

New York State Department of Environmental Conservation

Division of Materials Management, Region 9

270 Michigan Ave, Buffalo, New York 14203-2915

Phone: (716) 851-7220 Fax: 716-851-7228

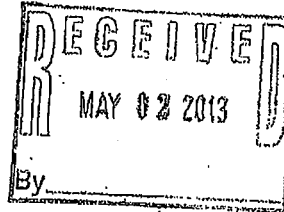
Website: www.dec.ny.gov



Joe Martens
Commissioner

April 30, 2013

Mr. Michael Gullo
Modern Landfill Inc.
P. O. Box 209
Model City, New York 14107



Dear Mr. Gullo:

**Harbor Center Development
75 Main Street
Buffalo, New York
Soil, rock and brick
Application #M13-2644**

The Department has reviewed the above referenced application for Treatment or Disposal of an Industrial Waste Stream (Form 47-19-7). Based on the information provided, material at areas B-1, B-2, B-10, B-11, Block 3C, Block 5C, D1, D2, D3 and D4 is acceptable for disposal at the **Modern Landfill as a one time occurrence**. Other areas will be reviewed when the analytical data is received.

In the event that significant changes in the information presented on the application occur, you shall immediately notify this Department in writing. Such changes shall include, but not be limited to, changes in: tonnage, process, facility name or address, waste composition and/or hauler.

Enclosed is a copy of the approved application. Should you have questions, please call this office at 716/851-7220.

Sincerely,

Mark J. Hans, P.E.
Regional Materials Management Engineer

MJH:dcg
hans\gullo-apr24.ltr

Enclosure

cc: Mr. Richard Stroh, Environmental Engineer I

47-12-7 (10/86) - Text 12
 NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE • BUREAU OF HAZARDOUS WASTE
 OPERATIONS
 60 WOLF ROAD, ALBANY, NEW YORK 12233-4017

FOR STATE USE ONLY		
SITE NO. 32N30	APPLICATION NO. M13-2644	DATE RECEIVED 4/29/13
DEPARTMENT ACTION <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		DATE 4/30/13

