

SAN LEON MUNICIPAL UTILITY DISTRICT
443 24TH STREET
SAN LEON, TEXAS 77539
281-339-1586 FAX: 281-339-1587
EMAIL ADDRESS: slmud1@slmud.org
WEB PAGE: www.slmud.org

October 23, 2020

David Jetelina
18118 Lakeside Lane
Nassau Bay, TX 77058

Dear Mr. Jetelina:

We have received your records request under the Texas Public Information Act, dated June 3, 2020. Your request is outlined below, along with our responses and supporting documentation.

1. Copies of Waste Manifests (aka trip tickets) which are required by TCEQ. These being the Manifests from IMPACT Waste which were required to be filled out and distributed by IMPACT to the San Leon MUD in conjunction with each waste load picked up at the San Leon WWTP for delivery to a licensed disposal facility.
 - a. Attached.
2. Copies of Waste Manifests (aka trip tickets) which are required by TCEQ. These being the Manifests from IMPACT Waste which were required to be filled out and distributed by IMPACT to the San Leon MUD in conjunction with each waste load delivered by IMPACT to the San Leon WWTP.
 - a. There are no records in the District's files pertaining to this request.
3. Correspondence from our SL MUD attorney Mr. Stephen DonCarlos states "You have breached the contract on a number of occasions, including at least two (2) instances in which your employees have dumped raw, untreated waste matter on the surface of the District property; in fact there currently is a container full of untreated sludge that was rejected by the landfill and was returned to the District's property, where it remains." Please provide:
 - Copies of all Reports filed by the San Leon MUD with the TCEQ in regard to the above activity
 - Copies of all Reports filed by IMPACT Waste with the TCEQ in regard to the above activity
 - Copies of all reports, memos, emails, texts or other communication between any and all San Leon MUD employees and/or MUD board members and/or IMPACT Waste staff in regard to the above activity
 - a. Attached.
4. Copies of ALL invoice from the "company that alleviated" the above WWTP situation
 - a. Attached.

5. Copies of itemized purchase or work orders issued by the District for the invoices referenced in item #3.
 - a. There are no records in the District's files pertaining to this request.

If you have any additional questions regarding the matter, please let me know and I will do my best to work with you to come to a satisfying conclusion for your inquiry.

Sincerely,

A handwritten signature in black ink, appearing to read "Andrew Miller". The signature is fluid and cursive, with a large, sweeping initial "A".

Andrew Miller
District Manager
San Leon MUD



NON-HAZARDOUS WASTE MANIFEST

3706198

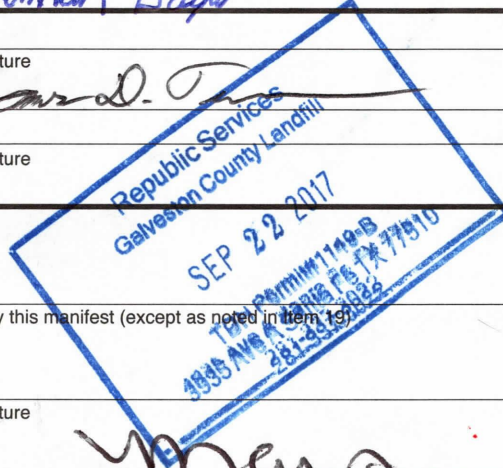
Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of			
3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77539 4. Phone () 409-727-3335			5. Generating Location (if different) SAME 6. Phone ()				
7. Transporter #1 Company Name Impact Waste & Recycling		8. US EPA ID Number TXR000084111		9. Transporter #1's Phone 409-727-3335			
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone			
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3935 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TXR000069666		15. Facility's Phone 713-876-7675			
16. Waste Shipping Name and Description a. MUNICIPAL SLUDGE TCEQ # N/A b. BILL CMS # 833359 c.		17. Republic Services Approval # and Exp. Date 51141614945 1/20/2019		18. Containers		19. Total Quantity	20. Unit Wt/Vol
				No.	Type		
				1	Roll off	12	yds
21. Additional Descriptions for Materials Listed Above							
22. Special Handling Instructions and Additional Information							
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.							
Printed/Typed Name Kenneth Boyd		Signature Kenneth Boyd		Month 9	Day 22	Year 17	
24. Transporter #1: Acknowledgement of Receipt of Materials							
Printed/Typed Name James Turner		Signature James D. Turner		Month 9	Day 22	Year 17	
25. Transporter #2: Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month	Day	Year	
26. Discrepancy Indication Space							
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in item 19)							
Printed/Typed Name Murray		Signature Murray		Month 9	Day 22	Year 17	

GENERATOR

TRANSPORTER

T/S/D FACILITY



ORIGINAL - RETURN TO ORIGINATOR

COM000033

RS-F15



NON-HAZARDOUS WASTE MANIFEST

3706199

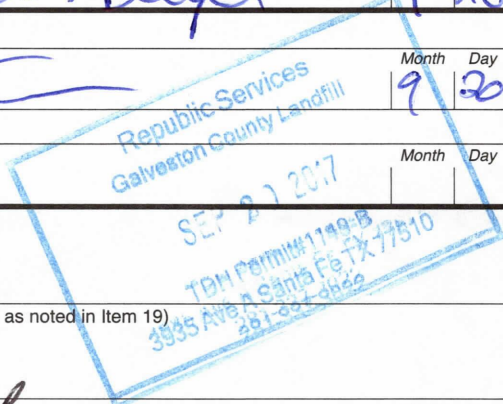
Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of	
3. Generator's Name and Mailing Address SAN LEON MJD 443 24TH STREET SAN LEON, TX 77539 4. Phone () 409-727-3335				5. Generating Location (if different) SAME 6. Phone ()	
7. Transporter #1 Company Name Impact Waste + Recycling		8. US EPA ID Number TXR 00084111		9. Transporter #1's Phone 409-727-3335	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3935 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TXR000069665		15. Facility's Phone 713-878-7675	
16. Waste Shipping Name and Description		17. Republic Services Approval # and Exp. Date		18. Containers	
a. MUNICIPAL SLUDGE TCFQ # N/A		51141614945 1/20/2019		19. Total Quantity	
b. BILL CMS # 333389				20. Unit Wt/Vol	
c.				18. Containers No. Type	
				1 1 Roll off 12 yds	
21. Additional Descriptions for Materials Listed Above					
22. Special Handling Instructions and Additional Information					
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
Printed/Typed Name Kenneth Boyd		Signature Kenneth Boyd		Month Day Year 9 20 17	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name James Turner		Signature James D. Turner		Month Day Year 9 20 17	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)					
Printed/Typed Name Linda Forest		Signature Linda Forest		Month Day Year 9 20 17	

