unt \$944.50.	944.50	1,900.00
			, , , , , , , , , , , , , , , , , , ,		
CURRENT	1-30 DAYS PAST	31-60 DAYS PAS DUE	ST 61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	Amount Due
0.00	1,900.00	0.00	0.00	0.00	\$1,900.00

# Show: Current Register | Checking Accordente Chargenie Filings: Received, Clerk's Office 2/25/2021 Check Register CHASE ENVIRONMENTAL GROUP, INC. 4/4/2018

Account: CHASE BANK - Chase Bank

<u>Check R Date</u> 92323 R 2/21/2018	<u>Period</u> Feb, 2018	<u>lumber and Name</u> First American Recovery & Recy P O Box 7644 Paducah, KY 42002	<u>Voucher</u> 13694 13728	<u>Invoice</u> 213913/213860 213856.A	Payable/ <u>Payroll</u> 1,900.00 <u>16.00</u> 1,916.00	<u>Retention</u> 0.00 <u>0.00</u> 0.00	<u>Cash</u> -1,900.00 -16.00 -1,916.00	<u>Discount</u> 0.00 <u>0.00</u> 0.00	Workers <u>Comp.</u> 0.00 <u>0.00</u> 0.00
			Account CH	ASE BANK - Chase Bank	1,916.00 1,916.00	0.00	-1,916.00 -1,916.00	0.00	0.00

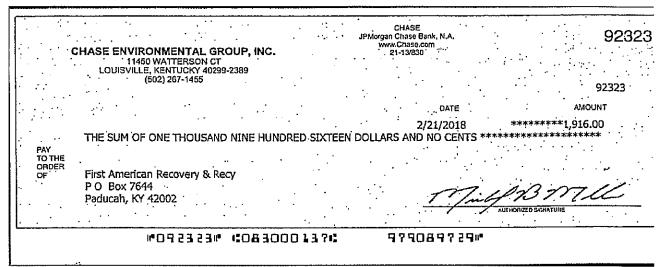
#### Chase Online

ANALYSIS BUS CHKG (...9729)

Check Number: 92323

Post Date: 02/26/2018

Amount of Check: \$1,916.



Need help printing or saving this check?

Parezent Faits         •15           Caleral Paragona         •16           Cua Restrice         • 16           Cua Restrice         • 16           + FEDERAL RESERVE	Lished Karon	2/26/2018 0005 0047 MMUNDY1 472	ENDORSE HERE:
	security facture issee below, as woll as those field, exceed below, as woll as those field, exceed belowing guidelines. *** Results do chament charact *Auto harder the coment charact a stantan **** and the coment charact a stantan *********************************	472	ERE: PAY TO THE ORGER OF THE PADUCAN BANK AND TRUST COMPANY FOR DECOMPANY FOR DECOMPANY FIRST TAMERICAN FIRST TAMERICAN ECCURERY AND RECOMP OR SIGN BELOW THIS LINE RESERVED FOR FINANCIAL INSTITUTION USE *

Need help printing or saving this check?

© 2018 JPMorgan Chase & Co.

## **UST Removal and Abandonment Costs Form**

Product Stored in UST	Size (gallons)	Abandoned or Removed	Cost (\$)	Did UST have a release?
Gasoline	10,000	Removed	3,981.75	Yes 🛛 No 🗌
Gasoline	10,000	Removed	3,981.75	Yes 🛛 No 🗌
				Yes 🗌 No 🔀
				Yes 🗌 No 🗌
				Yes 🗌 No 🗌
				Yes 🗌 No 🛄
				Yes 🔲 No 🗌
· · · · · · · · · · · · · · · · · · ·				Yes 🗌 No 🛄
				Yes 🗌 No 🗍
				Yes 🗌 No 🗌
				Yes 🗌 No 🗍
				Yes 🗌 No 🗌
				Yes 🗌 No 🗍
			<u>n an an an an an Anna Anna</u>	Yes 🗌 No 🗌
				Yes 🗌 No 🗍
<u>n na hina na h</u> i	<u>, e si e ti distinctation</u>	<u>, the state of the second s</u>	perunu provinser ripeli to Geogle	Yes No
				Yes 🗌 No 🗍

Total UST Removal and Abandonment Costs: \$7,963.50

# **Consulting Personnel Costs Form**

Employee Name		Personnel Title	Hours	Rate* (\$)	Total Cost
Remediation Category		Task	••••••••••••••••••••••••••••••••••••••		
			······		
Matthew Rives (MR)	1	Senior Project Manager	8.00	126.40	\$1,011.20
EA-SB-Field	Drilling realease	& waste confirmation / analytical re	eview/ Map site a	and Utilities/ field	Inotes
Alan Curtiss (AC)		Geologist III	4.50	111.24	\$500.58
EA-SB-Field	Drilling release,	borleog, sample collection			
MR		Senior Project Manager	18.00	126.40	\$2,275.20
UST-OT	OSFM/ EA Sche	duling, Landfill forms and approval	, Manifests, Tan	k pull prep	
		L	·	J	
MR		Senior Project Manager	53.00	126.40	\$6,699.20
UST-OS	Oversite of UST	removal,excavation and backfill / c	locumentation c	ollection/ Daily n	otes
Duane Doty (DD)		Geologist III	37.50	111.24	\$4,171.50
UST-OS	Oversite of UST	excavation and backfill / EA Samp	le collection/ ph	otos	
DD		Senior Project Manager	4,00	126.40	\$505.60
45-Day	Document field	activites; EA map, Logs, photo, Fie	ld notes		
MR		Senior Project Manager	20.00	126.40	\$2,528.00
45-Day	EA totals and in	voice review; 45 day report comple	tion; OSFM corr	respondence	
				145	

