PEORIA CITY/COUNTY LANDFILL COMMITTEE
REGULAR BUSINESS MEETING AGENDA

WEDNESDAY, JUNE 21, 2017

*******3:00 P.M.*******

DATES SET:

WEDNESDAY, July 19, 2017 @ 3:00 p.m.
REGULAR COMMITTEE MEETING – To be held at City Hall 419 Fulton Street - Room 404, Peoria Illinois 61602.

WEDNESDAY, August 16, 2017 @ 3:00 p.m.
REGULAR COMMITTEE MEETING – To be held at City Hall 419 Fulton Street - Room 404, Peoria Illinois 61602.

WEDNESDAY, September 20, 2017 @ 3:00 p.m.
REGULAR COMMITTEE MEETING – To be held at City Hall 419 Fulton Street - Room 404, Peoria Illinois 61602.

PEORIA CITY/COUNTY LANDFILL COMMITTEE
AGENDAS AND MINUTES
ISSUED BY:

Stephen M. Morris, CHAIRMAN
CITY OF PEORIA
419 Fulton Street – Room 404
(309) 494-8800
INTERNET ADDRESS: www.peoriagov.org

To access electronic Agenda & Minutes (only):
1. www.peoriagov.org/boards-commissions/
2. Choose Solid Waste Disposal Committee (Landfill)
3. Scroll to the bottom of the screen. Under "Agenda & Minutes" will be a list of the .pdf postings.
4. Select desired document and double click to open.

*CITIZENS WISHING TO ADDRESS AN ITEM NOT ON THE AGENDA SHOULD CONTACT A COMMITTEE MEMBER PRIOR TO THE MEETING. ALL OTHER PUBLIC INPUT WILL BE HEARD UNDER PUBLIC COMMENT AT THE BEGINNING OF THE COMMITTEE MEETING.

NOTE: THE ORDER IN WHICH AGENDA ITEMS ARE CONSIDERED MAY BE MOVED FORWARD OR DELAYED BY AT LEAST 2/3 VOTE OF THE COMMITTEE MEMBERS PRESENT.

THE PEORIA CITY/COUNTY LANDFILL COMMITTEE MEETS IN REGULAR BUSINESS SESSIONS THE THIRD WEDNESDAY OF THE MONTH (JANUARY THROUGH NOVEMBER) AT 3:00 P.M. AT CITY HALL, 419 Fulton Street - Room 404, PEORIA, ILLINOIS.

DURING THE MONTH OF DECEMBER, PEORIA CITY/COUNTY LANDFILL COMMITTEE WILL NOT MEET UNLESS A SPECIAL MEETING IS CALLED. NOTICES OF ANY SPECIAL MEETING ARE POSTED AT LEAST 48 HOURS PRIOR.
CITIZENS’ OPPORTUNITY TO ADDRESS THE COMMITTEE

MINUTES

REQUEST FOR APPROVAL OF THE PEORIA CITY/COUNTY LANDFILL MINUTES
Dated: Wednesday, May 17, 2017

AGENDA ITEMS

ITEM NO. 1 REPORT FROM FOTH INFRASTRUCTURE & ENVIRONMENT, LLC
A. SPECIAL WASTE APPROVALS AS NEEDED
B. PERMIT APPROVALS AS NEEDED
C. UPDATE ON THE ANNUAL AIRSPACE EVALUATION
D. UPDATES REGARDING COMPLIANCE ACTIVITIES, MEASURES & PROGRESS

ITEM NO. 2 REQUEST TO APPROVE THE EXTENSION OF THE ENGINEERING SERVICES AGREEMENT WITH FOTH INFRASTRUCTURE & ENVIRONMENT, LLC

ITEM NO. 3 LANDFILL COMMITTEE’S MONTHLY FINANCIAL REPORTS

ITEM NO. 4 REPORT FROM WASTE MANAGEMENT
A. MONTHLY ACTIVITY REPORT
B. PERMIT APPROVALS AS NEEDED

ITEM NO. 5 REPORT FROM PEORIA DISPOSAL CO.
A. UPDATE REGARDING TOUR OF HCM FACILITY AT WASTE COMMISSION OF SCOTT COUNTY, IA ON MAY 24, 2017
B. UPDATE ON NPDES PERMIT RECEIVED FOR LANDFILL NO. 3 AND THE HCM FACILITY

UNFINISHED BUSINESS

ITEM NO. 1 UPDATE REGARDING THE LANDFILL FUND BALANCE RESERVE POLICY
ITEM NO. 2 UPDATE REGARDING THE DISPOSAL POLICY FOR PCCL #2
NEW BUSINESS

**NEXT MEETING**

JULY 19, 2017 @ 3:00 P.M.
CITY HALL – 419 FULTON STREET, ROOM 404

EXECUTIVE SESSION

ADJOURNMENT
Peoria City/County Landfill Committee Meeting (5/17/17)

Peoria, Illinois, May 17, 2017, a Regular Meeting of the Peoria City/County Landfill Committee was held this date at 3:05 p.m., at City Hall, (Room 404), 419 Fulton Street with Chairman Morris presiding, and with proper notice having been posted.

ATTENDANCE

MEMBERS PRESENT: Rick Fox, Steve Morris, Patrick Nichting and Steve Van Winkle – 4.

MEMBERS ABSENT: Lester Bergsten, Zach Oyler and Sharon Williams – 3.

CITY/COUNTY STAFF PRESENT: Karen Raithel, Scott Reese and Stephanie Stapleton.

OTHERS PRESENT: Joyce Blumenshine, Chris Coulter, Josh Gabehart, Steve Harenburg, Mark Williams and Jerry Wyatt.

ANNOUNCEMENTS

• NATIONAL PUBLIC WORKS WEEK OPEN HOUSE – MAY 26TH, 2017 FROM 4:00 P.M. – 7:00 P.M.

CITIZENS OPPORTUNITY TO ADDRESS THE COMMITTEE

Joyce Blumenshine, Heart of Illinois Sierra Club commented on the amended language in regard to Illinois Senate Bill 1561 and thanked Mr. Coulter for the update at the previous Landfill meeting.

Mr. Jerry Wyatt stated that a large quantity of shingles were dumped on Murphy Road. He indicated that the County was notified of the incident; however, while going through the pile he found a bill of lading and was able to identify who dumped the shingles. He noted that the County Sherriff was called regarding this matter and given the name of the party responsible for the shingles left on the road. Unfortunately, the matter was turned over the township for cleanup. He stated that he felt the matter should have been addressed further instead of being turned over the township.

Chairman Morris stated that he would call the County Sherriff’s office to find out the status of the report.

In discussion with Mr. Wyatt, Mr. Nichting stated that he’d like to meet with the City Manager, Patrick Urich after the meeting to determine whether a bill could be sent to the business to cover the cost of the cleanup.

Mr. Wyatt stated that he had photos of the shingles that were dumped on the road.

MINUTES

Mr. Van Winkle moved to approve the Minutes of the Regular Meeting of the Peoria City/County Landfill Committee held on April 19, 2017; seconded by Mr. Fox.

The minutes were approved by viva voce vote.
AGENDA ITEMS

ITEM NO. 1: REPORT FROM FOTH INFRASTRUCTURE & ENVIRONMENT, LLC

(A) SPECIAL WASTE APPROVALS AS NEEDED

Mr. Gabehart stated that there were five (5) non-special waste profiles. He noted that two (2) profiles were pre-approved per the Treated Wood-Weathered Policy; two (2) were pre-approved per the Asbestos Containing Material (ACM) Policy; and the final profile was a five-year renewal of an existing approved profile. Based on the information provided, he said that Foth had no technical objections for the acceptance of these waste streams.

- Iowa Interstate Railroad, Profile #617181IL and Miller Excavating, Profile #617268IL for Treated Wood-Weathered Policy.
- Miller Excavating, Profile #617268IL and Ingersoll Middle School, Profile #617300IL, ACM Policy
- Praxair, Inc., Profile #105627IL, five-year renewal of existing approved profile.

Mr. Gabehart distributed an updated copy of the Procedures for General Refuse and Special Waste Received manual, which included approved updates from the IEPA for the treated wood.

No action required.

(B) PERMIT APPROVALS AS NEEDED

Mr. Gabehart stated that there were no other permit approvals, at this time. He did not anticipate any other reports that would require Chairman Morris’ or Director Reeise’s signature, he respectfully requested approval to obtain Chairman Morris’ or Director Reeise’s signatures, should the need arise prior to the next Committee meeting.

Mr. Fox moved to approve the request to obtain Chairman Morris’ and Director Reeise’s signature for permit approvals prior to the next scheduled meeting should the need arise; seconded Mr. Van Winkle.

The motion was approved by viva voce vote.

(C) UPDATE 1st QUARTER 2017 GROUNDWATER UPDATE

Mr. Gabehart summarized the Quarterly Monitoring results. During the 1st quarter, he noted that there were several observed increases and assessment monitoring plans. As it pertained to the observed increases, he explained that the sampling crew noted high turbidity in the collected samples. He stated that the IEPA was notified of the increased turbidity in the groundwater samples collected at Well G15S during the 1st quarter 2017 sampling event, it appeared to be the source of the increased concentration for these select parameters, which was not indicative of actual groundwater concentrations. If the turbidity continued to be an issue with this well sample, he stated that collection techniques would be modified to try and reduce turbidity in the groundwater sample.

(D) UPDATES REGARDING COMPLIANCE ACTIVITIES, MEASURES & PROGRESS

- Financial Information

Mr. Gabehart outlined the engineering services provided from July 1, 2016 through April 30, 2017. He stated that the total amount billed to-date was $247,034.57.
Updates Regarding Compliance Activities, Measurers and Progress

Mr. Gabehart stated that there were two unscheduled shutdowns in April. On April 3rd, a shutdown occurred during the afternoon, which was caused by a short in the transformer located at the utility pole adjacent to the flare causing a power loss at the flare. He noted that Ameren was called to the site to diagnose the issue and replaced two transformers. The shutdown totaled 19 hours and 12 minutes, he said. The second shutdown occurred on April 8th caused by failure of the blower motor starter electrical components, which cause the blower motor to malfunction. He stated that total shutdown time for the blower motor totaled 86 hours and 49 minutes. Prior to these events, he stated that the total shutdown time was 19 minutes.