GENERATOR

TRANSPORTER

T/S/D FACILITY



ORIGINAL - RETURN TO ORIGINATOR

COM000033

RS-F15

#120
57260



NON-HAZARDOUS WASTE MANIFEST

3706200

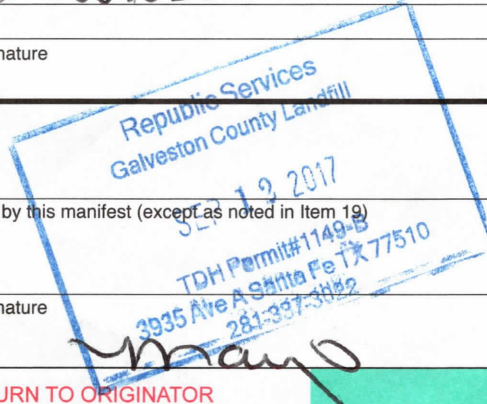
Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of			
3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77539 4. Phone () 409-727-3335			5. Generating Location (if different) SAME				
7. Transporter #1 Company Name Impact Waste & Recycling		8. US EPA ID Number TXR 000084111		9. Transporter #1's Phone 409-727-3335			
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone			
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3935 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TXR000069666		15. Facility's Phone 713-878-7875			
16. Waste Shipping Name and Description a. MUNICIPAL SLUDGE TCEQ # N/A b. BILL CM5 # 933389 c.		17. Republic Services Approval # and Exp. Date 51141614945 1/20/2019		18. Containers		19. Total Quantity 15 y rds	20. Unit Wt/Vol
				No. Type			
				1 100% off			
21. Additional Descriptions for Materials Listed Above							
22. Special Handling Instructions and Additional Information							
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.							
Printed/Typed Name Kenneth Boyd		Signature Kenneth Boyd		Month Day Year 9 13 17			
24. Transporter #1: Acknowledgement of Receipt of Materials							
Printed/Typed Name James Turner		Signature James D. Turner		Month Day Year 9 13 17			
25. Transporter #2: Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
26. Discrepancy Indication Space							
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)							
Printed/Typed Name Marcy		Signature Marcy		Month Day Year 9 13 17			

GENERATOR

TRANSPORTER

T/S/D FACILITY



ORIGINAL - RETURN TO ORIGINATOR

COM000033

REV01/14

RS-F15



NON-HAZARDOUS WASTE MANIFEST

3706201

Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of			
3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77539 4. Phone () 409-727-3335				5. Generating Location (if different) SAME 6. Phone ()			
7. Transporter #1 Company Name Impact Waste Recycling		8. US EPA ID Number TX000084111		9. Transporter #1's Phone 409-727-3335			
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone			
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3935 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TXR000069666		15. Facility's Phone 713-676-7675			
16. Waste Shipping Name and Description a. MUNICIPAL SLUDGE TCFQ # N/A b. BILL CMS # 333389 c.		17. Republic Services Approval # and Exp. Date 51141614945 1/20/2019		18. Containers		19. Total Quantity 15	20. Unit Yrds
				No.	Type		
				1	Roll off		
21. Additional Descriptions for Materials Listed Above							
22. Special Handling Instructions and Additional Information							
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.							
Printed/Typed Name Kenneth Boyd		Signature Kenneth Boyd		Month 9	Day 8	Year 17	
24. Transporter #1: Acknowledgement of Receipt of Materials							
Printed/Typed Name James Turner		Signature James Turner		Month 9	Day 8	Year 17	
25. Transporter #2: Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month	Day	Year	
26. Discrepancy Indication Space							
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)							
Printed/Typed Name H. Turner		Signature H. Turner		Month 9	Day 8	Year 17	

GENERATOR

TRANSPORTER

T/S/D FACILITY



ORIGINAL - RETURN TO ORIGINATOR

COM000033

RS-F15

59220



NON-HAZARDOUS WASTE MANIFEST

3706202

Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of	
3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77589 4. Phone () 409-727-3335			5. Generating Location (if different) SAME 6. Phone ()		
7. Transporter #1 Company Name Impact Waste & Recycling		8. US EPA ID Number 000084111		9. Transporter #1's Phone 409-727-3335	
10. Transporter #2 Company Name Impact waste		11. US EPA ID Number TXR 000084111		12. Transporter #2's Phone 409-727-3335	
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3935 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TXR000069565		15. Facility's Phone 713-676-7875	
GENERATOR	16. Waste Shipping Name and Description		17. Republic Services Approval # and Exp. Date		18. Containers
	a. MUNICIPAL SLUDGE TCEQ # N/A		51141514945 1/20/2019		No. Type
	b. BILL CMS # 333369				1 101 off
	c.				17 yds
19. Total Quantity					
20. Unit Wt/Vol					
21. Additional Descriptions for Materials Listed Above					
22. Special Handling Instructions and Additional Information					
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
Printed/Typed Name Kenneth Boyd		Signature <i>Kenneth Boyd</i>		Month Day Year 9 4 17	
TRANSPORTER	24. Transporter #1: Acknowledgement of Receipt of Materials		Signature <i>James Turner</i>		Month Day Year 9 4 17
	Printed/Typed Name James Turner		Signature <i>James Turner</i>		Month Day Year 9 5 17
	25. Transporter #2: Acknowledgement of Receipt of Materials		Signature <i>Josh Rinebold</i>		Month Day Year 9 5 17
Printed/Typed Name Josh Rinebold		Signature <i>Josh Rinebold</i>		Month Day Year 9 5 17	
26. Discrepancy Indication Space					
T/S/D FACILITY	27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in item 19)				
	Printed/Typed Name M. P. Reynolds		Signature <i>M. P. Reynolds</i>		Month Day Year 9 5 17