Employee Name		P	ersonnel Title	Hou	rs Rate	* (\$)	Total Cost
Remediation Category			Та	isk			
					<u> </u>		<u> </u>
MR		Senior P	of. Engineer	2.0	0	164.33	\$328.66
20-Day	20 Day Cert						
Brandon Maus (BM)		Project N	lanager	16.5	50	113.76	\$1,877.04
45-Day	Analytical table a	& 45 day r	eport development/	Swap Data			
		1					
MR AND		Senior D	raftperson/CAD	6.0	0	75.83	\$454.98
45-Day	Draft site and 45	i day maps	<b>.</b>				
		[			1		
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		<u> </u>					
			- <u>.</u>				
en el seguera de seguera.							
			· .				
en de la contra de En la contra de la c	n for each ann an Arland Tarland an Arland an Arland Tarland an Arland						
				24.50	<u> </u>		
*Refer to the applicable Maximum	Payment Amou	ints docu	ment.	(169.	50/		
			Total of Consu	ulting Perso	nnel Costs		\$20,351.96

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Waste Management • Remediation • Drilling Services

Personnel Work Sheet

Project: Mt. Vernon Hucks #134 Stage: Early Action Incident #: 2017-1116

	I	1	(			Billing	Period		
Project Name	Employee Name	Personnel Title	Work Date	in	Out	From	То	Day of Week	Hours Worked
Huck's #134	Alan Curtiss	Geologist III	12/05/17	7:00	11:30	12/3/2017	12/9/2017	Tuesday	4.50
Hucks #134	Duane Doty	Sr. Project Manager	12/05/17	8:00	9:00	12/3/2017	12/9/2017	Tuesday	1.00
(Jefferson	Brandon Maus	Operator	12/05/17	9:30	11:30	12/3/2017	12/9/2017	Tuesday	2.00
Hucks #134	Matthew Rives	Sr. Project Manager	12/05/17	7:00	11:30	12/3/2017	12/9/2017	Tuesday	4.50
Hucks #134	Duane Doty	Sr. Project Manager	12/06/17	6:00	6:30		12/9/2017	Wednesday	0.50
Hucks #134	Duane Doty	Sr. Project Manager	12/07/17	8:00	8:30	12/3/2017	12/9/2017	Thursday	0.50
Hucks #134	Brandon Maus	Project Manager	12/11/17	9:00	9:30	12/10/2017	12/16/2017	Monday	0.50
Hucks #134	Duane Doty	Sr. Project Manager	12/13/17	10:00	11:00	12/10/2017	12/16/2017	Wednesday	1.00
Hucks 134	Matthew Rives	Sr. Draftsperson/CAD	12/14/17	14:00	16:00	12/10/2017	12/16/2017	Thursday	2.00
Hucks 134	Matthew Rives	Sr. Project Manager	12/14/17	16:00	18:00	12/10/2017	12/16/2017	Thursday	2.00
Huck #134	Matthew Rives	Sr. Project Manager	12/18/17	16:00	17:00	12/17/2017	12/23/2017	Monday	1.00
Huck #134	Matthew Rives	Sr. Professional Enginee	12/21/17	14:00	16:00	12/17/2017	12/23/2017	Thursday	2.00
Hucks 134	Matthew Rives	Sr. Project Manager	01/02/18	8:00		12/31/2017	1/6/2018	Tuesday	4.00
Hucks 134	Matthew Rives	Sr. Project Manager	01/02/18	13:00		12/31/2017	1/6/2018	Tuesday	4.00
Huck's #134	Brandon Maus	Project Manager	01/04/18	8:00		12/31/2017	1/6/2018	Thursday	4.00
Huck's #134	Brandon Maus	Project Manager	01/04/18	13:00		12/31/2017	1/6/2018	Thursday	4.00
Hucks 134	Matthew Rives	Sr. Project Manager	01/04/18	7:00		12/31/2017	1/6/2018	Thursday	5.00
Hucks 134	Matthew Rives	Sr. Project Manager	01/05/18	7:00		12/31/2017	1/6/2018	Friday	4.00
Hucks 134	Matthew Rives	Sr. Project Manager	01/05/18	14:00		12/31/2017	1/6/2018	Friday	5.00
Huck's #134	Brandon Maus	Project Manager	01/08/18	10:00	12:30	<u> </u>	1/13/2018	Monday	2.50
Hucks #134	Matthew Rives	Sr. Project Manager	01/09/18	7:00	12:00	[	1/13/2018	Tuesday	5.00
Hucks #134	Matthew Rives	Sr. Project Manager	01/09/18	12:30	17:30		1/13/2018	Tuesday	5.00
Huck's #134	Brandon Maus	Laborer	01/11/18	8:00	10:00	í	1/13/2018	Thursday	2.00
(Jefferson	Brandon Maus	Laborer	01/15/18	9:00	11:30		1/20/2018	Monday	2.50
(Jefferson	Brandon Maus	Laborer	01/15/18	12:00	16:30	1	1/20/2018	Monday	4.50
(Jefferson	Brandon Maus	Laborer	01/15/18	16:30	18:00		1/20/2018	Monday	1.50
Hucks #134	Duane Doty	Geologist III	01/16/18	8:00	13:00		1/20/2018	Tuesday	· 5.00
(Jefferson	Brandon Maus	Laborer	01/16/18	7:00	11:00	<u> </u>	1/20/2018	Tuesday	4.00
(Jefferson	Brandon Maus	Laborer	01/16/18	11:30	15:30	<u> </u>	1/20/2018	Tuesday	4.00
Hucks #134	Matthew Rives	Sr. Project Manager	01/16/18	5:30	16:00		1/20/2018	Tuesday	10.50
Hucks #134	Duane Doty	Geologist III	01/17/18	8:00	12:00		1/20/2018	Wednesday	4.00
(Jefferson	Brandon Maus	Laborer	01/17/18	8:00	11:00		1/20/2018	Wednesday	3.00
(Jefferson	Brandon Maus	Laborer	01/17/18		17:00	to the state of th	1/20/2018	Wednesday	5.00
Hucks #134	Matthew Rives	Sr. Project Manager	01/17/18	1	17:30		1/20/2018	Wednesday	9.50
Hucks #134	Duane Doty	Geologist III	01/18/18		17:30		1/20/2018	Thursday	9.50
(Jefferson	Brandon Maus	Laborer	01/18/18		12:00		1/20/2018	Thursday	4.00
(Jefferson	Brandon Maus	Laborer	01/18/18		16:30	1 · · ·	1/20/2018	Thursday	4.00
(Jefferson	Brandon Maus	Laborer	01/18/18			1/14/2018	1/20/2018	Thursday	0.50
Hucks #134	Matthew Rives	Sr. Project Manager	01/18/18	1	17:30	1	1/20/2018	Thursday	9.50
Hucks #134	Duane Doty	Geologist III	01/19/18	1			1/20/2018	Friday	9.50
(Jefferson	Brandon Maus	Laborer	01/19/18				1/20/2018	Friday	4.50
(Jefferson	Brandon Maus	Laborer	01/19/18	1			1/20/2018	Friday	3.50
Huck's #134	Brandon Maus	Laborer	01/19/18				1/20/2018	Friday	2.50
Hucks #134	Matthew Rives	Sr. Project Manager	01/19/18	<u>+</u>			1/20/2018	Friday	10.50
Hucks #134	Matthew Rives	Sr. Project Manager	01/19/18				1/20/2018	Saturday	5.00
Huck's #134	Brandon Maus	Laborer	01/13/18	1		t · · ·	1/20/2018	Monday	2.50
(Jefferson	Brandon Maus	Laborer	01/22/18		[	- <u>-</u>	1/27/2018	Monday	3.50
(Jefferson	Brandon Maus	Laborer	01/22/18			T	1/27/2018		1.50
(Jefferson	Brandon Maus	Laborer	01/22/18				1/27/2018		3.50
Hucks #134		· · · · · · · · · · · · · · · · · · ·			1	- ,	<u> </u>	Monday	<del> </del>
Hucks #134 Hucks #134	Duane Doty Motthew Biyee	Geologist III	01/22/18				1/27/2018		9.50
110685 #104	Matthew Rives	Sr. Project Manager	01/22/18	6:00	17:00	1/21/2018	1/27/2018	Monday	11.00