During the month of April, Mr. Gabehart stated that the gas wells pumped with the Blackhawk solar panel pumps (C-1, B-1, and B-7) along with pneumatic pumping of leachate manholes and gas well T-5 totalled 28,500 gallons of leachate/condensate were transported to the Greater Peoria Sanitary District (GPSD).

Mr. Gabehart stated that the planned budget for engineering services was currently 87.3% complete and current time period percent complete of the contract was 83.3% with the current expenditures at 82.7% of the approved engineering budget, at this time.

Mr. Gabehart pointed out that the tonnage was down approximately 2,000 tons compared to the five-year average in March. He explained that the averages were down and he would continue to monitor. He noted that the volumes would be below the projected 200,000 tons, if these trends continued.

Mr. Coulter noted that PDC’s volumes for 2016 were down 5,000 tons.

No action required.

**ITEM NO. 2  REQUEST TO APPROVE THE EXTENSION OF THE ENGINEERING SERVICES AGREEMENT WITH FOTH INFRASTRUCTURE & ENVIRONMENT, LLC**

Chairman Morris recommended that this item be deferred for one month to allow ample time for negotiations.

Mr. Van Winkle moved to defer the Extension of the Engineering Services Agreement with Foth Infrastructure & Environment, LLC for one month; seconded by Mr. Fox.

Motion was approved by viva voce vote.

**ITEM NO. 3  LANDFILL MONTHLY BUDGET REPORT**

Director Reeise gave a brief update of the monthly financial report. He noted that the revenues were above the expenditures for the year, but there are some anticipated costs for a capital project later in the year. He explained that Capital Improvement project would cost approximately $100,000, which would leave a $55,000 deficit for 2017. He noted that staff would continue to look for ways to reduce the project cost and trim the budget.

In discussion with Chairman Morris, Director Reeise stated that he would continue to monitor the expenses over the next two months then he would consider some additional alternatives to modify the budget.

Mr. Fox stated that he’d like to have continued discussions regarding the Capital Improvement project because he felt that cost would increase if the project was stopped to save funds. He expressed concern in regard on the impact the project would have at the landfill if it was delayed.

Mr. Nichting recommended that the project be put out for bid to determine the actual cost.
Mr. Reeise noted that staff would move forward with advertising the project and would report back with recommendations to the Committee in July with the proposed bid.

No action required.

- **RECEIVE AND FILE MONTHLY FINANCIAL REPORTS NET BALANCE VARIANCE FROM ENDING CASH BALANCE**

Director Reeise gave a brief overview of the difference between the cash beginning and ending balance versus the financial report net amount ending balance. He explained the major reasons for the variance in the two balances stem from the basis of the accounting method used and the effect of timing on these transactions. He further explained that the bank statement amounts listed at the bottom of the report reflect the cash balance in the PCCL’s bank account at the beginning and ending of a particular month, along with the cash transaction occurring throughout the month.

**ITEM NO. 4 REPORT FROM WASTE MANAGEMENT, INC.**

No representatives were present for WM to provide a monthly update.

**ITEM NO. 5 REPORT FROM PEORIA DISPOSAL**

A. **UPDATE ON NEXT STEPS WITH DEWBERRY REGARDING THE HCM FACILITY**

Mr. Coulter stated that the visit to the Household Hazardous Waste Facilities in Scott County had been scheduled.

B. **UPDATE ON ILLINOIS SENATE BILL 1561**

Mr. Coulter stated that Illinois Senate Bill 1561 had been amended. He stated that the Senate had passed the Bill and it was now at the Illinois House of Representatives for its consideration.

**UNFINISHED BUSINESS**

**ITEM NO. 1 UPDATE REGARDING THE LANDFILL FUND BALANCE RESERVE POLICY**

Chairman Morris requested that the item remain on the Agenda and be discussed further at the next scheduled meeting.

The Committee concurred.

**ITEM NO. 2 UPDATE REGARDING THE DISPOSAL POLICY FOR PCCL #2**

The item would remain on the Agenda.

Mr. Van Winkle expressed concern that there were no representatives from Waste Management in attendance.

**NEW BUSINESS**

NONE.

**NEXT MEETING**

The next scheduled meeting will be held on **Wednesday, July 19th at City Hall, 419 Fulton Street (Room 404).**
EXECUTIVE SESSION

REQUESTING APPROVAL OF A MOTION FOR THE PEORIA CITY/COUNTY LANDFILL COMMITTEE GO INTO EXECUTIVE SESSION TO DISCUSS 2(c)(11) LITIGATION, WHEN AN ACTION AGAINST, AFFECTING, OR ON BEHALF OF THE PARTICULAR PUBLIC BODY HAS BEEN FILED AND IS PENDING BEFORE A COURT OR ADMINISTRATIVE TRIBUNAL, OR WHEN THE PUBLIC BODY FINDS THAT SUCH AN ACTION IS PROBABLE OR IMMINENT.

ADJOURNMENT

There being no further discussion, the Chairman declared the meeting adjourned.

Approved by viva voce vote.

The Landfill Committee adjourned at 3:45 p.m.

________________________
Stephen Morris, Chairman

/ss
REQUEST FOR DISCUSSION

To: Peoria City/County Landfill Committee Members
From: Joshua Gabehart, P.E., Mark Williams, Foth

AGENDA DATE REQUESTED: June 21, 2017

ACTION REQUESTED: Receive and file nine (9) pre-approved non-special waste profiles.

BACKGROUND: Four waste profiles 617349IL (Glynn’s Demolition), 617476IL (Galesburg High School), 617524IL (Ameren Illinois), and 617557IL (River City Roofing Co, Inc.) were pre-approved per the Asbestos Containing Material (ACM) Policy. Profile 617417IL (Illinois Department of Transportation) was pre-approved per the Contaminated Soil and Debris Policy. Four (4) profiles ASB25605, ASB25606, ASB25607 and ASB25608 all from M&O Environmental Company are five (5) year renewals of existing approved profiles.

A memorandum is attached, which reviews the profiles and includes information pertaining to each profile.

Based on the information provided, Foth has no technical objections for the acceptance of waste streams listed above.

FINANCIAL IMPACT: N/A
MEMORANDUM

TO: Joint City of Peoria - County of Peoria Solid Waste Committee

DATE: June 21, 2017

FROM: Mark Williams

NUMBER: 16P200.00

SUBJECT: Special Waste Permits

Waste Management has presented the following waste streams.

Pre-Approved Waste Streams (No Action is Required. For Information Only)

- Glynn’s Demolition, Magnolia, IL, Profile 617349IL, ACM Policy, 20 yard, one-time
- Galesburg High School, Galesburg, IL, Profile 617476IL, ACM Policy, 10 tons, one-time
- Ameren Illinois, Gilson, IL, Profile 617524IL, ACM Policy, 15 tons, one-time
- River City Roofing Co, Inc, Morton, IL Profile 617557IL, ACM Policy, 3 tons, one-time
- Illinois Department of Transportation, Peoria, IL, Profile 617417IL, Contaminated Soil and Debris Policy, 570 yards, one-time
- M &O Environmental, Peoria, IL, Profile ASB25605, Renewal, ACM Policy, 200 tons, repeat
- M &O Environmental, Peoria, IL, Profile ASB25606, Renewal, ACM Policy, 50 tons, repeat
- M &O Environmental, Peoria, IL, Profile ASB25607, Renewal, ACM Policy, 500 tons, repeat
- M &O Environmental, Peoria, IL, Profile ASB25608, Renewal, ACM Policy, 200 tons, repeat

The profiles are attached.

Committee approval does not relieve the Generator and Landfill Operator from complying with all applicable laws and regulations.
EZ Profile™

Requested Facility: Peoria City County Landfill, 11501 Cottonwood Road, Brimfield, IL
☐ Unsure Profile Number: 617349IL AR 5/8/17
☐ Multiple Generator Locations (Attach Locations) ☐ Request Certificate of Disposal ☐ Renewal? Original Profile Number: 

A. GENERATOR INFORMATION (MATERIAL ORIGIN)
1. Generator Name: Glynn's Demolition
2. Site Address: Mulberry Street
   (City, State, ZIP) Magnolia, IL, 61336
3. County: Putnam
4. Contact Name: Ed Hartwig Trucking & Excavating, Inc.
5. Phone: 309/364-3672
   Fax: 309/364-2666
6. Generator EPA ID: ___________________ ☐ N/A
7. State ID: ___________________ ☐ N/A

B. BILLING INFORMATION
☐ SAME AS GENERATOR
1. Billing Name: Ed Hartwig Trucking & Excavating, Inc.
2. Billing Address: 3121 Jefferson Street
   (City, State, ZIP) Henry, IL, 61537
3. Contact Name: Chad Hartwig or JoVanna Kocher
4. Phone: 309/364-3672
   Fax: 309/364-2666
7. WM Hauled? ☐ Yes ☐ No
8. R.O. Number: ___________________
9. Payment Method: ☐ Credit Account ☐ Cash ☐ Credit Card

C. MATERIAL INFORMATION
1. Common Name: Non-Friable Asbestos
   Describe Process Generating Material: ☐ See Attached
2. Material Composition and Contaminants: ☐ See Attached
   1. Non-Friable Asbestos (Uncontaminated) 0-100% ☐ N/A
      2. ☐ N/A
      3. ☐ N/A
      4. ☐ N/A
   Total comp. must be equal to or greater than 100% ☐ ≥100%
3. State Waste Codes: ___________________ ☐ N/A
4. Color: Various
5. Physical State at 70°F: ☐ Solid ☐ Liquid ☐ Other: ___________________
6. Free Liquid Range Percentage: _____________ to _____________ ☐ N/A
7. pH: _______________ to _______________ ☐ N/A
8. Strong Odor: ☐ Yes ☐ No Describe: ___________________
9. Flash Point: ☐ <140°F ☐ 140°-199°F ☐ ≥200°F ☐ N/A