Republic Services
Galveston County Landfill
SEP 05 2017
TDH Permit #1149-B
3935 Ave A Santa Fe TX 77910
281-337-3022

ORIGINAL - RETURN TO ORIGINATOR

COM000033

REV01/14

RS-F15



NON-HAZARDOUS WASTE MANIFEST

3706203

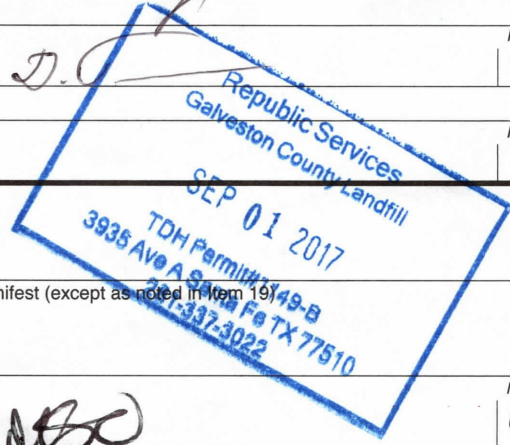
Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of	
3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77559 4. Phone () 409-727-3335			5. Generating Location (if different) SAME 6. Phone ()		
7. Transporter #1 Company Name Impact Waste Recycling		8. US EPA ID Number 45PST 2927454		9. Transporter #1's Phone 409-727-3335	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3935 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TXR000069666		15. Facility's Phone 713-678-7875	
16. Waste Shipping Name and Description		17. Republic Services Approval # and Exp. Date		18. Containers	
a. MUNICIPAL SLUDGE TCEQ # N/A		51141614945 1/20/2019		19. Total Quantity 12	
b. BILL CM5 # 383389				20. Unit Wt/Vol y dls	
c.					
21. Additional Descriptions for Materials Listed Above					
22. Special Handling Instructions and Additional Information					
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
Printed/Typed Name Kenneth Boyd		Signature Kenneth Boyd		Month Day Year 9 1 17	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name James D. Turner		Signature James D. Turner		Month Day Year 9 1 17	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)					
Printed/Typed Name H. Turner		Signature H. Turner		Month Day Year 9 1 17	

GENERATOR

TRANSPORTER

T/S/D FACILITY



ORIGINAL - RETURN TO ORIGINATOR

COM000033

REV01/14

RS-F15



6315 N Twin City Hwy
Beaumont, Texas 77705
(409)727-3335

Customer: San Leon Municipal District

Date: 9/20/17

Address: 1111 27th St

San Leon, Texas 77539

Driver: James Turner

Commodity: WWT Sludge

Truck #: R103

TIME

Leave IW: 5:00 am/pm

In Plant: 5:50 am/pm

Out Plant: 6:15 am/pm

In Landfill: 7:00 am/pm

Out Landfill: 7:45/30 am/pm

In Plant: 8:00 am/pm

Out Plant: 8:30 am/pm

Back at IW: 9:00 am/pm

Del Swap Haul & Return Final Respot

Circle type of Unit

Size: 25yd

Type of Box: De-watering Box

Type of Box: 130BBL Tanker

De-watering Service for 15,189 Gallons

12 yds of WWT Sludge for Transport to Galveston County Republic Landfill

 gals Transported to Don Tol Landfill in Boling, TX

Customer Approval: K Boyd



NON-HAZARDOUS WASTE MANIFEST

3706199

Print or type.

1. Generator's US EPA ID Number N/A	Manifest Document Number	2. Page 1 of
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3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77539 409-727-3335	4. Phone ()	5. Generating Location (if different) SAME	6. Phone ()
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7. Transporter #1 Company Name Impact Waste + Recycling	8. US EPA ID Number TXR00084111	9. Transporter #1's Phone 409-727-3335
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10. Transporter #2 Company Name	11. US EPA ID Number	12. Transporter #2's Phone
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13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #11498 3935 AVENUE A ALTA LOMA, TX 77510	14. US EPA ID Number TXR00069666	15. Facility's Phone 713-676-7876
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16. Waste Shipping Name and Description	17. Republic Services Approval # and Exp. Date	18. Containers		19. Total Quantity	20. Unit Wt/Vol
		No.	Type		
a. MUNICIPAL SLUDGE TCEQ # N/A 500	51141614945 1/20/2019	1	Roll off	12	yds
b. BILL CMS # 333369 550					
c.					

21. Additional Descriptions for Materials Listed Above

22. Special Handling Instructions and Additional Information

23. **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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

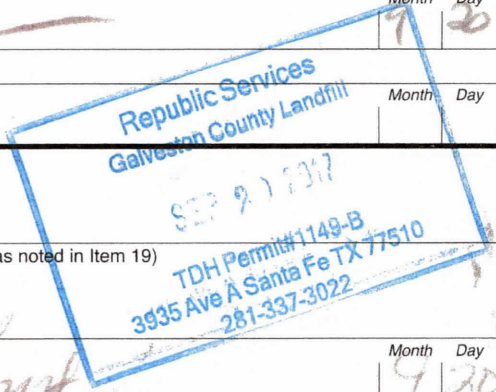
Printed/Typed Name Kenneth Boyd	Signature Kenneth Boyd	Month Day Year 9 20 17
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24. Transporter #1: Acknowledgement of Receipt of Materials		
Printed/Typed Name James Turner	Signature James Turner	Month Day Year 9 20 17