(ONS PCIS 155.50 17012 - R. 9486 58.50



Waste Management - Remediation + Drilling Services

Personnel Work Sheet Project: Mt. Vernon Hucks #134 Stage: Early Action Incident #: 2017-1116

						Billing	Period		
Project Name	Employee Name	Personnel Title	Work Date	ĺn	Out	From	То	Day of Week	Hours Worked
(Jefferson	Brandon Maus	Laborer	01/23/18	8:00	10:00	1/21/2018	1/27/2018	Tuesday	2.00
Hucks #134	Duane Doty	Sr. Project Manager	01/23/18	8:00	9:00	1/21/2018	1/27/2018	Tuesday	1.00
Hucks #134	Matthew Rives	Sr. Project Manager	01/23/18	8:00	10:00	1/21/2018	1/27/2018	Tuesday	2.00
Huck's #134	Brandon Maus	Project Manager	01/24/18	10:30	12:00	1/21/2018	1/27/2018	Wednesday	1.50
Huck's #134	Brandon Maus	Project Manager	01/24/18	13:00	17:00	1/21/2018	1/27/2018	Wednesday	4.00
Hucks #134	Matthew Rives	Sr. Project Manager	01/24/18	8:00	11:00	1/21/2018	1/27/2018	Wednesday	3.00
Hucks #134	Matthew Rives	Sr. Project Manager	01/24/18	11:00	12:00	1/21/2018	1/27/2018	Wednesday	1.00
Hucks #134	Matthew Rives	Sr. Project Manager	01/26/18	13:00	16:30	1/21/2018	1/27/2018	Saturday	3.50

conspers 16.00

2.00 noncons

Conspers 171.50 non cons 60.5 60.50

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# **Consultant's Materials Costs Form**

Materials, Equipment,	or Field Purchase	Time or Amount Used	Rate (\$)	Unit	Total Cost			
Remediation Category		Description/Justification						
Daily sampling supplies		5.00	25.00	day	\$125.00			
EA-SB-Field	Gloves, baggies, camera	, wheel, etc.						
Hotel		104.40	4.00	night	\$417.60			
UST-OS	Hotel 1/16,	1/17, 1/18, 11-	22					
Per Diem		40.00	4.00	day	\$160.00			
UST-OS	Per Diem							
Photoionization Detector		5.00	85.00	day	\$425.00			
EA-SB-Field	screening of soil samples	3						
		0.00	7.50					
Postage 45-Day	Report and forms postag	3.00 e	7.50		\$22.50			
-	·	· · · · · ·						
Copies		1.00	30.00	LS	\$30.00			
45-Day	copies of report client an	d EPA (2)						
	i e stanto ta ta sebela bellati a contat. T	,,,,,,,						
		· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·			
Mileage		1,150.00	.54	Mile	\$621.00			
UST-OS	Round trips to site from S	Springfield 100Ks	ike-travel in	2018-3 5	sy.s #/mile			
					·			
					/			
	Г	Total of Consulta	nt Materials Co	its	\$1,801.10			