D. REGULATORY INFORMATION
1. EPA Hazardous Waste? ☐ Yes* ☐ No
2. State Hazardous Waste? ☐ Yes ☐ No
3. Is this material non-hazardous due to Treatment, Delisting, or an Exclusion? ☐ Yes* ☐ No
4. Contains Underlying Hazardous Constituents? ☐ Yes* ☐ No
5. From an industry regulated under Benene NESHAP? ☐ Yes* ☐ No
6. Facility remediation subject to 40 CFR 63 GGGGG? ☐ Yes* ☐ No
7. CERCLA or State-mandated clean-up? ☐ Yes* ☐ No
8. NRC or State-regulated radioactive or NORM waste? ☐ Yes* ☐ No
*If Yes, see Addendum (page 2) for additional questions and space.
9. Contains PCBs? ☐ Yes ☐ No
   a. Regulated by 40 CFR 761? ☐ Yes ☐ No
   b. Remediation under 40 CFR 761.61 (a)? ☐ Yes ☐ No
   c. Were PCB imported into the US? ☐ Yes ☐ No
10. Regulated and/or Untreated Medical/Infectious Waste? ☐ Yes ☐ No
11. Contains Asbestos? ☐ Yes ☐ No
    ☐ If Yes, ☐ Non-Friable ☐ Non-Friable - Regulated ☐ Friable

E. ANALYTICAL AND OTHER REPRESENTATIVE INFORMATION
1. Analytical attached ☐ Yes
   Please identify applicable samples and/or lab reports:
   PDC Laboratories, Inc.
   2231 West Ahrens Drive
   Peoria, IL 61615
2. Other information attached (such as MSDS)? ☐ Yes

F. GENERATOR CERTIFICATION (PLEASE READ AND CERTIFY BY SIGNATURE)
By signing the EZ Profile™ form, I hereby certify that all information submitted in this document is true and accurate. The information submitted is necessary for proper material characterization and to identify potential hazardous materials and suspected hazards that has been provided. Any analytical data attached was derived from a sample that is representative as defined in 40 CFR 261 - Appendix 1 or by another equivalent method. All changes occurring in the character of the material (i.e., changes in the process or new analysis) will be identified by the Generator and be disclosed to Waste Management prior to providing the material to Waste Management.

If I am an agent signing on behalf of the Generator, I have confirmed with the Generator that the information contained in this Profile is accurate and complete.

Name (Print): Terry Glynn
Title: Owner
Company: Glynn's Demolition
Date: 5/4/17

THINK GREEN: QUESTIONS? CALL 800 963 4776 FOR ASSISTANCE

Revised June 30, 2015
©2015 Waste Management
A. GENERATOR INFORMATION (MATERIAL ORIGIN)
1. Generator Name: Galesburg High School
2. Site Address: 1135 West Fremont Street
   (City, State, ZIP) Galesburg IL 61401
3. County: Knox
4. Contact Name: Ray Sarkis
5. Email: rsarkis@maa-chi.com
6. Phone: (630) 541-8718
7. Fax: (630) 541-8718
8. Generator EPA ID: N/A
9. State ID: N/A

B. BILLING INFORMATION
1. Billing Name: Midwest Asbestos Abatement Corporation
2. Billing Address: 560 Turner Blvd
   (City, State, ZIP) St Peters MO 63376
3. Contact Name: Jay Giesler
4. Email: jgiesler@maa-stl.com
5. Phone: (636) 926-7800
6. Fax: 560 Turner Blvd

C. MATERIAL INFORMATION
1. Common Name: Asbestos-Non-Friable
   Describe Process Generating Material: See Attached
   Demolition/renovation - when dry, cannot be crumbled, pulverized or reduced to powder by hand pressure. Including gaskets, resilient floor coverings and asphalt roofing products (specify in C.2.) Does not include clean-up wastes, such as

2. Material Composition and Contaminants: See Attached

D. REGULATORY INFORMATION
1. EPA Hazardous Waste? Yes*
   Code: 6702
2. State Hazardous Waste? Yes*
   Code: A102
3. Is this material non-hazardous due to Treatment, Delisting, or an Exclusion? Yes*
4. Contains Underlying Hazardous Constituents? Yes*
5. From an industry regulated under Benzene NESHAP? Yes*
6. Facility remediation subject to 40 CFR 63 GGGGG? Yes*
7. CERCLA or State-mandated clean-up? Yes*
8. NRC or State-regulated radioactive or NORM waste? Yes*
9. Contains PCBs? Yes
   a. Regulated by 40 CFR 761?
   b. Remediation under 40 CFR 761.61 (a)?
   c. Were PCB imported into the US?
10. Regulated and/or Untreated Medical/Infectious Waste? Yes
11. Contains Asbestos? Yes
   a. Non-Friable
   b. Non-Friable
   c. Friable

E. ANALYTICAL AND OTHER REPRESENTATIVE INFORMATION
1. Analytical attached Yes
2. Other information attached (such as MSDS)? Yes

F. SHIPPING AND DOT INFORMATION
1. One-Time Event Repeat Event/Ongoing Business
2. Estimated Quantity/Unit of Measure: Tons
   Drums
   Gallons
3. Container Type and Size: 40 yard roll off
4. USDOT Proper Shipping Name: N/A

G. GENERATOR CERTIFICATION (PLEASE READ AND CERTIFY BY SIGNATURE)
By signing this EZ Profile™ form, I hereby certify that all information submitted in this and all attached documents contain true and accurate descriptions of this material, and that all relevant information necessary for proper material characterization and to identify known and suspected hazards has been provided. Any analytical data attached was derived from a sample that is representative as defined in 40 CFR 261 - Appendix 1 or by using an equivalent method. All changes occurring in the character of the material (i.e., changes in the process or new analytical) will be identified by the Generator and be disclosed to Waste Management prior to providing the material to Waste Management.

If I am an agent signing on behalf of the Generator, I have confirmed with the Generator that information contained in this Profile is accurate and complete.

Name (Print): Ray Sarkis Date: 05/24/2017
Title: Branch Manager
Company: Midwest Service Group

Certification Signature: Ray Sarkis
C. MATERIAL INFORMATION

Describe Process Generating Material (Continued from page 1):

soils, that are contaminated with nonfriable asbestos.

If more space is needed, please attach additional pages.

Material Composition and Contaminants (Continued from page 1):

If more space is needed, please attach additional pages.

5.  
6.  
7.  
8.  
9.

Total composition must be equal to or greater than 100% ≥100%

D. REGULATORY INFORMATION

Only questions with a “Yes” response in Section D on the EZ Profile™ form (page 1) need to be answered here.

1. EPA Hazardous Waste
   a. Please list all USEPA listed and characteristic waste code numbers:

b. Is the material subject to the Alternative Debris standards (40 CFR 268.45)? □ Yes □ No
   c. Is the material subject to the Alternative Soil standards (40 CFR 268.49)? □ Yes □ No
   d. Is the material exempt from Subpart CC Controls (40 CFR 264.1083)?
      □ Yes □ No
      → If Yes, please check one of the following:
      □ Waste meets LDR or treatment exemptions for organics (40 CFR 264.1082(c)(2) or (c)(4))
      □ Waste contains VOCs that average <500 ppmw (40 CFR 264.1082(c)(1)) – will require annual update.

2. State Hazardous Waste
   b. Please list all state waste codes:

3. For material that is Treated, Delisted, or Excluded
   Please indicate the category, below:
   □ Delisted Hazardous Waste □ Excluded Waste under 40 CFR 261.4 □ Specify Exclusion: __________
   □ Treated Hazardous Waste Debris □ Treated Characteristic Hazardous Waste
      → If checked, complete question 4.

4. Underlying Hazardous Constituents
   Please list all Underlying Hazardous Constituents:

5. Industries regulated under Benzene NESHAP includepetroleum refineries, chemical manufacturing plants, coke by-product recovery plants, and TSDFs.
   a. Are you a TSDF? □ Yes □ No
      → If yes, please complete Benzene NESHAP questionnaire. If not, continue.
   b. Does this material contain benzene?
      □ Yes □ No
      1. If yes, what is the flow weighted average concentration?
      □ <1 Mg □ 1 – 9.99 Mg □ ≥10 Mg
   c. What is your facility’s current total annual benzene quantity in Megagrams?
      □ Yes □ No
   d. Is this waste soil from a remediation?
      □ Yes □ No
   e. Does the waste contain >10% water/moisture?
   f. Has material been treated to remove 99% of the benzene or to achieve <10 ppmw?
   g. Is material exempt from controls in accordance with 40 CFR 61.342?
      □ Yes □ No
      → If yes, specify exemption:
   h. Based on your knowledge of your waste and the BWON regulations, do you believe that this waste stream is subject to treatment and control requirements at an off-site TSDF?
      □ Yes □ No

6. 40 CFR 63 GGGGG
   → Does the material contain <500 ppmw VOHAPs at the point of determination?
   □ Yes □ No

7. CERCLA or State-Mandated cleanup
   → Please submit the Record of Decision or other documentation with process information to assist others in the evaluation for proper disposal. A “Determination of Acceptability” may be needed for CERCLA wastes not going to a CERCLA approved facility.