**APPLICATION FOR TREATMENT OR DISPOSAL
 OF AN INDUSTRIAL WASTE STREAM**
 SEE APPLICATION INSTRUCTIONS ON REVERSE SIDE

MJK

1. NAME OF PROJECT/FACILITY MODERN LANDFILL, INC.	2. COUNTY NIAGARA	3. SITE NUMBER 32N30
4. NAME OF OWNER RICHARD WASHUTA	7. ADDRESS (Street, City, State, Zip Code) 4748 Model City Road, Model City, NY 14107	6. TELEPHONE NO. (716) 754-8226
5. NAME OF OPERATOR RICHARD WASHUTA	8. ADDRESS (Street, City, State, Zip Code) Pletcher & Harold Road, Model City, NY 14107	9. TELEPHONE NO. (716) 754-8226
10. METHOD OF TREATMENT OR DISPOSAL SANITARY LANDFILL - D80 * Webster Block		
11. COMPANY GENERATING WASTE Harbor Center Development LLC	12. ADDRESS OF FACILITY GENERATING WASTE (Street, City, State, Zip Code) 75 Main Street, Buffalo NY 14203	
13. REPRESENTATIVE OF WASTE GENERATOR Clifford Benson	14. MAILING ADDRESS OF REPRESENTATIVE 1 Seymour H. Kross III Plaza, Buffalo NY 14203	15. TELEPHONE NO.
16. DESCRIPTION OF PROCESS PRODUCING WASTE EXCAVATION OF SOILS DURING SITE DEVELOPMENT		
17. EXPECTED ANNUAL WASTE PRODUCTION 30000 Tons/Year ONE TIME EVENT	18. WASTE HAILED IN <input type="checkbox"/> Drums <input type="checkbox"/> Bulk Tank <input type="checkbox"/> Roll-Off Container <input checked="" type="checkbox"/> Other TRUCKS - DUMP	
19. WASTE COMPOSITION 19a. Average Percent Solids 80	19b. Physical State <input type="checkbox"/> Liquid <input type="checkbox"/> Slurry <input type="checkbox"/> Sludge <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Contained Gas	19c. pH Range 7 to 11
20. COMPONENTS		
1) Soil (Industrial fill)	CONCENTRATION (Dry Weight) Upper Lower: Typical	UNITY (Check One) Wt. % ppm
2) BRICK/ROCK	90	<input checked="" type="checkbox"/> <input type="checkbox"/>
3)	10	<input checked="" type="checkbox"/> <input type="checkbox"/>
4) Areas A2-B3, B1-S, C1-S, + D1-S (initial Approval requested)		<input type="checkbox"/> <input type="checkbox"/>
* Remaining samples with pending due to limited access on this site		
20. IS AN ANALYSIS OF WASTE ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	21. WAS A TCLP TEST CONDUCTED ON THE WASTE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "yes", attach results	22. MATERIAL IS: <input type="checkbox"/> Hazardous <input checked="" type="checkbox"/> Non-Hazardous
23. DETAIL ALL HAZARD AND NUISANCE PROBLEMS ASSOCIATED WITH THE WASTE. List necessary safety, handling, treatment and disposal precautions. Application contains only TCLP data which confirms historical testing that has been previously sent to Regis & DEC office and reviewed by Dave Locey. (see Attached letter)		
24. WHERE WAS MATERIAL DISPOSED OF PREVIOUSLY ONE TIME EVENT		
25. NAME OF WASTE TRANSPORTER B. PARISIO TRUCK	26. ADDRESS (Street, City, State, Zip Code) Whitcomb Rd, Grand Island	27. NYSDEC PERMIT NO. 9A-591
28. TELEPHONE NOS 775-1419		
29. CERTIFICATION I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.46 of the Penal Law.		
a. SIGNATURE AND TITLE OF REPRESENTATIVE OF WASTE GENERATOR Clifford Benson, President		DATE 4/29/13
b. SIGNATURE AND TITLE OF REPRESENTATIVE OF TREATMENT OR DISPOSAL FACILITY Michael Whittles - Waste Approval Coordinator		DATE 04/29/13

GENERATOR WASTE CHARACTERIZATION REPORT

INSTRUCTIONS: The following form is required for disposal of nonhazardous industrial/commercial wastes at Modern Landfill. Please complete all sections of this report. Send completed report along with the analytical, chain of custody and the Application for Disposal of an Industrial Waste Stream (47-19-7) to this office. A separate form is required for each waste stream.

GENERATOR INFORMATION:

Generator Name: Harbor Center Development

Generating Facility Address: 75 Main Street, Buffalo NY 14203

Technical Contact: Mark Colmerauer Phone: 716-847-1630

Alternate Contact: _____ Phone: _____

INVOICING INFORMATION:

Contracting Firm: MARK CERRONE, INC.

Contact: _____ Phone: 716-282-5244

Do you have an existing account with Modern Landfill? Yes No

Billing Address: 2368 MARYLAND AVE, NIAGARA FALLS NY

TRANSPORTER INFORMATION:

Hauler Name: B. Pariso Trucking NYSDEC Permit No. 91A 591

Contact Person: MARY Phone No. 775-1419

Is Modern Landfill currently on your Transporter Permit: Yes No
If no, please enclose a Part C Application to cover this waste stream.

Transporters need to have the following. NOTE: You must have all the required items below to enter the landfill. Please check the box to state you have read the following.

Reflective vests, work boots (preferably steel toe), long pants and eye protection must be worn at all times. Vehicles must have 2 tow hooks (front and back) and Insurance Certificates on file with Modern Landfill.

Drivers must obey all landfill regulations, including all posted signs and use the onsite wheel wash prior to leaving the landfill. Failure to comply will result in immediate removal.