#### FW: Your CLC Stay @ DRURY INN From 01/22/2018 To 01/23/2018

From: "Mark Rust" <mrust@chaseenv.com> Date: 01/24/2018 08:37 To: "Matthew Rives" <mrives@chaseenv.com>

Mark T. Rust Chase Environmental Group, Inc. 270-488-2584 270-210-3230 Mobile

From: <u>checkinncard@clclodging.com</u> [mailto:<u>checkinncard@clclodging.com</u>] Sent: Tuesday, January 23, 2018 8:01 PM To: <u>MRUST@CHASEENV.COM</u> Subject: Your CLC Stay @ DRURY INN From 01/22/2018 To 01/23/2018

Dear MATT RIVES,

This is to confirm that the amount below has been charged to your registered credit/debit card ending in 2755 on <u>01/23/2018</u>. This is your receipt for lodging expenses processed through CLC Lodging. Please keep this receipt for your records.

Transaction Type:	SINGLE STAY	
Stay Details:	Date in:	01/22/2018
	Lowest Published Rate:	\$109.99
	Less: CLC Savings*(20%)	\$22.00
	CLC Rate:	\$87.99
	Taxes:	\$11.46
	Transaction Fee:	<u>\$4.95</u>
	Total Daily Charges:	\$104.40
Company Name:	CHASE ENVIRONMENTAL	
Employee Name:	MATT RIVES	
Hotel:	DRURY INN 145 N 44TH ST MOUNT VERNON, IL 62864-6941	
Room Number:	514	
Length of Stay:	1 Night(s) <u>01/22/2018</u> - <u>01/23/2018</u>	
Total Charges:	\$ 104.40 (including all taxes and trans	saction fees)
Transaction ID:	244375840	
ACCT CODE #:		
DEPARTMENT NUMBER:		
JOB NUMBER OR 000 IF NO JOB:		

If this receipt is in error, please contact us immediately at <u>checkinncard@clclodging.com</u> or call us toll-free at 1.866.857.9747, Option 2.

To view your statement online, log into your online account at www.clclodging.com.

Thank you for choosing CheckINN 100 for your business travel needs!

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#### FW: Your CLC Stay @ DRURY INN From 01/16/2018 To 01/19/2018

From: "Mark Rust" <mrust@chaseenv.com> Date: 01/22/2018 08:04 To: "Matthew Rives" <mrives@chaseenv.com>

Mark T. Rust Chase Environmental Group, Inc. 270-488-2584 270-210-3230 Mobile

From: checkinncard@clclodging.com [mailto:checkinncard@clclodging.com] Sent: Friday, January 19, 2018 7:58 PM To: MRUST@CHASEENV.COM Subject: Your CLC Stay @ DRURY INN From 01/16/2018 To 01/19/2018

#### Dear MATT RIVES,

This is to confirm that the amount below has been charged to your registered credit/debit card ending in 2755 on 01/19/2018. This is your receipt for lodging expenses processed through CLC Lodging. Please keep this receipt for your records.

Transaction Type:	SINGLE STAY	
Stay Details:	Date in:	01/16/18
	Lowest Published Rate:	\$109.99
	Less: CLC Savings*(20%)	<u>\$22.60</u>
	CLC Rate:	\$87.99
	Taxes:	\$11.46
	Transaction Fee;	<u>\$4.95</u>
	Total Daily Charges:	\$104.40
	Date in:	01/17/18
	Lowest Published Rate:	\$109.99
	Less: CLC Savings*(20%)	<u>\$22.00</u>
	CLC Rate:	\$87,99
	Taxes;	\$11.46
	Transaction Fee;	\$4,95
	Total Dally Charges:	\$104.40
	Date In:	01/18/18
	Lowest Published Rate:	\$109,99
	Less: CLC Savings*(20%)	\$22.00
	CLC Rate;	\$87.99
	Taxes:	\$11.46
	Transaclion Fee:	<u>\$4.95</u>
	Total Daily Charges:	\$104,40

#### Company Name:

CHASE ENVIRONMENTAL

Employee Name: MATT RIVES 

## Flectronic Filling Received Clerks Offices 5/95/9000

Hotel:	DRURY INN 145 N 44TH ST MOUNT VERNON, IL 62864-6941					
Room Number:	513					
Length of Stay:	3 Night(s) 01/16/2018 - 01/19/2018					
Total Charges:	\$ 313.20 (including all taxes and transaction fees)					
Transaction ID:	244142918					
ACCT CODE #:						
DEPARTMENT NUMBER:						
JOB NUMBER OR 000 IF NO JOB:						
at 1.866.857.9747, Op	r, please contact us immediately at <u>checkinncard@clclodging.com</u> or call us toll-free otion 2. nt online, log into your online account at <u>www.clclodging.com</u> .					
Thank you for choosin	g CheckINN 100 for your business travel needs!					
Discounted Rate, Savi	are the difference between the Lowest Published Rate and the CheckINN 100 ings calculations DO NOT include taxes and transaction fees. Rates are published for west Published Rates are not available for a specific date of stay, savings calculations					
account details in a reply a-m	In order to protect your privacy, please do not include personal information such as your Social Security number, date of birth, or financial account details in a reply e-mail. If you need to provide us with this information, you may log into your account at <u>www.clclogging.com</u> or call us toll-free at 1.866.857.9747, Option 2. Our customer service hours are Monday through Friday, 8 a.m 5 p.m., Central Time.					
	If you prefer not to receive any promotional e-mails from CLC Lodging, click the link below and follow the directions on the Web site. Please note that you will continue to receive account maintenance and transaction-related e-mails. <u>Click here</u> to Unsubscribe.					
CLC Lodging - 8111 E. <u>32nd S</u>	t N, Suite 300, Wichita, KS <u>57226</u>					