8. NRC or state regulated radioactive or NORM Waste
   → Please identify isotopes and pCi/g: __________
Requested Facility: Peoria City - County & Envirofil
  □ Uns. Profile Number: 617524IL_AR 6/1/17
  □ Multiple Generator Locations (Attach Locations)  □ Request Certificate of Disposal  □ Renewal? Original Profile Number: ______________

A. GENERATOR INFORMATION (MATERIAL ORIGIN)
1. Generator Name: Ameren Illinois
2. Site Address: 1249 IL 61797
   (City, State, ZIP) Grove IL 61430
3. County: Knox
4. Contact Name: J. H. Bell
5. Email: jbell@ameren.com
6. Phone: 217-424-6884  7. Fax: N/A
8. Generator EPA ID:  N/A
9. State ID:  N/A

B. BILLING INFORMATION
1. Billing Name: Triple A Asbestos Services, Inc
2. Billing Address: PO Box 167705 Springfield, IL 62706
3. Contact Name: Tom Austif
4. Email: Tom.Austif@C,associates.net
7. WM Hauled?  □ Yes  □ No
8. P.O. Number: N/A
9. Payment Method:  □ Credit Account  □ Cash  □ Credit Card

C. MATERIAL INFORMATION
1. Common Name: Non-Friable Asbestos
   Describe Process Generating Material:  □ See Attached
   Demolition/renovation - when dry, cannot be crumbled, pulverized or reduced to powder by hand pressure. Including sealants, resilient floor coverings and asphalt roofing products (specify in C.2). Does not include clean-up wastes, such as
2. Material Composition and Contaminants:  □ See Attached
   1. Non-Friable Asbestos (Uncontaminated)  0-100 %
    2.  
    3.  
    4.  
   Total comp. must be equal to or greater than 100%  >100 %
3. State Waste Codes:  N/A
4. Color:  Various
5. Physical State at 70°F:  □ Solid  □ Liquid  □ Other:
6. Free Liquid Range Percentage:  N/A
7. pH:  N/A
8. Strong Odor:  □ Yes  □ No  Describe:
9. Flash Point:  □ <140°F  □ 140°-199°F  □ >200°  □ N/A

D. REGULATORY INFORMATION
1. EPA Hazardous Waste?  □ Yes*  □ No
2. State Hazardous Waste?  □ Yes  □ No
3. Is this material non-hazardous due to Treatment, Delisting, or an Exclusion?  □ Yes*  □ No
4. Contains Underlying Hazardous Constituents?  □ Yes*  □ No
5. From an industry regulated under Benzene NESHAP?  □ Yes*  □ No
6. Facility remediation subject to 40 CFR 60 6000?  □ Yes*  □ No
7. CERCLA or State-mandated cleanup?  □ Yes*  □ No
8. NRC or State-regulated radioactive or NORM waste?  □ Yes*  □ No
9. Contains PCBs?  □ Yes  □ No
   a. Regulated by 40 CFR 761?  □ Yes  □ No
   b. Remediation under 40 CFR 761.61 (a)?  □ Yes  □ No
   c. Were PCB imported into the US?  □ Yes  □ No
10. Regulated and/or Untreated Medical/infectious Waste?  □ Yes  □ No
11. Contains Asbestos?  □ Yes  □ No
   - If Yes:  □ Non-Friable  □ Non-Friable - Regulated  □ Friable

E. ANALYTICAL AND OTHER REPRESENTATIVE INFORMATION
1. Analytical Attached  □ Yes
   Please identify applicable samples and/or lab reports:

2. Other information attached (such as MSDS)?  □ Yes

F. SHIPPING AND DOT INFORMATION
1. □ One-Time Event  □ Repeat Event/Ongoing Business
2. Estimated Quantity/Unit of Measure: 15
   □ Tons  □ Yards  □ Drums  □ Gallons  □ Other:
3. Container Type and Size:  N/A
4. USDOT Proper Shipping Name:  N/A

G. GENERATOR CERTIFICATION (PLEASE READ AND CERTIFY BY SIGNATURE)
By signing this EZ Profile™ form, I hereby certify that all information submitted in this and all attached documents contain true and accurate descriptions of this material, and that all relevant information necessary for proper material characterization to identify known and suspected hazards has been provided. Any analytical data attached was derived from a sample that is representative as defined in 40 CFR 261 – Appendix 1 or by using an equivalent method. All changes occurring in the character of the material (i.e., changes in the process or new analytical) will be identified by the Generator and be communicated to Waste Management prior to providing the material to Waste Management.

If I am an agent signing on behalf of the Generator, I have confirmed with the Generator that information contained in this Profile is accurate and complete.

Name (Print): LEE Austif  Date: 6-1-17
Title: Operations Manager  Company: Triple A Asbestos Services, Inc

Certification Signature: ______________________________

THINK GREEN:  QUESTIONS? CALL 800 963 4776 FOR ASSISTANCE

©2015 Waste Management
Revised June 30, 2015
C. MATERIAL INFORMATION
Describe Process Generating Material (Continued from page 1):

 soils, that are contaminated with nonfriable asbestos.

| Pipe Containing Material | Contains Asbestos - Black Mastic |

Material Composition and Contaminants (Continued from page 1):

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</table>

Total composition must be equal to or greater than 100%: $\geq 100\%$

D. REGULATORY INFORMATION
Only questions with a “Yes” response in Section D on the EZ Profile™ form (page 1) need to be answered here.

1. EPA Hazardous Waste
   a. Please list all USEPA listed and characteristic waste code numbers:

   b. Is the material subject to the Alternative Debris standards (40 CFR 268.45)?
      - Yes [ ] No [ ]
   c. Is the material subject to the Alternative Soil standards (40 CFR 268.49)?
      - Yes [ ] No [ ]
   d. Is the material exempt from Subpart CC Controls (40 CFR 264.1083)?
      - Yes [ ] No [ ]
      - If Yes, please check one of the following:
        - Waste meets LDR or treatment exemptions for organics (40 CFR 264.1082(c)(2) or (c)(4))
        - Waste contains VOCs that average $<500$ ppmv (CFR 264.1082(c)(1)) – will require annual update.

2. State Hazardous Waste
   - Please list all state waste codes:

3. For material that is Treated, Delisted, or Excluded
   - Please indicate the category, below:
     - [ ] Delisted Hazardous Waste
     - [ ] Excluded Waste under 40 CFR 261.4
     - [ ] Specify Exclusion
     - [ ] Treated Hazardous Waste
     - [ ] Treated Characteristic Hazardous Waste

4. Underlying Hazardous Constituents
   - Please list all Underlying Hazardous Constituents:

5. Industries regulated under Benzene NESHAP include petroleum refineries, chemical manufacturing plants, coke by-product recovery plants, and TSDFs.
   a. Are you a TSDF?  - If yes, please complete Benzene NESHAP questionnaire. If not, continue.
      - Yes [ ] No [ ]
   b. Does this material contain benzene?
      - Yes [ ] No [ ]
      - If yes, what is the flow weighted average concentration?
      - Yes [ ] No [ ]
   c. What is your facility’s current total annual benzene quantity in Megagrams?
      - Yes [ ] No [ ]
   d. Is this waste soil from a remediation?
      - Yes [ ] No [ ]
      - If yes, what is the benzene concentration in remediation waste?
      - Yes [ ] No [ ]
   e. Does the waste contain $>10\%$ water/moisture?
      - Yes [ ] No [ ]
   f. Has material been treated to remove $99\%$ of the benzene or to achieve $<10$ ppmv?
      - Yes [ ] No [ ]
   g. Is material exempt from controls in accordance with 40 CFR 61.342?
      - Yes [ ] No [ ]
      - If yes, specify exemption:

   h. Based on your knowledge of your waste and the BWON regulations, do you believe that this waste stream is subject to treatment and control requirements at an off-site TSDF?
      - Yes [ ] No [ ]

6. 40 CFR 63 GCCGG
   - Does the material contain $<500$ ppmv VOCs at the point of determination?
      - Yes [ ] No [ ]

7. CERCLA or State-Mandated cleanup
   - Please submit the Record of Decision or other documentation with process information to assist others in the evaluation for proper disposal. A “Determination of Acceptability” may be needed for CERCLA wastes not going to a CERCLA approved facility.

8. NRC or state regulated radioactive or NORM Waste
   - Please identify Isotopes and pCi/g:

THINK GREEN: QUESTIONS? CALL 800 963 4776 FOR ASSISTANCE

Revised June 30, 2015
©2015 Waste Management
Requested Facility: Peoria City - County Landfill

A. GENERATOR INFORMATION (MATERIAL ORIGIN)
1. Generator Name: River City Roofing Co. Inc.
2. Site Address: 511 N. Main St. Marion, IL 61950
3. County: Tazewell
4. Contact Name: Tim Garrison
5. Email: info@rivercityroofcs.com
6. Phone: 309-697-9999 Fax: 309-697-9987
8. Generator EPA ID: N/A
9. State ID: N/A

C. MATERIAL INFORMATION
1. Common Name: Non-Friable Asbestos
   - Process Generating Material: See Attached
     - Demolition/renovation - when dry, cannot be crumbled, pulverized or reduced to powder by hand pressure. Including gaskets, resilient floor coverings and asphalt roofing products (specify in C.2.) Does not include clean-up wastes, such as
2. Material Composition and Contaminants: See Attached
   - Non-Friable Asbestos (Uncontaminated) 0-100% 100%
3. State Waste Codes: N/A
4. Color: Various
5. Physical State at 70°F: Solid Liquid Other
6. Free Liquid Range Percentage: N/A
7. pH: N/A
8. Strong Odor: Yes No Describe:
9. Flash Point: <140°F 140°-199°F ≥200°F N/A

E. ANALYTICAL AND OTHER REPRESENTATIVE INFORMATION
1. Analytical attached: Yes
2. Other information attached (such as MSDS): No

G. GENERATOR CERTIFICATION (PLEASE READ AND CERTIFY BY SIGNATURE)
By signing this EZ Profile™ form, I hereby certify that all information submitted in this and all attached documents contain true and accurate descriptions of this material, and that all relevant information necessary for proper material characterization and to identify known and suspected hazards has been provided. Any analytical data attached was derived from a sample that is representative as defined in 40 CFR 261 - Appendix I or by using an equivalent method. All changes occurring in the character of the material (i.e., changes in the process or new analytical) will be identified by the Generator and be disclosed to Waste Management prior to commencing waste disposal.