25. Transporter #2: Acknowledgement of Receipt of Materials		
Printed/Typed Name	Signature	Month Day Year

26. Discrepancy Indication Space

27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)		
Printed/Typed Name Cinda Jones	Signature Cinda Jones	Month Day Year 9 20 17



TRANSPORTER #1

COM000033

REV01/14

GENERATOR

TRANSPORTER

T/S/D FACILITY



6315 N Twin City Hwy
Beaumont, Texas 77705
(409)727-3335

Customer: San Leon Municipal District

Date: 9-22-17

Address: 1111 27th St

San Leon, Texas 77539

Driver: James

Commodity: WWT Sludge

Truck #: R103

TIME

Leave IW: 7:30 am/pm

In Plant: 8:00 am/pm

Out Plant: 8:30 am/pm

In Landfill: 9:00 am/pm

Out Landfill: _____ am/pm

In Plant: _____ am/pm

Out Plant: _____ am/pm

Back at IW: _____ am/pm

Del Swap Haul & Return Final Respot

Circle type of Unit

Size: 25yd

Type of Box: De-watering Box

Type of Box: 130BBL Tanker

De-watering Service for 15,189 Gallons

12 yds of WWT Sludge for Transport to Galveston County Republic Landfill

_____ gals Transported to Don Tol Landfill in Boling, TX

Customer Approval: K. Bayal



NON-HAZARDOUS WASTE MANIFEST

3706198

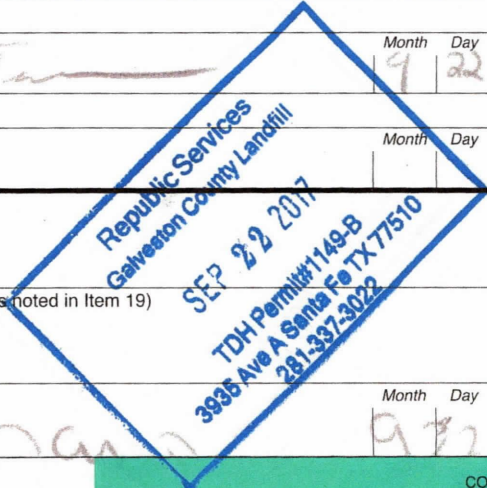
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1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of	
3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77539 409-727-3335			5. Generating Location (if different) SAME		
4. Phone ()		6. Phone ()		9. Transporter #1's Phone 409-727-3335	
7. Transporter #1 Company Name Impact Waste & Recycling		8. US EPA ID Number TXR000084111		10. Transporter #2's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3935 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TXR000069666		15. Facility's Phone 713-676-7676	
16. Waste Shipping Name and Description		17. Republic Services Approval # and Exp. Date		18. Containers	
a. MUNICIPAL SLUDGE TCEQ # N/A		51141614945 1/30/2019		19. Total Quantity	
b. BILL CMS # 383369				20. Unit Wt/Vol	
c.					
21. Additional Descriptions for Materials Listed Above					
22. Special Handling Instructions and Additional Information					
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
Printed/Typed Name Kenneth Boyd		Signature Kenneth Boyd		Month Day Year 9 22 17	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name James Turner		Signature James D. Turner		Month Day Year 9 22 17	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)					
Printed/Typed Name		Signature		Month Day Year 9 22 17	

GENERATOR

TRANSPORTER

T/S/D FACILITY



TRANSPORTER #1

COM000033



6315 N Twin City Hwy
Beaumont, Texas 77705
(409)727-3335

Customer: San Leon Municipal District

Date: 2/1/18

Address: 1111 27th St

San Leon, Texas 77539

Driver: James

Commodity: WWT Sludge

Truck #: R103

TIME

Leave IW: 6:00 am/pm

In Plant: 6:30 am/pm

Out Plant: 6:55 am/pm

In Landfill: 7:40 am/pm

Out Landfill: 8:50 am/pm

In Plant: 9:30 am/pm

Out Plant: 9:45 am/pm

Back at IW: 10:00 am/pm

Del Swap Haul & Return Final Respot

Circle type of Unit

Size: 25yd

Type of Box: De-watering Box

Type of Box: 130BBL Tanker

De-watering Service for 14,086 Gallons

17 yds of WWT Sludge for Transport to Galveston County Republic Landfill

 gals Transported to Don Tol Landfill in Boling, TX

Customer Approval:

K. Beyl



NON-HAZARDOUS WASTE MANIFEST

3706157

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of	
3. Generator's Name and Mailing Address SAN LEON MUD 443 24 TH STREET SAN LEON, TX 77599 409-727-3335				5. Generating Location (if different) SAME	
4. Phone ()				6. Phone ()	
7. Transporter #1 Company Name Impact Waste		8. US EPA ID Number TRR 00084111		9. Transporter #1's Phone 409-727-3335	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3936 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TXR000092625		15. Facility's Phone 713-878-7675	
16. Waste Shipping Name and Description		17. Republic Services Approval # and Exp. Date		18. Containers	
a. MUNICIPAL SLUDGE TCEQ # NA		51141614945 1/20/2019		19. Total Quantity	
b. BILL CMS # 333889				20. Unit Wt/Vol y rds	
c.					
21. Additional Descriptions for Materials Listed Above					
22. Special Handling Instructions and Additional Information					
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
Printed/Typed Name Keaneth Boyd		Signature Keaneth Boyd		Month Day Year 1 1 18	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name James D Turner		Signature James D Turner		Month Day Year 2 1 18	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted on manifest)					
Printed/Typed Name H. Clew		Signature H. Clew		Month Day Year 2 1 18	

Republic Services
Galveston County Landfill
FEE 01 2013
TDAHP Permit #1149-B
3936 Ave A Santa Fe TX 77510
281-337-3022