Attachments ( 3 files, 1.8 KB) - ~WRD000.jpg (1.1 KB) - image001.png@01D3934F.4B4440A0 (260.0 B) - image002.jpg@01D3934F.4B4440A0 (460.0 B)

## Handling Charges Form

#### Subcontract or Field Purchase Cost:

Eligible Handling Charges as a Percentage of Cost:

\$0 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 12% \$600 + 10% of amt. over \$5,000 \$1,600 + 8% of amt. over \$15,000 \$4,400 + 5% of amt. over \$50,000 \$6,900 + 2% of amt. over \$100,000

Subcontractor Name or Field Purchase	Type of Work Performed by Subcontractor	Subcontractor or Field Purchase Amount (\$) 955,50 10,507.20	
First American Recovery & Recycle	Liquid disposal		
Rebublic Services	contaminated soil disposal		
Carter Trucking	trucking services	5,440.96	
Praiřie Analytical	Lab ), (,,	1,595.70	
Tek Lab	Lab	269.00	
Total Su	bcontractor and Field Purchase Costs:	\$18,768.36	

Total Handling Charges: \$1,901.47

Martin & Bayley – Hucks #134 Mt. Vernon, Illinois

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LPC # 0810305287 IEMA #20171116

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## **OWNER/OPERATOR/P.E. BILLING CERTIFICATION**

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#### Owner/Operator and Licensed Professional Engineer/Geologist Billing Certification Form

Under penalty of perjury as defined in Section 32-2 of the Criminal Code of 1961 [720 ILCS 5/32-2], I certify to the following:

- The bills in the attached application for payment are for performing corrective action activities
   associated with Incident # 20171116 reported for the Leaking Underground Storage Tank site located
   at Address: 540 Airport Road
   City: Mount Vernon State: Illinois Zip: 62864
- The bills are for the billing period <u>December 5</u>, <u>2017</u>, through <u>February 2</u>, <u>2018</u>, and were incurred in conformance with the Environmental Protection Act and 35 III. Adm. Code 731, 732, or 734.
- The attached application for payment and all documents submitted with it were prepared under the supervision of the licensed professional engineer or licensed professional geologist and the owner and/or operator whose signatures are set forth below and in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information provided. The information in the attached application for payment is, to the best of my knowledge and belief, true, accurate, and complete.
- The costs for remediating the above-listed incident are correct, are reasonable, and if applicable, were determined in accordance with Subpart H: Maximum Payment Amounts, Appendix D Sample Handling and Analysis amounts, and Appendix E Personnel Titles and Rates of 35 III. Adm. Code 732 or 734.
- I am aware there are significant penalties for submitting false statements or representations to the Illinois EPA, including but not limited to fines, imprisonment, or both as provided in Section 44 of the Environmental Protection Act [415 ILCS 5/44] and Section 32-2 of the Criminal Code of 1961 [720 ILCS 5/32-2].

Owner/Operator Name: Martin & Bayley, Inc.	RECEIVED
Authorized Representative*: Troy Dietz	APR 1 6 2018
Address: 1311 West Main St.	Phone:
City: Carmi State: IL	Zip <u>62821</u>
Signature: Tuy tas	Date: 3-22-18
Subscribed and sworn to before me the day of	March , ZOIB
A S	BRANDON MAUS
(Notary Public)	Notary Public – State of Linois
L.P.E./L.P.G. Name: Matthew Rives	My Commission Expires Jul 19, 2021 LICENSED
L.P.E./L.P.G. Illinois Registration No.: 062-069142	ENGINEER S
L.P.E./L.P.G. Registration Expiration Date: Nov 30, 2019	OF OF USE
Company Name: Chase Environmental Group, Inc.	
Address: 2701 E Ash Street, Bldg B	Phone:(217-670-1916
City: Springfield State: Illinois	Zip: 62703
L.P.E./L.P.G. Signature: Mu	Date: 3-21-18
Subscribed and sworn to before me the day of	March . 2018 .
(Notary Public)	eal: BRANDON MAUS Official Seal Notary Public – State of Illinois

\*For a corporation, a principal executive officer of at least the level of vice president, or a person attributed by execution of the board of directors to sign the applicable document if a copy of the resolution, certified as a true copy by the ocure ary of the corporation, is submitted with the document.

Martin & Bayley – Hucks #134 Mt. Vernon, Illinois

LPC # 0810305287 IEMA #20171116

5.0

## PRIVATE INSURANCE AFFIDAVIT AND QUESTIONAIRRE

#### Private Insurance Coverage Questionnaire

This form must be completed in full by all owners or operators, or their authorized representatives, that have a claim for payment from the State of Illinois Underground Storage Tank Fund for the labor, materials, overhead, and profit costs related to the investigation and/or remediation of a Leaking UST site.