Name (Print): Tim Garrison
Title: President
Company: River City Roofing Co. Inc.
Date: 6/11/17

THINK GREEN: QUESTIONS? CALL 800.863.4776 FOR ASSISTANCE

Certification Signature

REVISED: June 30, 2015 ©2015 Waste Management
**EZ Profile™**

Requested Facility: Peoria, IL

- Multiple Generator Locations (Attach Locations) □ Yes □ No
- Request Certificate of Disposal □ Yes □ No
- Renewal? Original Profile Number: 61741711 AR 5/17/2017

### A. GENERATOR INFORMATION (MATERIAL ORIGIN)

1. Generator Name: **Illinois Department of Transportation**
2. Site Address: **Cedar Street Bridge**
   (City, State, ZIP) **Peoria, Illinois**
3. County: **Peoria/Tazewell**
4. Contact Name: **John Love**
5. Email: **john.love@illinois.gov**
6. Phone: **309-573-8981** 7. Fax: **309-573-8981**
8. Generator EPA ID: **17888995005**
9. State ID: □ Yes □ No

### C. MATERIAL INFORMATION

1. Common Name: Impacted soil/non-special waste
   Describe Process Generating Material: □ Yes □ No
   Rehabilitation of SN 090-0030 carrying IL 8/IL 116 (Cedar St.) over the Illinois River

2. Material Composition and Contaminants: □ Yes □ No
   - Impacted soils: 99%
   - VOCs/SVOCs: 3%
   - Other: □ Yes □ No

3. State Waste Codes: □ Yes □ No
4. Color: Gray/Brown
5. Physical State at 70°F: □ Solid □ Liquid □ Other: □ Yes □ No
6. Free Liquid Range Percentage: □ Yes □ No
7. pH: 8.1 □ Yes □ No
8. Strong Odor: □ Yes □ No
9. Flash Point: □ Yes □ No

### B. BILLING INFORMATION

1. Billing Name: **Western Asphalt, Inc.**
2. Billing Address: **2165 Prairie College Road**
   (City, State, ZIP) **Jacksonville, IL 62650**
3. Contact Name: **Tony Jachino**
4. Email: **wjes8322@aol.com**
5. Phone: **217-243-3822** 6. Fax: **217-243-3822**
7. WM Hauled? □ Yes □ No
8. P.O. Number: **HCCI-68A93**
9. Payment Method: □ Credit Account □ Cash □ Credit Card

### D. REGULATORY INFORMATION

1. EPA Hazardous Waste? □ Yes □ No
   Code: □ Yes □ No
2. State Hazardous Waste? □ Yes □ No
   Code: □ Yes □ No
3. Is this material non-hazardous due to Treatment, Delisting, or an Exclusion? □ Yes □ No
4. Contains Underlying Hazardous Constituents? □ Yes □ No
5. From an industry regulated under Benzene NESHAP? □ Yes □ No
6. Facility remediation subject to 40 CFR 63 GGGGG? □ Yes □ No
7. CERCLA or State-mandated clean-up? □ Yes □ No
8. NRC or State-regulated radioactive or NORM waste? □ Yes □ No
9. *If Yes, see Addendum (page 2) for additional questions and space.
   Contains PCBs? □ Yes □ No
   a. Regulated by 40 CFR 761? □ Yes □ No
      b. Remediation under 40 CFR 761.61 (a)? □ Yes □ No
      c. Were PCB imported into the US? □ Yes □ No
10. Regulated and/or Untreated Medical/Infectious Waste? □ Yes □ No
11. Contains Asbestos? □ Yes □ No

### E. ANALYTICAL AND OTHER REPRESENTATIVE INFORMATION

1. Analytical attached □ Yes □ No
   Please identify applicable samples and/or lab reports:
   Sample ID - HCCI 68A93
2. Other information attached (such as MSDS)? □ Yes □ No

### G. GENERATOR CERTIFICATION (PLEASE READ AND CERTIFY BY SIGNATURE)

By signing this EZ Profile™ form, I hereby certify that all information submitted in this form and all attached documents contain true and accurate descriptions of this material, and that all relevant information necessary for proper material characterization and to identify known and suspected hazards has been provided. Any analytical data attached was derived from a sample that is representative as defined in 40 CFR 261 - Appendix 1 or by using an equivalent method. All changes occurring in the character of the material (i.e., changes in the process or new analytical) will be identified by the Generator and disclosed to Waste Management prior to providing the material to Waste Management.

If I am an agent signing on behalf of the Generator, I have confirmed with the Generator that information contained in this Profile is accurate and complete.

Name (Print): **Tony Jachino**
Title: **H&S Admin/Sr Proj Mgr**
Company: **Western Asphalt, Inc.**

**Certification Signature**

**Tony Jachino**

**Questions? Call 800 963 4776 For Assistance**

**Revised June 30, 2015**

©2015 Waste Management
Profile Addendum: State of Illinois
GENERATOR'S NON-SPECIAL WASTE CERTIFICATION

F. Additional Waste Stream Information

Profile Number: 617417IL. AR 5/17/2017

Generators Name: Illinois Department of Transportation

Generators SITE Address: Cedar Street Bridge-Pier 15, Peoria, IL
(The location where the waste is generated)

Waste Name: Impacted soil/non-special waste

The Illinois Environmental Protection Act allows a Generator to certify that their pollution control waste or industrial process waste, is not an Illinois Special Waste (Section 3.45). By completing the following questionnaire, you may certify that the waste stream represented by the Waste Management Profile referenced above is not an Illinois Special Waste as defined in the Act.

Is the waste referenced above any of the following:

1. A Potentially Infectious Medical Waste (PIMW)?  □ Yes □ No

2. A Hazardous Waste as defined in 40 CFR 261 or in 35 IAC 722.111?  □ Yes □ No

3. A Liquid Waste (fails the paint filter test as defined in 35 IAC 811.107)?  □ Yes □ No

4. A regulated PCB waste as defined in 40 CFR 761?  □ Yes □ No

5. A NESHAP regulated asbestos waste other than waste from renovation or demolition?  □ Yes □ No

6. A waste resulting from the shredding recyclable metals (auto fluff)?  □ Yes □ No

7. A delisted Hazardous Waste or Treated Characteristic Hazardous Waste, subject to LDR requirements under 35 IAC 728.107?  □ Yes □ No

In determining that this waste is not a liquid, I have used knowledge of the processes generating the waste and the attached supporting documentation:  □ MSDS  □ Analytical  □ Other (explain below):

In determining that this waste is not RCRA hazardous, I have used knowledge of the processes generating the waste and the attached supporting documentation:  □ MSDS  □ Analytical  □ Other (explain below):

8. Is the waste represented by this profile sheet subject to the Illinois Solid Waste Management Act fee?  □ Yes □ No

By signing below, I certify my waste is NOT an Illinois Special Waste, and that I understand that a person who knowingly and falsely certifies that a waste is not special waste is subject to the penalties set forth in subdivision (6) of subsection (h) of section 44 of the Illinois Environmental Protection Act.

Name: (Print) Tony Jachino

Signature:  Tony Jachino

Title: H&S Admin/Sr Proj Mgr

Date: 5/16/17
Non-Friable Asbestos Containing Materials Non-Hazardous Waste Express Profile

Requested Disposal Facility: ______________________ Profile Number: ______________________

☐ Renewal for Profile Number: A5625605 Waste Approval Expiration Date: ______________________

☐ Check here if there are multiple generating locations for this waste. Attach additional locations.

A. Waste Generator Facility Information (must reflect location of waste generation/origin)

1. Generator Name: ______________________
2. Site Address: ______________________
3. City/ZIP: ______________________
4. State: ______________________
5. County: ______________________
6. Contact Name/Title: ______________________
7. Email Address: ______________________
8. Phone: ______________________
9. FAX: ______________________
10. NAICS Code: ______________________
11. Generator USEPA ID #: ______________________
12. State ID# (if applicable): ______________________

B. Customer Information ☐ same as above

P. O. Number: ______________________

1. Customer Name: M&O Environmental
2. Billing Address: 1625 W. Altarfer Drive
3. City, State and ZIP: Peoria, IL 61615
4. Contact Name: Clinton N. Tyler
5. Contact Email: CTyler@MOCompany.com
7. Transporter Name: ______________________
8. Transporter ID # (if appl.): ______________________
9. Transporter Address: ______________________
10. City, State and ZIP: ______________________

C. Waste Stream Information

1. DESCRIPTION
   b. Describe Process Generating Waste or Source of Contamination:
      Demolition/renovation - when dry, cannot be crumbled, pulverized or reduced to powder by hand pressure. Including gaskets, resilient floor coverings and asphalt roofing products (specify in section L). Does not include clean-up wastes, such as soils, that are contaminated with nonfriable asbestos.
   c. Typical Color(s): Any and all
   d. Strong Odor? ☐ Yes ☐ No Describe:
   e. Physical State at 70°F: ☐ Solid ☐ Liquid ☐ Powder ☐ Semi-Solid or Sludge ☐ Other:
   f. Layers? ☐ Single layer ☐ Multi-layer ☐ N/A
   g. Water Reactive? ☐ Yes ☐ No If Yes, Describe:
   h. Free Liquid Range (%): ______ to ______ ☐ NA(solid)
   i. pH Range: ______ to ______ ☐ NA(solid)
   j. Liquid Flash Point: ☐ < 140°F ☐ 140°- 199°F ☐ ≥ 200°F ☐ NA(solid)
   k. Flammable Solid: ☐ Yes ☐ No
   1. Physical Constituents: List all constituents of waste stream - (e.g. Soil 0-20%, Wood 0-20%): ☐ (See Attached)

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<tr>
<th>Constituents</th>
<th>Total Composition Must be ≤ 100%</th>
<th>Lower Range</th>
<th>% Unit of Measure</th>
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<th>% Unit of Measure</th>
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<td>1. Non-friable asbestos-containing materials</td>
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2. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION
   a. ☐ One Time Event ☐ Base ☐ Repeat Event
   b. Estimated Annual Quantity: 2000 Tons ☐ Cubic Yards ☐ Drums ☐ Gallons ☐ Other (specify):
   c. Shipping Frequency: ☐ Units per ☐ Month ☐ Quarter ☐ Year ☐ One Time ☐ Other
   d. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If yes, answer e.) ☐ Yes ☐ No
   e. USDOT Shipping Description (if applicable):

3. SAFETY REQUIREMENTS (Handling, PPE, etc.): Normal landfill safety requirements. Manage waste so that it does not become friable.
Non-Friable Asbestos Containing Materials Non-Hazardous Waste
Express Profile

D. Regulatory Status (Please check appropriate responses)

1. Waste Identification:
   a. Does the waste meet the definition of a USEPA listed or characteristic hazardous waste as defined by 40 CFR Part 261? □ Yes □ No
   1. If yes, please complete a hazardous waste profile.
   b. Does the waste meet the definition of a state hazardous waste other than identified in D.1.a? □ Yes □ No
   1. If yes, please complete a hazardous waste profile.