TRANSPORTER #1



6315 N Twin City Hwy
Beaumont, Texas 77705
(409)727-3335

Customer: San Leon Municipal District

Date: 2/2/18

Address: 1111 27th St

San Leon, Texas 77539

Driver: James

Commodity: WWT Sludge

Truck #: R603

TIME

Leave IW: 5:30 am/pm

In Plant: 6:20 am/pm

Out Plant: 6:40 am/pm

In Landfill: 7:00 am/pm

Out Landfill: 7:30 am/pm

In Plant: 7:50 am/pm

Out Plant: 8:00 am/pm

Back at IW: _____ am/pm

Del Swap Haul & Return Final Respot

Circle type of Unit

Size: 25yd

Type of Box: De-watering Box

Type of Box: 130BBL Tanker

De-watering Service for 16,509 Gallons

18 yds of WWT Sludge for Transport to Galveston County Republic Landfill

_____ gals Transported to Don Tol Landfill in Boling, TX

Customer Approval: K Boyd



REPUBLIC SERVICES

NON-HAZARDOUS WASTE MANIFEST

3706156

1. Generator's US EPA ID Number N/A	Manifest Document Number	2. Page 1 of
--	--------------------------	--------------

3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77589 409-727-3305	4. Phone ()	5. Generating Location (if different) SAME	6. Phone ()
--	--------------	---	--------------

7. Transporter #1 Company Name Import Waste & Recycling	8. US EPA ID Number TXR000094111	9. Transporter #1's Phone 409-727-3333
10. Transporter #2 Company Name	11. US EPA ID Number	12. Transporter #2's Phone

13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #11496 3925 AVENUE A ALTA LOMA, TX 77510	14. US EPA ID Number TXR000069865	15. Facility's Phone 713-678-7575
---	--------------------------------------	--------------------------------------

16. Waste Shipping Name and Description	17. Republic Services Approval # and Exp. Date	18. Containers		19. Total Quantity	20. Unit Wt/Vol
		No.	Type		
a. MUNICIPAL SLUDGE TCEQ #N/A	61141614945 12/02/19	1	Roll off	12	Yds
b. BILL CMS #233389					
c.					

21. Additional Descriptions for Materials Listed Above

22. Special Handling Instructions and Additional Information

23. **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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

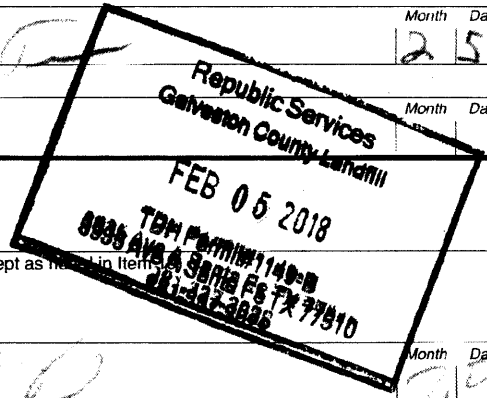
Printed/Typed Name Kenneth Boyd	Signature Kenneth Boyd	Month Day Year 2 2 18
------------------------------------	---------------------------	--------------------------

24. Transporter #1: Acknowledgement of Receipt of Materials		
Printed/Typed Name James Turner	Signature James Turner	Month Day Year 2 5 18

25. Transporter #2: Acknowledgement of Receipt of Materials		
Printed/Typed Name	Signature	Month Day Year

26. Discrepancy Indication Space

27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 16)		
Printed/Typed Name M. Turner	Signature M. Turner	Month Day Year 2 5 18



TRANSPORTER #1

GENERATOR

TRANSPORTER

T/S/D FACILITY



6315 N Twin City Hwy
Beaumont, Texas 77705
(409)727-3335

Customer: San Leon Municipal District

Date: 2/13/18

Address: 1111 27th St

San Leon, Texas 77539

Driver: BEHART

Commodity: WWT Sludge

Truck #: 120

TIME

Leave IW: _____ am/pm

In Plant: _____ am/pm

Out Plant: _____ am/pm

In Landfill: _____ am/pm

Out Landfill: _____ am/pm

In Plant: _____ am/pm

Out Plant: _____ am/pm

Back at IW: _____ am/pm

Del Swap Haul & Return Final Respot

Circle type of Unit

Size: 25yd

Type of Box: De-watering Box

Type of Box: 130BBL Tanker

De-watering Service for 14,770 Gallons

17 yds of WWT Sludge for Transport to Galveston County Republic Landfill

_____ gals Transported to Don Tol Landfill in Boling, TX

Customer Approval: _____



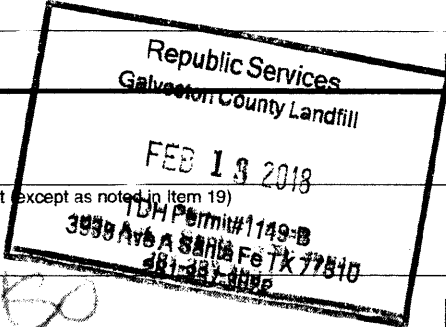
NON-HAZARDOUS WASTE MANIFEST

3706155

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of	
3. Generator's Name and Mailing Address SAN LEON MUD 448 24TH STREET SAN LEON, TX 77559 409-727-3386				5. Generating Location (if different) SAME	
4. Phone ()		6. Phone ()		9. Transporter #1's Phone 332-923-7281	
7. Transporter #1 Company Name Impact Waste		8. US EPA ID Number 2927454		10. Transporter #2 Company Name	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #1149B 3938 AVENUE A ALTA LOMA, TX 77510		14. US EPA ID Number TX 800069465		15. Facility's Phone 775-878-7875 120	
16. Waste Shipping Name and Description		17. Republic Services Approval # and Exp. Date		18. Containers	
a. MUNICIPAL SLUDGE TCEQ # N/A		51141614945 10/2018		19. Total Quantity	
b. BILL CMS #330389				20. Unit Wt/Vol 1000 vols	
c.					
21. Additional Descriptions for Materials Listed Above					
22. Special Handling Instructions and Additional Information					
23. 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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
Printed/Typed Name Kenneth Boyd		Signature Kenneth Boyd		Month Day Year 12 13 18	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name Joe Hart		Signature Joe Hart		Month Day Year 12 13 18	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)					
Printed/Typed Name H. Allen		Signature H. Allen		Month Day Year 12 13 18	