1.	Site Name:		Martin & Bayley, Inc Hucks #134						
	Add	ress:	540 Airport Road						
	City:	:	Mount Vern				·		
2.			urance compole. No insu	pany providing cov rance.	_	_	UST site:	- 10 MI 11 100-11	
3.	Amo	ount of c	overage pro	vided: \$ <u>.00</u>					
4.	Hav	e you o	r your firm fil	ed a claim agains	t your insu	rance compa	any for this Le	eaking	UST site?
			Yes 🗌	No 🔀					
	a.	lf yes, l	how much is	the claim? \$					
	b.	lf no, e	xplain why.	No insurance.			· · · · · · · · · · · · · · · · · · ·		
5.	Have site?		<sup>-</sup> your firm re	ceived payment fo	or a claim a	against your	insurance co	mpany	/ for this Leaking UST
			Yes 🗌	No 🔀					
	a.	lf yes, l	how much a	nd when? \$					
		Date:			·				
	b.	lf no, e	xplain why.	No insurance.					
									-
6.	Are	vou doii	na to file a cl	laim against your i	nsurance i	policy?			
0.		• -	+	No 🛛					
	a.	lf ves.	how much a	nd when? \$					
		Date:				1			
	b.	ir no, e	xplain why.	No insurance.					

This Illinois EPA is authorized to request this information under the Environmental Protection Act, 415 ILCS 5/1 et seq. (formerly III. Rev. Stat. Ch 111-1/2, 1001 et seq.). Disclosure of this information is required. Failure to properly complete this form in its entirety may result in the delay or denial of any payment requested hereunder. This form has been approved by the Forms Management Center.

## Private Insurance Affidavit

I,	Troy Dietz		, a duly authorized representative of
Martin & Bayley, Inc.			
	(owner/operator	or firm's name)	
hereby certify that	Martin & Bayley, Inc. (owner/operator or firm's name)		, does not) <u>does not</u> have private (choose one)
insurance coverage for	all or part of the costs related to c	laim for payment of	Martin & Bayley. Inc. (owner or firm's name)
investigation or remedia	ation costs for work performed at		<u>y, Inc Hucks #134</u> located at name)
540 Airport Road			
	(address	· _	
I, <u>Troy Diet</u> (name)	z <sup>,</sup> <u>Director of Petro</u> (title)	oleum_of_ <u>Martin (</u> (	& Bayley, Inc, owner/operator or firm's name)
	ate, the above information is accu PA for any overpayment made by each site.		
Owner/Operator: Troy	Dietz	Title: Direc	tor of Petroleum
Signature:	n Dut	Date: <u>3</u> 2	Z-17
Subscribed and sworn	to before me the <u>22</u>	day of <u>Marc</u>	<u>h</u> , <u>2018</u> .
(No	tary Public)	Seal:	BRANDON MAUS Official Seal lotary Public – State of Illinois commission Expires Jun 19, 2021

The Illinois EPA is authorized to require this information under 415 ILCS 5/1. Disclosure of this information is required. Failure to do so may result in the delay or denial of any budget or payment requested hereunder. This form has been approved by the Forms Management Center.

Martin & Bayley – Hucks #134 Mt. Vernon, Illinois

LPC # 0810305287 IEMA #20171116

6.0

## PAYMENT CERTIFICATION FORM

#### Payment Certification Form

This certification must be included with every application for payment from the UST Fund.

I, <u>Martin & Bayley, Inc</u>, the owner or operator of the Leaking UST(s) for which this application for payment is being submitted, certify that  $\frac{15,061,86}{00}$  is the amount being sought in this application for payment,  $\frac{00}{00}$  has been sent to the Illinois EPA for payment for this occurrence but has not yet been paid. I further certify that the number of petroleum USTs in Illinois presently owned or operated by the owner or operator, any subsidiary, parent or joint stock company of the owner or operator, and any company owned by any parent, subsidiary or joint stock company of the owner or operator is (check one):

Fewer than 101 🔀

101 or more 🔲

Except for applications for payment associated with Early Action, I certify that a plan for the work included in this application for payment was approved by the Illinois EPA on \_\_\_\_\_\_; except for applications for payment associated with to 35 III. Adm. Code 731, certify that a budget for the work included in this application for payment was approved by the Illinois EPA on \_\_\_\_\_\_; and certify that the amount sought for payment was expended in conformance with the approved budget and approved plan. I further certify that, if the costs included in this application for payment are approved for payment, the following limitations will not be exceeded:

- Payment will not result in the owner or operator receiving payment of corrective action costs or indemnification costs from the Fund for more than \$1,000,000 per occurrence for sites subject to 35 III. Adm. Code 731 or 732. (OR) Payment will not result in the owner or operator receiving payment of corrective action costs or indemnification costs from the Fund for more than \$1,500,000 per occurrence for sites subject to 35 III. Adm. Code 734.
- 2. Payment will not result in the owner or operator receiving payment of corrective action costs or indemnification costs from the Fund incurred during a calendar year in excess of the following amounts:

For costs incurred in calendar years prior to 2002:

\$1,000,000, if fewer than 101 tanks are owned or operated in Illinois. \$2,000,000, if 101 or more tanks are owned or operated in Illinois.

For costs incurred in calendar years 2002 and later:

\$2,000,000, if fewer than 101 tanks are owned or operated in Illinois. \$3,000,000, if 101 or more tanks are owned or operated in Illinois.

Owner/Operator Name: Martin & Bayley, Inc.			5/
Authorized Representative*: Troy Dietz		Title: Director of Petroleum	A-
Signature:		Date: <u>3-22-18</u>	
Subscribed and sworn to before me the <u>22</u> day of	More	ch 2018	
(This certification must be notarized when the certification is signed.)	Seal:	BRANDON MAUS Official Seal Notary Public - State of Illinois	
(Notary Public)		My Commission Expires Jun 19, 2021	

\*For a corporation, a principal executive officer of at least the level of vice president, or a person authorized by a resolution of the board of directors to sign the applicable document if a copy of the resolution, certified as a true copy by the secretary of the corporation, is submitted with the document.