2. Is this waste included in one or more of categories below (Check all that apply)? If yes, attach supporting documentation. □ Yes □ No
   a. Delisted Hazardous Waste  □ Yes □ No
   b. Excluded Waste Under 40 CFR 261.4  □ Yes □ No
   c. Treated Hazardous Waste Debris  □ Yes □ No
   d. Treated Characteristic Hazardous Waste  □ Yes □ No

3. Is the waste from a Federal (40 CFR 300, Appendix B) or state mandated clean-up? If yes, see instructions. □ Yes □ No

4. Does the waste represented by this waste profile sheet contain radioactive material? □ Yes □ No
   a. If yes, is disposal regulated by the Nuclear Regulatory Commission? □ Yes □ No
   b. If yes, is disposal regulated by a State Agency for radioactive waste/NORM? □ Yes □ No

5. Does the waste represented by this waste profile sheet contain Polychlorinated Biphenyls (PCBs)? □ Yes □ No
   a. If yes, are the PCBs regulated by 40 CFR 761? □ Yes □ No
   b. If yes, is it remediation waste from a project being performed under the Self-Implementing option provided in 40 CFR 761.61(a)? □ Yes □ No
   c. If yes, were the PCBs imported into the US? □ Yes □ No

6. Does the waste contain untreated, regulated medical or infectious waste? □ Yes □ No

7. Does the waste contain asbestos? □ Yes □ No
   a. If Yes, □ Friable □ Non Friable

8. Is this profile for remediation waste from a facility that is a major source of Hazardous Air Pollutants (Site Remediation NSR/HP)? □ Yes □ No
   a. If yes, does the waste contain <500 ppmw VHCAs at the point of determination? □ Yes □ No

E. Generator Certification (Please read and certify by signature below)

By signing this Generator’s Waste Profile Sheet, I hereby certify that all:

1. Information submitted in this profile and all attached documents contain true and accurate descriptions of the waste material;
2. Relevant information within the possession of the Generator regarding known or suspected hazards pertaining to this waste has been disclosed to WM/the Contractor;
3. Analytical data attached pertaining to the profiled waste was derived from testing a representative sample in accordance with 40 CFR 261.30(c) or equivalent rules; and
4. Changes that occur in the character of the waste (i.e. changes in the process or new analytical) will be identified by the Generator and disclosed to WM (and the Contractor if applicable) prior to providing the waste to WM (and the contractor if applicable).

Check all that apply:
   a. Attached analytical pertains to the waste. Identify laboratory & sample ID #’s and parameters tested:
      □ Yes □ No
   b. Only the analysis identified on the attachment pertain to the waste (identify by laboratory & sample ID #’s and parameters included). Attachment #: ____________________________
      □ Yes □ No
   c. Additional information necessary to characterize the profiled waste has been attached (other than analytical, such as MSDS). Indicate the number of attached pages: ____________________________
      □ Yes □ No
   d. I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.

Certification Signature: ____________________________ Title: Vice President

Company Name: M&A Environmental Name (Print): Clinton N. Tyler

Date: 5-22-11

©2010 Waste Management, Inc. Page 2 of 2 May 2010
Triable Asbestos Containing Materials Non-Hazardous Waste Express Profiles

Requested Disposal Facility: [Redacted]  Profile Number: [Redacted]

Waste Approval Expiration Date: [Redacted]

Check here if there are multiple generating locations for this waste. Attach additional locations.

A. Waste Generator Facility Information (must reflect location of waste generation/origin)

1. Generator Name: [Redacted]
2. Site Address: [Redacted]
3. City/ZIP: [Redacted]
4. State: [Redacted]
5. Country: [Redacted]
6. Contact Name/Title: [Redacted]

B. Customer Information (same as above)

1. Customer Name: M&O Environmental
2. Billing Address: 1624 W. Atofer Drive
3. City, State, and ZIP: Peoria, IL 61615
4. Contact Name: Clinton N. Tyler
5. Contact Email: CTyler@MOCCompany.com

C. Waste Stream Information

1. DESCRIPTION
   a. Common Waste Name: Triable Asbestos containing material (uncontaminated)
      State Waste Code(s):

2. Describe Process Generating Waste or Source of Contamination:
   Removal of regulated, triable asbestos containing materials from demolition/dismantling or remediation activities. Does not include clean-up wastes, such as soil, that are contaminated with asbestos.

   c. Typical Color(s): Any and all
   d. Strong Odor? No
   e. Physical State at 70°F: Solid
   f. Layers: Single-layer
   g. Water Released? No
   h. Free Liquid Range (%): NA
   i. pH Range: NA
   j. Liquid Flash Point: No
   k. Flammable Solid: No

1. Physical Constituents: List all constituents of waste stream. (e.g. Soil 0-80%, Wood 0-20%):

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<tr>
<th>Constituent (Total Constituents Must be ≤ 100%)</th>
<th>Lower Range</th>
<th>Unit of Measure</th>
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<td>1. Demolition debris, asbestos</td>
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2. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION

A. One Time Event
   a. Estimated Annual Quantity: 50 Yards
   b. Estimated Annual Quantity: Cubic Yards Drums Gallons Other (specify):
   c. Shipping Frequency: Once per Year
   d. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? Yes
   e. USDOT Shipping Description (if applicable): RO Asbestos, Class 9, NA2212, PGIII

3. SAFETY REQUIREMENTS (Handling, PPE, etc.): Respirator - air purifying with HEPA cartridge as required by landfill policy.
D. Regulatory Status (Please check appropriate responses)

1. Waste identification:
   a. Does the waste meet the definition of a USEPA listed or characteristic hazardous waste as defined by 40 CFR Part 261? □ Yes □ No
   1. Yes, please complete a hazardous waste profile.

2. Is the waste included in one of more of categories below (Check all that apply)? If yes, attach supporting documentation. □ Yes □ No
   □ Defined Hazardous Waste □ Excluded Wastes Under 40CFR 261.4
   □ Treated Hazardous Waste Debris □ Treated Characteristic Hazardous Waste

3. Is the waste from a Federal (40 CFR 300, Appendix B) or state mandated cleanup? If yes, see instructions. □ Yes □ No

4. Does the waste represented by this waste profile sheet contain radioactive material?
   a. Yes □ No
   b. If yes, is disposal regulated by the Nuclear Regulatory Commission? □ Yes □ No
   c. If no, is disposal regulated by a State Agency for radioactive waste/NORM? □ Yes □ No

5. Does the waste represented by this waste profile sheet contain Polychlorinated Biphenyls (PCBs)?
   (If yes, list in Chemical Composition - C.1.a)
   a. Yes □ No
   b. If yes, are the PCBs regulated by 40 CFR 761? □ Yes □ No
   c. If yes, is it remediation waste from a project being performed under the Self-Implementing option provided in 40 CFR 761.6(a)? □ Yes □ No
   d. If yes, were the PCBs imported into the US? □ Yes □ No

6. Does the waste contain untreated, regulated medical or infectious waste?
   □ Yes □ No

7. Does the waste contain asbestos?
   a. Yes □ No
   b. If yes, is it Flammable? □ Flammable □ Non Flammable

8. Is this waste profile for remediation waste from a facility that is a major source of Hazardous Air Pollutants (Site Remediation NESHAP, 40 CFR 63 subpart GGGGGG)? □ Yes □ No
   a. If yes, does the waste contain <50 ppm VOCs/VOCs at the point of determination? □ Yes □ No

E. Generator Certification (Please read and certify by signature below)

By signing this Generator's Waste Profile Sheet, I hereby certify that all:

1. Information submitted in this profile and all attached documents contains true and accurate descriptions of the waste material;

2. Relevant information within the possession of the Generator regarding known or suspected hazards pertaining to this waste has been disclosed to WM/the Contractor;

3. Analytical data attached pertaining to the profiled waste was derived from testing a representative sample in accordance with 40 CFR 261.20(c) or equivalent rules; and

4. Changes that occur in the character of the waste (i.e. changes in the process or new analytical) will be identified by the Generator and disclosed to WM (and the Contractor if applicable) prior to providing the waste to WM (and the contractor if applicable).

5. Check all that apply:
   □ a. Attached analytical pertaining to the waste. Identify laboratory & sample ID #’s and parameters tested:

   □ b. Only the analysis identified on the attachment pertain to the waste (identify by laboratory & sample ID #’s and parameters tested). Attachment #:

   □ c. Additional information necessary to characterize the profiled waste has been attached (other than analytical, such as MDS). Indicate the number of attached pages:

   □ d. I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.