GENERATOR

TRANSPORTER



TRANSPORTER #1

RS-1



6315 N Twin City Hwy
Beaumont, Texas 77705
(409)727-3335

Customer: San Leon Municipal District

Date: 2/21/18

Address: 1111 27th St

San Leon, Texas 77539

Driver: JOE HART

Commodity: WWT Sludge

Truck #: 120

TIME

Leave IW: _____ am/pm

Del Swap Haul & Return Final Respot

In Plant: _____ am/pm

Circle type of Unit

Out Plant: _____ am/pm

Size: 25yd

In Landfill: _____ am/pm

Type of Box: De-watering Box

Out Landfill: _____ am/pm

In Plant: _____ am/pm

Out Plant: _____ am/pm

Type of Box: 130BBL Tanker

Back at IW: _____ am/pm

De-watering Service for 13,225 Gallons

15 yds of WWT Sludge for Transport to Galveston County Republic Landfill

_____ gals Transported to Don Tol Landfill in Boling, TX

Customer Approval: _____



NON-HAZARDOUS WASTE MANIFEST

3706153

1. Generator's US EPA ID Number N/A	Manifest Document Number	2. Page 1 of
--	--------------------------	--------------

3. Generator's Name and Mailing Address SAN LEON MUD 443 24TH STREET SAN LEON, TX 77839 408-727-8285	4. Phone ()	5. Generating Location (if different) SAME	6. Phone ()
--	--------------	---	--------------

7. Transporter #1 Company Name Impact Waste	8. US EPA ID Number 2927457	9. Transporter #1's Phone 332-923-7281
--	--------------------------------	---

10. Transporter #2 Company Name	11. US EPA ID Number	12. Transporter #2's Phone
---------------------------------	----------------------	----------------------------

13. Designated T/S/D Facility Name and Site Address GALVESTON COUNTY LANDFILL TX LP #11456 3935 AVENUE A ALTA LOMA, TX 77510	14. US EPA ID Number TVR000089666	15. Facility's Phone 713-676-7675
---	--------------------------------------	--------------------------------------

16. Waste Shipping Name and Description a. MUNICIPAL SLUDGE TCEQ # N/A b. BILL CM6 # 333369 c.	17. Republic Services Approval # and Exp. Date 51141814945 1/20/2019	18. Containers		19. Total Quantity 15	20. Unit Wt/Vol yds
		No.	Type Roll off		

21. Additional Descriptions for Materials Listed Above

22. Special Handling Instructions and Additional Information

23. **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 treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

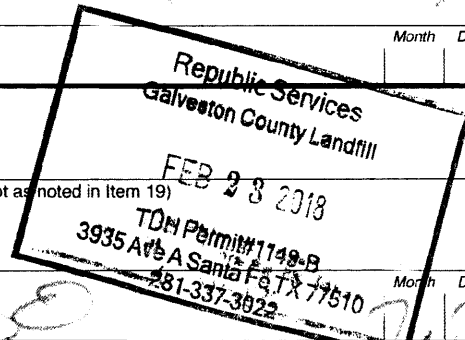
Printed/Typed Name Kenneth Boyd	Signature <i>Kenneth Boyd</i>	Month Day Year 10/24/18
------------------------------------	----------------------------------	----------------------------

24. Transporter #1: Acknowledgement of Receipt of Materials	Printed/Typed Name Joe Hart	Signature <i>Joe Hart</i>	Month Day Year 2/2/19
---	--------------------------------	------------------------------	--------------------------

25. Transporter #2: Acknowledgement of Receipt of Materials	Printed/Typed Name	Signature	Month Day Year
---	--------------------	-----------	----------------

26. Discrepancy Indication Space

27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)	Printed/Typed Name <i>[Signature]</i>	Signature <i>[Signature]</i>	Month Day Year
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TRANSPORTER #1

GENERATOR

TRANSPORTER

T/S/D FACILITY

REV01/14



**SUPERIOR
WASTE SOLUTIONS**

49924

5700 Procter St Ext
Port Arthur, TX 77642
(409) 727-3335

WEIGHMASTER		GRID		TICKET		REFERENCE	
Chris				307266			
ROLL OFF	VEHICLE	TIME IN	TIME OUT	DATE IN	DATE OUT		
		11:51	11:51	03/30/20	03/30/20		

Date 3/30/20 Time 8:00

Company City of San Leon

Location 1111 27th St, San Leon, TX

PO# _____

Job # _____

Contact/Phone _____

Driver Josh B. Truck # R109

DEL RESPOT EMPTY/RETURN EMPTY/NO RETURN SWAP

EQUIPMENT #
DW 3002

COMMENTS PA Invoice # 307266

START 8:00 AM FINISH 1:00 PM

IMPACT WASTE, LLC IS NOT RESPONSIBLE FOR ANY PROPERTY DAMAGE DUE TO EQUIPMENT PLACEMENT OR REMOVAL AS PER CUSTOMER INSTRUCTIONS.