Martin & Bayley – Hucks #134 Mt. Vernon, Illinois

LPC # 0810305287 IEMA #20171116

7.0

## W-9 FORM

Depart	W-9 December 2014) ment of the Treasury I Revenue Service Request for Taxpayer Identification Number and Certi	fication	re	ve Form to the quester. Do not nd to the IRS.
Print or type See Specific Instructions on page 2.	<ul> <li>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blar Martin &amp; Bayley, Inc.</li> <li>2 Business name/disregarded entity name, if different from above</li> <li>3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <ul> <li>Individual/sole proprietor or</li> <li>C Corporation</li> <li>S Corporation</li> <li>Partnership single-member LLC</li> <li>Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership the tax classification of the single-member boxes.</li> <li>Other (see instructions) ►</li> </ul> </li> <li>5 Address (number, street, and apt. or suite no.)</li> <li>1311 W. Main Street</li> <li>6 City, state, and ZIP code</li> <li>Carmi, IL 62821</li> <li>7 List account number(s) here (optional)</li> </ul>	☐ Trust/estate ership) ►	certain entities, instructions on Exempt payee of Exemption from code (if any) (Applies to accounts)	n FATCA reporting
backu reside entitie <i>TIN</i> o <b>Note</b>	Taxpayer Identification Number (TIN)           your TIN in the appropriate box. The TIN provided must match the name given on line 1 to up withholding. For individuals, this is generally your social security number (SSN). However, ent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other so, it is your employer identification number (EIN). If you do not have a number, see How to n page 3.           . If the account is in more than one name, see the instructions for line 1 and the chart on particular on whose number to enter.	, for a liner get a or	curity number	umber 8752

#### Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ►	K	Ban	Date Þ	3-21-18
Gana	ol Instructi	000		Form 1098 (home mortgage int	terest), 1098-E (student loan interest), 1

#### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted. Future developments, Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

#### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- · Form 1099-DIV (dividends, including those from stocks or mutual funds)
- · Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- · Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.
  - By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

 Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.



# **ILLINOIS ENVIRONMENTAL PROTECTION AGENCY**

1021 NORTH GRAND AVENUE EAST, P.O. BOX 19276, SPRINGFIELD, ILLINOIS 62794-9276 • (217) 782-3397 BRUCE RAUNER, GOVERNOR ALEC MESSINA, DIRECTOR CERTIFIED MAIL #

217/524-3300

JUL 26 2018

7017 2680 0001 0214 8450

Martin & Bayley, Inc. Attn: Chase Environmental Group, Inc. 2701 E. Ash Street, Bldg. B Springfield, IL 62703

Re: LPC #0810305287 -- Jefferson County Mt. Vernon / Martin & Bayley, Inc. 540 Airport Road Incident-Claim No.: 20171116 -- 69210 Queue Date: April 16, 2018 Leaking UST Fiscal File

Dear Mr. Dietz:

The Illinois Environmental Protection Agency (Illinois EPA) has completed the review of your application for payment from the Underground Storage Tank (UST) Fund for the above-referenced Leaking UST incident pursuant to Section 57.8(a) of the Environmental Protection Act (415 ILCS 5) (Act) and 35 Illinois Administrative Code (35 Ill. Adm. Code) 734.Subpart F.

This information is dated April 13, 2018 and was received by the Illinois EPA on April 16, 2018. The application for payment covers the period from December 15, 2017 to February 2, 2018. The amount requested is \$75,067.86.

On April 16, 2018, the Illinois EPA received your application for payment for this claim. As a result of Illinois EPA's review of this application for payment, a voucher for \$67,513.47 will be prepared for submission to the Comptroller's Office for payment as funds become available based upon the date the Illinois EPA received your complete request for payment of this application for payment. Subsequent applications for payment that have been/are submitted will be processed based upon the date complete subsequent application for payment requests are received by the Illinois EPA. This constitutes the Illinois EPA's final action with regard to the above application(s) for payment.

The deductible amount of \$5,000.00 was withheld from your payment. Pursuant to Section 57.8(a)(4) of the Act, any deductible, as determined pursuant to the Office of the State Fire Marshal's eligibility and deductibility final determination in accordance with Section 57.9 of the Act, shall be subtracted from any payment invoice paid to an eligible owner or operator.

There are costs from this claim that are not being paid. Listed in Attachment A are the costs that are not being paid and the reasons these costs are not being paid.

Page 2

An underground storage tank system owner or operator may appeal this decision to the Illinois Pollution Control Board. Appeal rights are attached.

If you have any questions or require further assistance, please contact Melissa Owens of my staff at (217)785-9351.

Sincerely,

egoy in

Gregory W. Dunn, Manager Leaking Underground Storage Tank Section Division of Remediation Management Bureau of Land

mao

Attachments

Martin & Bayley, Inc. c: Leaking UST Claims Unit

#### Appeal Rights

An underground storage tank owner or operator may appeal this final decision to the Illinois Pollution Control Board pursuant to Sections 40 and 57.7(c)(4) of the Act by filing a petition for a hearing within 35 days after the date of issuance of the final decision. However, the 35-day period may be extended for a period of time not to exceed 90 days by written notice from the owner or operator and the Illinois EPA within the initial 35-day appeal period. If the owner or operator wishes to receive a 90-day extension, a written request that includes a statement of the date the final decision was received, along with a copy of this decision, must be sent to the Illinois EPA as soon as possible.