Certification Signature: ________________________________  Title: Vice President
Company Name: M&O Environmental  Name (Print): Clinton H. Tyler
Date: 5-22-11

Date: May 2010

L0510 Waste Management, Inc.  Page 2 of 2
A. Waste Generator Facility Information (must reflect location of waste generation/origin)

1. Generator Name: ____________________________
2. Site Address: ________________________________
3. City/ZIP: __________________________________
4. State: _____________________________________
5. County: ____________________________________
6. Contact Name/Title: __________________________
7. Email Address: ______________________________
8. Phone: ___________________________ FAX: ______
9. NAICS Code: ________________________________
10. Generator USEPA ID #: ______________________
11. State ID# (if applicable): ____________________

B. Customer Information: same as above

1. Customer Name: M&O Environmental
2. Billing Address: 1625 W. Alterfer Drive
3. City, State and ZIP: Peoria, IL 61615
4. Contact Name: Clinton N. Tyler
5. Contact Email: CTyler@MOCompany.com

C. Waste Stream Information

1. DESCRIPTION
   a. Common Waste Name: Non-Friable Asbestos Containing Materials (Uncleaned) (Not TPH, EPA Notified)
   b. Describe Process Generating Waste or Source of Contamination: Demolition/renovation - when dry, cannot be crumbled, pulverized or reduced to powder by hand pressure. Including gaskets, resilient floor coverings and asphalt roofing products (specify in section L). Does not include clean-up wastes, such as soils, that are contaminated with nonfriable asbestos.
   c. Typical Color(s): Any and all
   d. Strong Odor? □ Yes □ No Describe: ________________________________
   e. Physical State at 70°F: □ Solid □ Liquid □ Powder □ Semi-Solid or Sludge □ Other: ________________________________
   f. Layers? □ Single layer □ Multi-layer □ NA
   g. Water Reactive? □ Yes □ No If Yes, Describe: ________________________________
   h. Free Liquid Range (%): _______ to _______ □ NA(solid)
   i. pH Range: _______ to _______ □ NA(solid)
   j. Liquid Flash Point: □ < 140°F □ 140°-189°F □ ≥ 200°F □ NA(solid)
   k. Flammable Solid? □ Yes □ No
   l. Physical Constituents: List all constituents of waste stream - (e.g. Soil 0-80%, Wood 0-20%): □ (See Attached)

<table>
<thead>
<tr>
<th>Constituents (Total Composition Must be ≥ 10%)</th>
<th>Lower Range</th>
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<th>Upper Range</th>
<th>Unit of Measure</th>
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2. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION
   a. □ One Time Event □ Base □ Repeat Event
   b. Estimated Annual Quantity: ____________ Tons □ Cubic Yards □ Drums □ Gallons □ Other (specify): ________________________________
   c. Shipping Frequency: ____________ Units per □ Month □ Quarter □ Year □ One Time □ Other
   d. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If yes, answer e.) □ Yes □ No
   e. USDOT Shipping Description (if applicable): ________________________________

3. SAFETY REQUIREMENTS (Handling, PPE, etc.): Normal landfill safety requirements. Manage waste so that it does not become friable.
### D. Regulatory Status (Please check appropriate responses)

1. Waste Identification:
   a. Does the waste meet the definition of a US EPA listed or characteristic hazardous waste as defined by 40 CFR Part 261?  
      - Yes ☐  No ☑
   b. Does the waste meet the definition of a state hazardous waste other than identified in D.1.a?  
      - Yes ☐  No ☑
      1. If yes, please complete a hazardous waste profile.

2. Is this waste included in one or more of the categories below (Check all that apply)? If yes, attach supporting documentation.  
   - Yes ☐  No ☑
   - Delisted Hazardous Waste ☐  Excluded Wastes Under 40CFR 261.4 ☐  Treated Hazardous Waste Deliria ☐  Treated Characteristic Hazardous Waste ☐

3. Is the waste from a Federal (40 CFR 300, Appendix B) or state mandated clean-up? If yes, see instructions.  
   - Yes ☐  No ☑

4. Does the waste represented by this waste profile sheet contain radioactive material?  
   - Yes ☐  No ☑
   - If yes, is disposal regulated by the Nuclear Regulatory Commission?  
     - Yes ☐  No ☑
   - If yes, is disposal regulated by a State Agency for radioactive waste/NORM?  
     - Yes ☐  No ☑

5. Does the waste represented by this waste profile sheet contain Polychlorinated Biphenyls (PCBs)?  
   - Yes ☐  No ☑
   - If yes, are the PCBs regulated by 40 CFR 761?  
     - Yes ☐  No ☑
   - b. If yes, is it remediation waste from a project being performed under the Self-Implementing option provided in 40 CFR 761.61(a)?  
     - Yes ☐  No ☑
   - c. If yes, were the PCBs imported into the US?  
     - Yes ☐  No ☑

6. Does the waste contain untreated, regulated medical or infectious waste?  
   - Yes ☐  No ☑

7. Does the waste contain asbestos?  
   - Yes ☐  No ☑
   - If Yes,  
     - Frangible ☐  Non Frangible ☑

8. Is the profile for remediation waste from a facility that is a major source of Hazardous Air Pollutants (HAP) under CERCLA, 40 CFR Parts 61 or 62?  
   - Yes ☐  No ☑
   - a. If yes, does the waste contain <500 ppm VOCs and HAPs at the point of generation?  
     - Yes ☐  No ☑

### E. Generator Certification (Please read and certify by signature below)

By signing this Generator's Waste Profile Sheet, I hereby certify that all:

1. Information submitted in this profile and all attached documents contain true and accurate descriptions of the waste material;
2. Relevant information within the possession of the Generator regarding known or suspected hazards pertaining to this waste has been disclosed to WM/the Contractor;
3. Analytical data attached pertaining to the profiled waste was derived from testing a representative sample in accordance with 40 CFR 261.20(c) or equivalent rules and
4. Changes that occur in the character of the waste (i.e., changes in the process or new analytical) will be identified by the Generator and disclosed to WM (and the Contractor if applicable) prior to providing the waste to WM (and the contractor if applicable).
5. Check all that apply:
   a. Attached analytical pertains to the waste. Identify laboratory & sample ID #’s and parameters tested:  
      - Pages:
   b. Only the analysis identified on the attachment pertain to the waste (identify by laboratory & sample ID #’s and parameters tested). Attachment #:  
   c. Additional information necessary to characterize the profiled waste has been attached (other than analytical, such as MSDS). Indicate the number of attached pages:  
   d. I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.

Certification Signature:  

Company Name: M&O Environmental  
Name (Print): Clinton N. Tyler  
Date: 8-12-11  

S2506 Waste Management, Inc.  
Page 2 of 2  
May 2010
Frangible Asbestos Containing Materials Non-Hazardous Waste Express Profiles

A. Waste Generator/Facility Information (must reflect location of waste generation/origin)

1. Generator Name: 
2. Site Address: 
3. City/ZIP: 
4. State: 
5. Country: 
6. Contact Name/Title: 
7. Email Address: 
8. Phone: 
9. FAX: 
10. NAICS Code: 
11. Generator USEPA ID #: 
12. State ID#: (if applicable)

B. Customer Information (same as above)

1. Customer Name: M&O Environmental 
2. Billing Address: 1625 W. Atmore Drive 
3. City, State and ZIP: Peoria, IL 61615 
4. Contact Name: Clinton H. Tyler 
5. Contact Email: CTyler@M&OCompany.com 
6. F.O. Number: 
7. Phone: 309-692-6700 
8. FAX: 309-692-9912

C. Waste Stream Information

1. Description
   a. Common Waste Name: Frangible Asbestos containing material (uncontaminated) 
   State Waste Code(s): 
   Top of form: EPA Notified
   b. Describe Process Generating Waste or Source of Contamination: Removal of regulated, frangible asbestos containing materials from demolition/dismantling or remediation activities. Does not include clean-up wastes, such as soil, that are contaminated with asbestos.
   c. Typical Color(s): Any color
   d. Strong Odor?: Yes [ ] No [ ]
   e. Physical State at TOP: Solid [ ] Liquid [ ] Powder [ ] Semi-Solid or Sludge [ ] Other:
   f. Layers: Single Layer [ ] Multi-Layer [ ] NA
   g. Water Reactive?: Yes [ ] No [ ] If Yes, Describe:
   h. Free Liquid Range (gal): to
   i. pH Range: 
   j. Liquid Flash Point: 
   k. Flammable Solid?: Yes [ ] No [ ]

2. Physical Constituents: List all constituents of waste stream - (e.g. Soil 0-20%, Wood 0-30%): [ ] See Attached)
   a. Constituent (Total Composition Must be ≥100%)
   1. Demolition debris, asbestos
      Lower Range %
      Upper Range %
   2.
   3.
   4.
   5.
   6.
   7.
   8.
   9.
   10.

3. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION
   a. One Time Event [ ] Repeat Event [ ]
   b. Estimated Annual Quantity (TH): 500 [ ]
   c. Shipping Frequency: Quarterly [ ] Yearly [ ] Other Specify:
   d. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If Yes, answer e.) Yes [ ] No [ ]
   e. USDOT Shipping Description (If applicable): RO Asbestos, Class 9, NA2212, PCIII

4. SAFETY REQUIREMENTS (Handling, PPE, etc.): Respirator - air purifying with HEPA cartridge as required by landfill policy.

©2010 Waste Management, Inc.
Page 1 of 2
May 2010
D. Regulatory Status (Please check appropriate responses)

1. Waste Identification:
   a. Does the waste meet the definition of a USEPA listed or characteristic hazardous waste as defined by 40 CFR Part 261? □ Yes □ No
   b. Does the waste meet the definition of a state hazardous waste other than identified in D.1.a? □ Yes □ No
   1. If yes, please complete a hazardous waste profile.

2. Is this waste included in one or more categories below? (Check all that apply): □ Yes □ No
   □ Delayed Hazardous Waste
   □ Excluded Wastes Under 40 CFR 281.4
   □ Treated Hazardous Waste Debris
   □ Treated Characteristic Hazardous Wastes

3. Is the waste from a Federal (40 CFR 300, Appendix B) or state mandated clean-up? If yes, see instructions. □ Yes □ No

4. Does the waste represented by this waste profile sheet contain radioactive material?
   a. If yes, is disposal regulated by the Nuclear Regulatory Commission? □ Yes □ No
   b. If yes, is disposal regulated by a State Agency for radioactive waste? □ Yes □ No

5. Does the waste represented by this waste profile sheet contain Polychlorinated Biphenyls (PCBs)? □ Yes □ No
   a. If yes, are the PCBs regulated by 40 CFR 761? □ Yes □ No
   b. If yes, is it remediation waste from a project being performed under the Self-Implementing option provided in 40 CFR 761.81 (a)? □ Yes □ No
   c. If yes, were the PCBs imported into the US? □ Yes □ No

6. Does the waste contain untreated, regulated medical or infectious waste? □ Yes □ No

7. Does the waste contain asbestos? □ Yes □ No

8. Is this profile for remediation waste from a facility that is a major source of Hazardous Air Pollutants (HAP) or Remediation NESHAP, 40 CFR 83 subpart GGGG? □ Yes □ No
   a. If yes, does the waste contain <500 ppb VCHAs at the point of determination? □ Yes □ No

E. Generator Certification (Please read and certify by signature below)

By signing this Generator's Waste Profile Sheet, I hereby certify that all:

1. Information submitted in this profile and all attached documents contain true and accurate descriptions of the waste material;
2. Relevant information with the possession of the Generator regarding known or suspected hazards pertaining to this waste has been disclosed to WM/the Contractor;
3. Analytical data attached pertaining to the profiled waste was derived from testing a representative sample in accordance with 40 CFR 261.30(c) or equivalent rules; and
4. Changes that occur in the character of the waste (i.e. changes in the process or new analytical) will be identified by the Generator and disclosed to WM (and the Contractor if applicable) prior to providing the waste to WM (and the Contractor if applicable).  