PRINT NAME _____

SIGNED _____

City of Port Arthur Landfill
PO Box 1089
Port Arthur, TX 77641

004001 IndustrialTransWaste/ImpactWas

CONTAINER INSPECTION					
REAR DOOR	Y	N	BOX CONDITION	Y	N
SEAL:			HOLES:		
CLEAN			FRONT		HOW MANY?
CAULKED			LEFT SIDE		STRAPS MISSING
GOOD SEAL			RIGHT SIDE		CENTER
BINDERS DAMAGED:			DOOR		SIDE QTY:
SMALL			FLOOR		BOWS:
LARGE					MISSING
			CRANK HANDLE		DAMAGED
LINER INSTALLED			LABOR		ROLL PIPE

General Conditions Of Rental On Back



SUPERIOR
WASTE SOLUTIONS

49924

5700 Procter St Ext
Port Arthur, TX 77642
(409) 727-3335

SITE	TICKET	GRID	WEIGHMASTER
02	307266		Chris
DATE IN	DATE OUT	TIME IN	TIME OUT
03/30/20	03/30/20	11:51	11:51
VEHICLE	ROLL OFF	ORIGIN	
		REFERENCE	

Date 3/30/20 Time 8:00
 Company City of San Leon
 Location 1111 27th St, San Leon, Tx
 PO# _____
 Job # _____
 Contact/Phone _____
 Driver JSLB Truck # R109

DEL RESPOT EMPTY/RETURN EMPTY/NO RETURN SWAP

EQUIPMENT #
DW 3002

COMMENTS PA Invoice # 307266

START 8:00 AM FINISH 1:00 PM

IMPACT WASTE, LLC IS NOT RESPONSIBLE FOR ANY PROPERTY DAMAGE DUE TO EQUIPMENT PLACEMENT OR REMOVAL AS PER CUSTOMER INSTRUCTIONS.

PRINT NAME _____

SIGNED _____

CONTAINER INSPECTION					
REAR DOOR	Y	N	BOX CONDITION	Y	N
SEAL:			HOLES:		
CLEAN			FRONT		HOW MANY?
CAULKED			LEFT SIDE		STRAPS MISSING
GOOD SEAL			RIGHT SIDE		CENTER
BINDERS DAMAGED:			DOOR		SIDE QTY:
SMALL			FLOOR		BOWS:
LARGE					MISSING
			CRANK HANDLE		DAMAGED
LINER INSTALLED			LABOR		ROLL PIPE

General Conditions Of Rental On Back

City of Port Arthur Landfill
PO Box 1089
Port Arthur, TX 77641

004001 IndustrialTransWaste/ImpactWas



**SUPERIOR
WASTE SOLUTIONS**

49924

5700 Procter St Ext
Port Arthur, TX 77642
(409) 727-3335

SITE	TICKET	GRID	WEIGHMASTER		
02	307266		Chris		
DATE IN	DATE OUT	TIME IN	TIME OUT	VEHICLE	ROLL OFF
03/30/20	03/30/20	11:51	11:51		
REFERENCE			ORIGIN		

Date 3/30/20 Time 8:00
 Company City of San Leon
 Location 1111 27th St, San Leon, Tx
 PO# _____
 Job # _____
 Contact/Phone _____
 Driver Jsh B. Truck # R109

DEL RESPOT EMPTY/RETURN EMPTY/NO RETURN SWAP

EQUIPMENT #
DW 3002

COMMENTS PA Weighmaster # 307266

START 8:00 AM FINISH 1:00 PM

IMPACT WASTE, LLC IS NOT RESPONSIBLE FOR ANY PROPERTY DAMAGE DUE TO EQUIPMENT PLACEMENT OR REMOVAL AS PER CUSTOMER INSTRUCTIONS.

PRINT NAME _____

SIGNED _____

CONTAINER INSPECTION								
REAR DOOR	Y	N	BOX CONDITION	Y	N	TARP CONDITION	Y	N
SEAL:			HOLES:			HOLES:		
CLEAN			FRONT			HOW MANY?		
CAULKED			LEFT SIDE			STRAPS MISSING		
GOOD SEAL			RIGHT SIDE			CENTER		
BINDERS DAMAGED:			DOOR			SIDE	QTY:	
SMALL			FLOOR			BOWS:		
LARGE						MISSING		
LINER INSTALLED			CRANK HANDLE			DAMAGED		
			LABOR			ROLL PIPE		

General Conditions Of Rental On Back

City of Port Arthur Landfill
PO Box 1089
Port Arthur, TX 77641

004001 IndustrialTransWaste/ImpactWas



NON -HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. NA		Manifest Doc. No.		2. Page 1 of					
3. Generator's Mailing Address: City Of San Leon 1111 27th st San Leon, Tx 77539		Generators Site Address		A. Manifest Number							
				b. State Generator's ID NA							
4. Generator's Phone 936-402-3719		6. US EPA ID NUMBER TXR000084111		C. State Transporter ID 69614							
5. Transporter 1 Company Name Superior Waste Solutions P.O. Box 20413 Beaumont, Tx 77720				D. Transporters Phone 409-727-3335							
7. Transporter 2 Company Name		8. US EPA ID NUMBER		E. State Transporter ID							
9. Designated Facility Name & Address Port Arthur Landfill 4732 Texas 73 Beaumont, TX 77705				F. Transporters Phone							
10. US EPA ID NUMBER NA		G. State Facility ID									
		H. State Facility Phone 409-736-1341									
11. Description of Waste Materials		12. Containers		13. Total		14. Unit					
		No. Type		Quantity		wt/vol					
a. WWT Sludge		1 140		10		64					
b.											
c.											
J. Additional Description for Materials Above		K. Disposal Location									
		Cell		Level							
Grid											
15. Special Handling Instructions Additional Information SLUDGE PASSED PAINT FILTER TEST EPA METHOD 9095B YES or NO											
Purchase Order#		Emergency Contact/ Phone# Victor Cash 409-293-7317									
16. Generator's Certificate I Herby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.											
Printed Name <i>Mich Gatten</i>		Signature "on Behalf of"				Month		Day		Year	
						3		30		2011	
17. Transporter 1 Acknowledgement of Receipt of Materials											
Printed Name <i>Josh Briggs</i>		Signature				Month		Day		Year	
						3		30		20	
18. Transporter 2 Acknowledgement of Receipt of Materials											
Printed Name		Signature				Month		Day		Year	
19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.											
20. Facility Owner or Operator: Certification of Receipt of non-hazardous materials covered by this Manifest.											
Printed Name		Signature				Month		Day		Year	
						3		30		2011	