For information regarding the filing of an appeal, please contact:

Clerk of the Board Illinois Pollution Control Board James R. Thompson Center 100 West Randolph, Suite 11-500 Chicago, IL 60601 312/814-3620

For information regarding the filing of an extension, please contact:

Illinois Environmental Protection Agency Division of Legal Counsel 1021 North Grand Avenue East Post Office Box 19276 Springfield, IL 62794-9276 217/782-5544

#### Attachment A Deductions

Re: LPC #0810305287 -- Jefferson County Mt. Vernon / Martin & Bayley, Inc. 540 Airport Road Incident-Claim No.: 20171116 -- 69210 Queue Date: April 16, 2018 Leaking UST FISCAL FILE

Citations in this attachment are from the Environmental Protection Act (415 ILCS 5) (Act) and 35 Illinois Administrative Code (35 Ill. Adm. Code).

Item # Description of Deductions

\$1,897.39, deduction for costs for Remediation and Disposal, which lack supporting documentation. Such costs are ineligible for payment from the Fund pursuant to 35 Ill. Adm. Code 734.630(cc). Since there is no supporting documentation of costs, the Illinois EPA cannot determine that costs will not be used for activities in excess of those necessary to meet the minimum requirements of Title XVI of the Act. Therefore, such costs are not approved pursuant to Section 57.7(c)(3) of the Act because they may be used for site investigation or corrective action activities in excess of those required to meet the minimum requirements of Title XVI of the Act.

In addition, the costs are not reasonable as submitted. Such costs are ineligible for payment from the Fund pursuant to Section 57.7(c)(3) of the Act and 35 Ill. Adm. Code 734.630(dd).

The Agency is reimbursing 350.24 cubic yards of ETD at \$72.05 per cubic yard plus \$450.00 for concrete trucking for a total of \$25,684.79.

2. \$604.50, deduction for costs for Remediation and Disposal, which lack supporting documentation. Such costs are ineligible for payment from the Fund pursuant to 35 Ill. Adm. Code 734.630(cc). Since there is no supporting documentation of costs, the Illinois EPA cannot determine that costs will not be used for activities in excess of those necessary to meet the minimum requirements of Title XVI of the Act. Therefore, such costs are not approved pursuant to Section 57.7(c)(3) of the Act because they may be used for site investigation or corrective action activities in excess of those required to meet the minimum requirements of Title XVI of the Act.

The Agency is reimbursing \$955.50, which is the amount indicated on the documentation provided.

\$22.50, deduction for costs for Consultant's Materials, which lack supporting documentation. Such costs are ineligible for payment from the Fund pursuant to 35 Ill. Adm. Code 734.630(cc). Since there is no supporting documentation of costs, the

Illinois EPA cannot determine that costs will not be used for activities in excess of those necessary to meet the minimum requirements of Title XVI of the Act. Therefore, such costs are not approved pursuant to Section 57.7(c)(3) of the Act because they may be used for site investigation or corrective action activities in excess of those required to meet the minimum requirements of Title XVI of the Act.

Postage is being cut because documentation was not provided.

4. \$30.00 for costs for copy charges, which lack supporting documentation. Such costs are ineligible for payment from the Fund pursuant to 35 Ill. Adm. Code 734.630(cc). Since there is no supporting documentation of costs, the Illinois EPA cannot determine that costs will not be used for activities in excess of those necessary to meet the minimum requirements of Title XVI of the Act. Therefore, such costs are not approved pursuant to Section 57.7(c)(3) of the Act because they may be used for site investigation or corrective action activities in excess of those required to meet the minimum requirements of Title XVI of the Act.

Pursuant to 35 III. Adm. Code 734.850(b) costs associated with activities that do not have a maximum payment amount set forth pursuant to 35 III. Adm. Code 734 Subpart H must be determined on a site specific basis and the owner/operator must demonstrate to the Agency the amounts sought for reimbursement are reasonable. The owner/operator has not provided sufficient documentation to support the rate requested for copy charges and/or the quantity of copies requested pursuant to 35 III. Adm. Code 734.505(a). The documentation was either not provided or fails to provide sufficient information for the Agency to make a site specific reasonableness determination.

In addition, without supporting documentation the rate and/or the quantity of copies requested are not reasonable as submitted. Such costs are ineligible for payment from the Fund pursuant to Section 57.7(c)(3) of the Act and 35 Ill. Adm. Code 734.630(dd).

mao

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r-	Se Martin & Bayley, Inc.
7017	c/o Chase Environmental Group, Inc.
F-	57 2701 E. Ash St.
-	
	Springfield, IL 62703
	res. Constructions.

SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. LCW 24 Print your name and address on the reverse solution of the name of the pace of the many ecc, or on the front if space permits.	COMPLETE THIS SECTION ON DELIVERY         A, Signature         A, Signature         X       Agent         B. Received by (Printed Name)         C. Date of Delivery
Martin & Bayley, Inc. c/o Chase Environmental Group, Inc. 2701 E. Ash St. Springfield, IL 62703	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
9590 9402 3341 7227 9133 38 2. Article Number (Transfer from 1997) 7017 2680 0001 0214 8450	3. Service Type       □ Priority Mail Express®         □ Adult Signature       □ Registered Mail™         □ Adult Signature Restricted Delivery       □ Registered Mail™         □ Adult Signature Restricted Delivery       □ Registered Mail Restricted Delivery         □ Certified Mail®       □ Return Receipt for Merchandise         □ Collect on Delivery       □ Signature Confirmation™         □ Insured Mail       □ Insured Mail Restricted Delivery
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