WASTE INFORMATION:

Common name of waste: Industrial Waste - Soils

Description of process generating this waste: Excavation of spoils during Site Development

Is this waste hazardous under US EPA Guidelines & 6NYCRR Part 371 (d)? Yes No

Indicate the category which best describes this waste stream:

- | | | | |
|-------------------------------------|------------------------|--------------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Industrial Waste | <input type="checkbox"/> | Construction & Demolition Debris |
| <input type="checkbox"/> | Household Waste | <input type="checkbox"/> | Other (Please Specify) _____ |
| <input type="checkbox"/> | Commercial Solid Waste | | |

PHYSICAL CHARACTERISTICS OF WASTE

The waste is at least 20% solid and contains no free liquid	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
The Flashpoint of the waste is >140°F	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
The pH level of the waste is between 2.0 and 12.5	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Is the waste reactive (Cyanide/Sulfide)?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
Is the waste free of PCBs	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Color: <u>Brown/Black</u>	Odor: <input type="checkbox"/> Strong <input type="checkbox"/> Mild <input checked="" type="checkbox"/> None	

TCLP TESTING AND CERTIFICATION

Metals

Constituent	Nonhazardous Limit (mg/l)	Present	Not Present
Arsenic	5.0		<input checked="" type="checkbox"/>
Barium	100.0		<input checked="" type="checkbox"/>
Cadmium	1.0		<input checked="" type="checkbox"/>
Chromium	5.0	<u><.05</u>	
Lead	5.0	<u>2.01 - 1.46</u>	
Mercury	0.2		<input checked="" type="checkbox"/>
Selenium	1.0		<input checked="" type="checkbox"/>
Silver	5.0		<input checked="" type="checkbox"/>

Herbicides / Pesticides

Constituent	Nonhazardous Limit (mg/l)	Present	Not Present
2,4-D	10.0		<input checked="" type="checkbox"/>
2,4,5-TP silvex	1.0		<input checked="" type="checkbox"/>
Endrin	0.02		<input checked="" type="checkbox"/>
Lindane	0.4		<input checked="" type="checkbox"/>
Methoxychlor	10.0		<input checked="" type="checkbox"/>
Toxaphene	0.5		<input checked="" type="checkbox"/>
Chlordane	0.03		<input checked="" type="checkbox"/>
Heptachlor	0.008		<input checked="" type="checkbox"/>

Acid Extractables

Constituent	Nonhazardous Limit (mg/l)	Present	Not Present
O-Creosol	200.0		<input checked="" type="checkbox"/>
M-Creosol	200.0		<input checked="" type="checkbox"/>
P-Creosol	200.0		<input checked="" type="checkbox"/>
Pentachlorophenol	100.0		<input checked="" type="checkbox"/>
2,4,5-Trichlorophenol	400.0		<input checked="" type="checkbox"/>
2,4,6-Trichlorophenol	2.0		<input checked="" type="checkbox"/>

Base Neutrals Extractables

Constituent	Nonhazardous Limit (mg/l)	Present	Not Present
1,4-Dichlorobenzene	7.5		<input checked="" type="checkbox"/>
2,4-Dinitrotoluene	0.13		<input checked="" type="checkbox"/>
Hexachlorobenzene	0.13		<input checked="" type="checkbox"/>
Hexachlorobutadiene	0.5		<input checked="" type="checkbox"/>
Hexachloroethane	3		<input checked="" type="checkbox"/>
Nitrobenzene	2		<input checked="" type="checkbox"/>
Pyridine	5		<input checked="" type="checkbox"/>

Volatile Organics

Constituent	Nonhazardous Limit (mg/l)	Present	Not Present
1,1-Dichloroethylene	0.7		<input checked="" type="checkbox"/>
Methyl Ethyl Ketone	200.0		<input checked="" type="checkbox"/>
Tetrachloroethylene	0.7		<input checked="" type="checkbox"/>
Vinyl Chloride	0.2		<input checked="" type="checkbox"/>
Benzene	0.5		<input checked="" type="checkbox"/>
Carbon Tetrachloride	0.5		<input checked="" type="checkbox"/>
Chlorobenzene	100.0		<input checked="" type="checkbox"/>
Chloroform	6.0		<input checked="" type="checkbox"/>
Trichloroethylene	0.5		<input checked="" type="checkbox"/>
1,2-Dichloroethane	0.5		<input checked="" type="checkbox"/>

CERTIFICATION

I certify that all information contained within this Generator Waste Characterization Report, including all attached information, is complete and actual and is an accurate representation of known or suspected hazards described herein.