NON -HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. NA		Manifest Doc. No.		2. Page 1 of	
3. Generator's Mailing Address: City Of San Leon 1111 27th st San Leon, Tx 77539		Generators Site Address		A. Manifest Number			
				b. State Generator's ID NA			
4. Generator's Phone 936-402-3719		6. US EPA ID NUMBER TXR000084111		C. State Transporter ID 69614			
5. Transporter 1 Company Name Superior Waste Solutions P.O. Box 20413 Beaumont, Tx 77720				D. Transporters Phone 409-727-3335			
				E. State Transporter ID			
7. Transporter 2 Company Name		8. US EPA ID NUMBER		F. Transporters Phone			
9. Designated Facility Name & Address Port Arthur Landfill 4732 Texas 73 Beaumont, TX 77705		10. US EPA ID NUMBER NA		G. State Facility ID			
				H. State Facility Phone 409-736-1341			
11. Description of Waste Materials		a. WWT Sludge		12. Containers		13. Total	14. Unit
				No.	Type	Quantity	wt/vol
				1	R/o	10	ly4
b.							
c.							
J. Additional Description for Materials Above		K. Disposal Location					
		Cell		Level			
15. Special Handling Instructions Additional Information		SLUDGE PASSED PAINT FILTER TEST EPA METHOD 9095B YES <input checked="" type="checkbox"/> or NO <input type="checkbox"/>					
Purchase Order#		Emergency Contact/ Phone# Victor Cash 409-293-7317					
16. Generator's Certificate							
I Herby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.							
Printed Name <i>Victor Cash</i>		Signature "on Behalf of"		Month 3	Day 30	Year 2011	
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed Name <i>Josh Briggs</i>		Signature		Month 3	Day 30	Year 20	
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed Name		Signature		Month	Day	Year	
19. Certificate of Final Treatment/Disposal							
I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.							
20. Facility Owner or Operator: Certification of Receipt of non-hazardous materials covered by this Manifest.							
Printed Name		Signature		Month 3	Day 30	Year 2010	



NON -HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. NA	Manifest Doc. No.	2. Page 1 of		
3. Generator's Mailing Address: City Of San Leon 1111 27th st San Leon, Tx 77539		Generators Site Address	A. Manifest Number			
			b. State Generator's ID NA			
4. Generator's Phone 936-402-3719		6. US EPA ID NUMBER TXR000084111	C. State Transporter ID 69614			
5. Transporter 1 Company Name Superior Waste Solutions P.O. Box 20413 Beaumont, Tx 77720			D. Transporters Phone 409-727-3335			
7. Transporter 2 Company Name			E. State Transporter ID			
9. Designated Facility Name & Address Port Arthur Landfill 4732 Texas 73 Beaumont, TX 77705		10. US EPA ID NUMBER NA	G. State Facility ID			
			H. State Facility Phone 409-736-1341			
11. Description of Waste Materials		12. Containers		14. Unit		
		No.	Type	Quantity	wr/vol	
a. WWT Sludge		1	12/0	10	44	
b.						
c.						
J. Additional Description for Materials Above		K. Disposal Location				
		Cell	Level			
Grid						
15. Special Handling Instructions Additional Information SLUDGE PASSED PAINT FILTER TEST EPA METHOD 9095B YES or NO						
Purchase Order# _____ Emergency Contact/ Phone# Victor Cash 409-293-7317						
16. Generator's Certificate I Herby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.						
Printed Name <i>Mike Britton</i>		Signature "on Behalf of"		Month 3	Day 30	Year 2011
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed Name <i>Josh Briggs</i>		Signature		Month 3	Day 30	Year 20
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed Name		Signature		Month	Day	Year
19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.						
20. Facility Owner or Operator: Certification of Receipt of non-hazardous materials covered by this Manifest.						
Printed Name		Signature		Month 3	Day 30	Year 2011

Monday, Jun 3, 2019 • 4:11 PM

Just so you're aware: Impact hauled off this morning and we found this midday. After we got a hold of someone, we found out their truck was stopped by DOT for a weigh-in and was over, so they came back here and dumped without notifying us. I told them that we could've just redirected then to the drying beds, but they need to clean it up. However, the guys they sent said they didn't have the equipment to clean all it up, so we're having Robert handle it then we'll be forwarding that invoice to Impact for payment/reimbursement

WATCH YOUR STEPS



Invoice for payment

Date 6/11/2019 3:32 PM
From amiller@slmud.org on behalf of Andrew Miller
Actionable/To kevine@impactrecycle.com
FYI/CC sdoncarlos@rsg-llp.com

See attached for an invoice we're requesting Impact pay due to costs associated with the cleanup of dumped sludge at our facility. If you have any questions, let me know.

Get [Outlook for Android](#)



INVOICE

SAN LEON MUD
 443 24TH ST
 SAN LEON TX 77539

slmud1@smud.org

DATE: 06-10-2019

INVOICE: #233

1131 10TH ST

SAN LEON TX. 77539
 PHONE (409) 795-1248

VACUUM TRUCK INVOICE

DATE	ADDRESS	WORK DESCRIPTION	HOURS	PRICE	TOTAL
6/6/19 - 6/7/19	WATER TREATMENT PLANT	CLEAN SLUDGE IN CONTAINER BAY LEFT BY CONTAINER COMPANY			\$1,550.00
					\$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
					\$0.00
					\$0.00
				TOTAL	\$1,550.00

**** includes time spent on discharge and decontamination of the truck.**

Make all checks payable to R.S. SMOKE TEST & MULTI SERVICES

THANK YOU FOR YOUR BUSINESS!