5. Check all that apply:
   □ a. Attached analytical data pertaining to the waste. Identify laboratory & sample ID #’s and parameters tested: □ Pages: 
   □ b. Only the analysis identified on the attachment pertains to the waste (identify by laboratory & sample ID #’s and parameters noted). Attachment #: 
   □ c. Additional information necessary to characterize the profiled waste has been attached (other than analytical, such as MSDS). Indicate the number of attached pages: 
   □ d. I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.

Certification Signature: ___________________________ Title: Vice President
Company Name: MAQ Environmental ___________________________ Name (Print): Clinton M. Tyler
Date: 3-22-11

©2010 Waste Management, Inc. Page 2 of 2 May 2019
Non-Friable Asbestos Containing Materials Non-Hazardous Waste Express Profile

A. Waste Generator Facility Information (must reflect location of waste generation/origin)

1. Generator Name:
2. Site Address:
3. City/ZIP:
4. State:
5. County:
6. Contact Name/Title:
7. Email Address:
8. Phone:
9. FAX:
10. NAICS Code:
11. Generator USEPA ID #:
12. State ID# (if applicable):

B. Customer Information □ same as above

1. Customer Name: M&O Environmental
2. Billing Address: 1625 W. Altgeld Drive
3. City, State and ZIP: Peoria, IL 61615
4. Contact Name: Clinton N. Tyler
5. Contact Email: CTyler@MOCompany.com
6. Phone: 309-692-6700
7. Transporter Name:
8. Transporter ID # (if appl.):
9. Transporter Address:
10. City, State and ZIP:
11. Fax: 309-692-9812

C. Waste Stream Information

1. DESCRIPTION
   a. Common Waste Name: Non-Friable Asbestos Containing Materials (Uncontaminated)
      State Waste Code(s):
   b. Describe Process Generating Waste or Source of Contamination:
      Demolition/renovation - when dry, cannot be crumbled, pulverized or reduced to powder by hand pressure, including gaskets, resilient floor coverings and asphalt roofing products (specify in section L). Does not include clean-up wastes, such as soils, that are contaminated with nonfriable asbestos.
   c. Typical Color(s): Any and all
   d. Strong Odor? □ Yes □ No Describe:
   e. Physical State at 70°F: □ Solid □ Liquid □ Powder □ Semi-Solid or Sludge □ Other:
   f. Layers? □ Single layer □ Multi-layer □ NA
   g. Water Reactive? □ Yes □ No □ If Yes, Describe:
   h. Free Liquid Range (%): ___% to ___% □ NA(solid)
   i. pH Range: ___ to ___ □ NA(solid)
   j. Liquid Flash Point: □ < 140°F □ 140°-199°F □ ≥ 200°F □ NA(solid)
   k. Flammable Solid: □ Yes □ No
   l. Physical Constituents: List all constituents of waste stream - (e.g. Soil 0-30%, Wood 0-20%): □ (See Attached)

<table>
<thead>
<tr>
<th>Constituents (Total Composition Must be ≥ 100%)</th>
<th>Lower Range</th>
<th>Unit of Measure</th>
<th>Upper Range</th>
<th>Unit of Measure</th>
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<tr>
<td>1. Non-friable asbestos-containing materials</td>
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2. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION

a. □ One Time Event □ Base □ Repeat Event
b. Estimated Annual Quantity: □ 200 □ Tons □ Cubic Yards □ Drums □ Gallons □ Other (specify):
c. Shipping Frequency: □ Units per □ Month □ Quarter □ Year □ One Time □ Other
d. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If yes, answer c.) □ Yes □ No
e. USDOT Shipping Description (if applicable):

3. SAFETY REQUIREMENTS (Handling, PPE, etc.): Normal landfill safety requirements. Manage waste so that it does not become friable.
### Regulatory Status (Please check appropriate responses)

1. Waste Identification:
   a. Does the waste meet the definition of a U.S. EPA listed or characteristic hazardous waste as defined by 40 CFR Part 261?  Yes  No
   b. Does the waste meet the definition of a state hazardous waste other than identified in D.1.a?  Yes  No

2. Is the waste included in one or more of the categories below (Check all that apply)? If yes, attach supporting documentation.  Yes  No
   - Defined Hazardous Waste
   - Excluded Wastes Under 40CFR 261.4
   - Treated Hazardous Waste Deliria
   - Treated Characteristic Hazardous Waste

3. Is the waste from a Federal (40 CFR 300, Appendix B) or state mandated clean-up? If yes, see instructions.  Yes  No

4. Does the waste represented by this waste profile sheet contain radioactive material?  Yes  No
   - If yes, is disposal regulated by the Nuclear Regulatory Commission?  Yes  No
   - If yes, is disposal regulated by a State Agency for radioactive waste/NORM?  Yes  No

5. Does the waste represented by this waste profile sheet contain Polychlorinated Biphenyls (PCBs)?  Yes  No
   - If yes, are the PCBs regulated by 40 CFR 761?  Yes  No
   - If yes, is it remediation waste from a project being performed under the Self-Implementing option provided in 40 CFR 761.8(a)?  Yes  No
   - If yes, were the PCBs imported into the US?  Yes  No

6. Does the waste contain untreated, regulated medical or infectious waste?  Yes  No

7. Does the waste contain asbestos?  Yes  No

8. Is this profile for remediation waste from a facility that is a major source of Hazardous Air Pollutants (HAPs Remediation NESHAP)?  Yes  No
   - 40 CFR 63 subpart CCCCC
   - If yes, does the waste contain <500 ppm VOC/HCs at the point of determination?  Yes  No

### Generator Certification (Please read and certify by signature below)

By signing this Generator’s Waste Profile Sheet, I hereby certify that all:

1. Information submitted in this profile and all attached documents contain true and accurate descriptions of the waste material;
2. Relevant information within the possession of the Generator regarding known or suspected hazards pertaining to this waste has been disclosed to WM/the Contractor;
3. Analytical data attached pertaining to the profiled waste was derived from testing a representative sample in accordance with 40 CFR 261.20(c) or equivalent rules; and
4. Changes that occur in the character of the waste (i.e., changes in the process or new analytical) will be identified by the Generator and disclosed to WM (and the Contractor if applicable) prior to providing the waste to WM (and the contractor if applicable).

5. Check all that apply:
   - a. Attached analytical pertinent to the waste. Identify laboratory & sample ID #’s and parameters tested: ___________ Pages:
   - b. Only the analysis identified on the attachment pertain to the waste (identify by laboratory & sample ID #’s and parameters tested). Attachment: ___________
   - c. Additional information necessary to characterize the profiled waste has been attached (other than analytical, such as MSDS). Indicate the number of attached pages: ___________
   - d. I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.

Certification Signature: ________________________________
Title: Vice President

Company Name: M&G Environmental
Name (Print): Clinton M. Tyler

Date: 5/22/11

May 2010
REQUEST FOR DISCUSSION

To: Peoria City/County Landfill Committee Members

From: Joshua C. Gabehart, P.E., Foth

AGENDA DATE REQUESTED: June 21, 2017

ACTION REQUESTED: Approval for Mr. Morris’ Signature:

- PCC LF1 – Semi-Annual Pretreatment Report to Greater Peoria Sanitary District
- PCC LF1 – Clean Air Act Permit Program (CAAPP) Semi-Annual Startup, Shutdown, and Malfunction Plan (SSMP) Report (January 2017-June 2017)
- PCC LF1 – Clean Air Act Permit Program (CAAPP) Semi-Annual Air Monitoring Report (January 2017-June 2017)
- (INFORMATION ONLY) - PCC LF1 – 405-CAAPP Form – May 17, 2017

BACKGROUND: The semi-annual Pretreatment report to the Greater Peoria Sanitary District is required as part of the permit to discharge Landfill 1 leachate at the Darst Street Facility. The report includes flow and analytical results for parameters as required by the permit for the time period of January 2017 through June 2017. The semi-annual pretreatment report is due July 20, 2017.

The Clean Air Act Permit Program requires several reports to be submitted semi-annually with regard to various compliance, monitoring and operational data for the Peoria City/County Landfill. The SSMP, NSPS and CAAPP Semi-Annual Air Monitoring Reports include gas system monitoring, downtime data, surface scan data, flare log and down time, gas well data, cover inspection logs, and data pertaining to Landfill No. 2 provided by Waste Management for the first half of 2017 and are due July 31, 2017.

A loss of power occurred on May 17, 2017 and lasted for 2 hours and 44 minutes. The power outage was likely related to high winds and thunderstorms in the area. When power returned, the flare automatically restarted. For any flare shutdown lasting longer than an hour, a 405-CAAPP Form is required to be submitted to the Illinois Environmental Protection Agency (IEPA) Bureau of Air. The 405-CAAPP form requires Chairman Morris’

We currently do not expect other reports that will require Chairman Morris and Director Reeise’s signatures, however we respectfully request approval to obtain Chairman Morris signature should the need arise prior to the next Committee Meeting. Should we require his signature, a report will be brought before the board at the next scheduled meeting.

FINANCIAL IMPACT: These submittals are included as part of Foth’s professional consulting services contract the Joint City and County Landfill Committee.