Signature: Cliff Banson x
 Printed Name: Clifford Banson x
 Title: President x
 Company: Harborcenter Development LLC
 Date: 4/26/13 x



exp 5-8-14

EZ Profile™

Requested Facility: Chaffee Landfill Unsure Profile Number: 110726NY
 Check if there are multiple generator locations. Attach locations. Renewal? Original Profile Number: _____

A. GENERATOR INFORMATION (MATERIAL ORIGIN)

1. Generator Name: HARBORcenter Development, LLC
2. Site Address: 75 Main Street
(City, State, ZIP) Buffalo NY
3. County: Erie
4. Contact Name: CLIFFORD BENSON
5. Email: CLIFF.BENSON@HARBORCENTER.COM
6. Phone: (716) 855-4139 7. Fax: (716) 855-4704
8. Generator EPA ID: _____ N/A
9. State ID: _____ N/A

B. BILLING INFORMATION SAME AS GENERATOR

1. Billing Name: Mark Cerrone, INC
2. Billing Address: 2368 Maryland Avenue
(City, State, ZIP) Niagara Falls NY 14305
3. Contact Name: Raj Chopra
4. Email: rchopra@markcerrone.com
5. Phone: (716) 282-5244 6. Fax: (716) 283-4417
7. WM Hauled? Yes No
8. P.O. Number: _____

C. MATERIAL INFORMATION

1. Common Name: NH Soil/Urban Fill
Describe Process Generating Material: See Attached

Remediation of "Webster Block" near the former Erie Canal & Buffalo Harbor

2. Material Composition and Contaminants: See Attached

1. <u>NH Soil/Urban Fill</u>	<u>100 %</u>
2.	
3.	
4.	
≥100%	

3. State Waste Codes: _____ N/A
4. Color: _____
5. Physical State at 70°F: Solid Liquid Other: _____
6. Free Liquid Range Percentage: _____ to _____ N/A (Solid)
7. pH: _____ to _____ N/A (Solid)
8. Strong Odor: Yes No Describe: _____
9. Flash Point: <140°F 140°-199°F ≥200° N/A (Solid)

D. REGULATORY INFORMATION

1. EPA Hazardous Waste? Yes* No
Code: _____
2. State Hazardous Waste? Yes No
Code: _____
3. Excluded waste under 40 CFR 261.4 (a) or (b)? Yes* No
4. Contains Underlying Hazardous Constituents? Yes* No
5. Contains benzene and subject to 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
***If Yes, see Addendum (page 2) for additional questions and space.**
9. Contains PCBs? → If Yes, answer a, b and c. 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: Friable Yes: Non-Friable No

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: 30,000
 Tons Yards Drums Gallons Other: _____
3. Container Type and Size: _____
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) Clifford Benson Date: 04/02/2013
Title: President
Company: HarborCenter Development LLC

Certification Signature

Clifford Benson

THINK GREEN®

QUESTIONS? CALL 800 963 4776 FOR ASSISTANCE

Last Revised June 6, 2012
©2012 Waste Management, Inc



NON-HAZARDOUS WAM APPROVAL FORM

Requested Management Facility Chaffee Landfill

Profile Number 110726NY

Waste Approval Expiration Date 05/01/2014

APPROVAL DETAILS

Approval Decision Approved Not Approved

Profile Renewal Yes No

Management Method: Alternate Daily Cover (ADC)

Generator Name: HARBORcenter Development, LLC

Management Facility Precautions, Special Handling Procedures or Limitation on approval:

- Shall not contain free liquid
- Shipment must be scheduled into disposal facility
- Approval Number must accompany each shipment
- Waste Manifest or applicable shipping document must accompany load
- Shall not pose a dust nuisance
- Shall not pose a odor nuisance
- Analysis provided shall be representative of all material shipped under this non-hazardous waste profile
- Shall comply with applicable DOT and OSHA labeling, packaging and manifesting requirements
- Shall notify WM disposal location of changes associated with original waste generating process prior to shipment

Additional Conditions:

Approval for soils contingent upon representative analysis being received and approved by Waste Management and NYSDEC.

Any additional analysis must be supplied to Waste Management (who will forward to NYSDEC) for evaluation as it becomes available.

