




<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>N / A</b>		2. Page 1 of <b>1</b>		3. Emergency Response Phone <b>717-587-7850</b>		4. Waste Tracking Number <b>072125 USA-FA</b>	
		5. Generator's Name and Mailing Address <b>US Army Reserve 6 Armory Road Clarksburg WV 26301</b> Generator's Phone: <b>484 576-0866</b>		Att: Ray Chain		Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name <b>Fratello &amp; Amico, Inc.</b>								U.S. EPA ID Number	
7. Transporter 2 Company Name								U.S. EPA ID Number	
8. Designated Facility Name and Site Address <b>GemChem, Inc. 53 North Cedar Street Littitz PA 17543</b> Facility's Phone: <b>717 626-3900</b>								U.S. EPA ID Number <b>PAD009439662</b>	
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity		12. Unit Wt./Vol.			
		No.	Type						
1. <b>Non-Regulated Material, N.O.S. (Oily Debris/Sludge)</b>		<b>08</b> <del>DM</del> <b>DM</b>		<b>4,000</b>		<b>P</b>			
2.									
3.									
4.									
13. Special Handling Instructions and Additional Information  <b>Non-RCRA/Non-DOT Regulated Waste      Contact: Ray Chain, Fratello &amp; Amico</b>									
14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.									
Generator's Printed/Typed Name <b>x Ray Chain</b>		Signature 				Month Day Year <b>07 23 25</b>			
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____							
Transporter Signature (for exports only):									
16. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name <b>x Ray Chain</b>		Signature 				Month Day Year <b>07 23 25</b>			
Transporter 2 Printed/Typed Name		Signature				Month Day Year			
17. Discrepancy									
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number:									
17b. Alternate Facility (or Generator) U.S. EPA ID Number									
Facility's Phone:									
17c. Signature of Alternate Facility (or Generator) Month Day Year									
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a									
Printed/Typed Name <b>Cordin Young</b>		Signature 				Month Day Year <b>07 23 25</b>			