WM Authorization Name: Andrew Argona

Title: Waste Approval Manager

WM Authorization Signature: *Andrew D. Argona*

Date: 05/08/2013

Agency Authorization (if Required): _____

Date: _____



Requested Facility: Chaffee Landfill Unsure Profile Number: 110726NY

Check if there are multiple generator locations. Attach locations. Renewal? Original Profile Number: _____

A. GENERATOR INFORMATION (MATERIAL ORIGIN)

- 1. Generator Name: HARBORcenter Development, LLC
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(City, State, ZIP) Buffalo NY
- 3. County: Erie
- 4. Contact Name: CLIFFORD BENSON
- 5. Email: CLIFF.BENSON@HARBORCENTER.COM
- 6. Phone: (716) 855-4139 7. Fax: (716) 855-4704
- 8. Generator EPA ID: _____ N/A
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B. BILLING INFORMATION

SAME AS GENERATOR

- 1. Billing Name: Mark Cerrone, INC
- 2. Billing Address: 2368 Maryland Avenue
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- 3. Contact Name: Raj Chopra
- 4. Email: r Chopra@markcerrone.com
- 5. Phone: (716) 282-5244 6. Fax: (716) 283-4417
- 7. WM Hauled? Yes No
- 8. P.O. Number: _____

C. MATERIAL INFORMATION

- 1. Common Name: NH Soil/Urban Fill

Describe Process Generating Material: See Attached

Remediation of "Webster Block" near the former Erie Canal & Buffalo Harbor

- 2. Material Composition and Contaminants: See Attached

1. NH Soil/Urban Fill	100 %
2.	
3.	
4.	
≥100%	

- 3. State Waste Codes: _____ N/A
- 4. Color: _____
- 5. Physical State at 70°F: Solid Liquid Other: _____
- 6. Free Liquid Range Percentage: _____ to _____ N/A (Solid)
- 7. pH: _____ to _____ N/A (Solid)
- 8. Strong Odor: Yes No Describe: _____
- 9. Flash Point: <140°F 140°-199°F ≥200° N/A (Solid)

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

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) Clifford Benson Date: 04/02/2013

Title: President

Company: HarborCenter Development LLC

Certification Signature

FOR STATE USE ONLY		
SITE NO.	APPLICATION NO.	DATE RECEIVED
DEPARTMENT ACTION <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved		DATE

**APPLICATION FOR TREATMENT OR DISPOSAL
 OF AN INDUSTRIAL WASTE STREAM
 SEE APPLICATION INSTRUCTIONS ON REVERSE SIDE**



1. NAME OF PROJECT/FACILITY MODERN LANDFILL, INC.	2. COUNTY NIAGARA	3. SITE NUMBER 32N30
4. NAME OF OWNER RICHARD WASHUTA	5. ADDRESS (Street, City, State, Zip Code) 4746 Model City Road, Model City, NY 14107	6. TELEPHONE NO. (716) 754-8226
6. NAME OF OPERATOR RICHARD WASHUTA	8. ADDRESS (Street, City, State, Zip Code) Pletcher & Harold Road, Model City, NY 14107	9. TELEPHONE NO. (716) 754-8226
10. METHOD OF TREATMENT OR DISPOSAL SANITARY LANDFILL - D90		
11. COMPANY GENERATING WASTE Harbor Center Development LLC	12. ADDRESS OF FACILITY GENERATING WASTE (Street, City, State, Zip Code) 75 Main Street, Buffalo NY 14203	
13. REPRESENTATIVE OF WASTE GENERATOR	14. MAILING ADDRESS OF REPRESENTATIVE 1 Seymour H. Knox III Plaza, Buffalo NY 14203	15. TELEPHONE NO.
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17. EXPECTED ANNUAL WASTE PRODUCTION 80000 Gallons/Year one time event	18. WASTE HAULED IN <input type="checkbox"/> Drums <input type="checkbox"/> Bulk Tank <input type="checkbox"/> Roll-Off Container <input checked="" type="checkbox"/> Other TRUCKS	
19. WASTE COMPOSITION 19A. Average Percent Solids 80	19b. Physical State <input type="checkbox"/> Liquid <input type="checkbox"/> Slurry <input type="checkbox"/> Sludge <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Contained Gas	19c. pH Range 7 to 11
19d. COMPONENTS	CONCENTRATION (Dry Weight) Upper Lower Typical	UNIT (Check One) Wt. % ppm
1) Soil		90 <input checked="" type="checkbox"/> <input type="checkbox"/>
2) BRICK/ROCK		10 <input checked="" type="checkbox"/> <input type="checkbox"/>
3)		<input type="checkbox"/> <input type="checkbox"/>
4)		<input type="checkbox"/> <input type="checkbox"/>
20. IS AN ANALYSIS OF WASTE ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	21. WAS A TCLP TEST CONDUCTED ON THE WASTE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "yes", attach results	22. MATERIAL IS: <input type="checkbox"/> Hazardous <input type="checkbox"/> Non-Hazardous
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25. NAME OF WASTE TRANSPORTER B. PARISU TRUCK	26. ADDRESS (Street, City, State, Zip Code) Whitewater Rd, Grand Island	27. NYSDEC PERMIT No. GA-591
28. TELEPHONE NO. 775-1419		
29. CERTIFICATION I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.		
a. SIGNATURE AND TITLE OF REPRESENTATIVE OF WASTE GENERATOR Richard Washuta, PRESIDENT		DATE 4/26/13
b. SIGNATURE AND TITLE OF REPRESENTATIVE OF TREATMENT OR DISPOSAL FACILITY		DATE



PARADIGM
ENVIRONMENTAL SERVICES, INC.

Analytical Report For
CEM Services, Inc.

For Lab Project ID

131128

Referencing

Harbor Center

Prepared

Tuesday, April 09, 2013

Any noncompliant QC parameters or other notes impacting data interpretation are flagged or documented on the final report or are noted below:

Reduced sample size used for TCLP (1311) extraction of 131128-03A due to limited sample volume.

A handwritten signature in black ink, consisting of several overlapping, stylized strokes, positioned above a horizontal line.

Certifies that this report has been approved by the Technical Director or Designee

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.



Client: CEM Services, Inc.

Project Reference: Harbor Center

Sample Identifier: 5 Composite

Lab Sample ID: 131128-05

Matrix: Soil

Date Sampled: 4/3/2013

Time Sampled:

Date Received: 4/3/2013

pH

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>Qualifier</u>	<u>Date/Time Analyzed</u>
pH	8.49 @ 20 C	S.U.		4/4/2013 2:15:00 PM
Method Reference(s):	EPA 9045C			

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.



Client: **CEM Services, Inc.**

Project Reference: Harbor Center

Sample Identifier: 5 Composite

Lab Sample ID: 131128-05

Matrix: Soil

Date Sampled: 4/3/2013

Date Received: 4/3/2013

Flash Point

Analyte	Result	Units	Qualifier	Date Analyzed
Flash Point, Celsius	>70	C		4/3/2013
Method Reference(s):	EPA 1010			

PCBs

Analyte	Result	Units	Qualifier	Date Analyzed
PCB-1016	< 0.436	mg/Kg		4/8/2013
PCB-1221	< 0.436	mg/Kg		4/8/2013
PCB-1232	< 0.436	mg/Kg		4/8/2013
PCB-1242	< 0.436	mg/Kg		4/8/2013
PCB-1248	< 0.436	mg/Kg		4/8/2013
PCB-1254	< 0.436	mg/Kg		4/8/2013
PCB-1260	< 0.436	mg/Kg		4/8/2013
PCB-1262	< 0.436	mg/Kg		4/8/2013
PCB-1268	< 0.436	mg/Kg		4/8/2013
Method Reference(s):	EPA 8082A EPA 3550C			

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.



Client: CEM Services, Inc.

Project Reference: Harbor Center

Sample Identifier: 1 South

Lab Sample ID: 131128-01

Date Sampled: 4/3/2013

Matrix: TCLP Extract

Date Received: 4/3/2013

TCLP Mercury

Analyte	Result	Units	Regulatory Limit	Qualifier	Date Analyzed
Mercury	< 0.00200	mg/L	0.2		4/8/2013

Method Reference(s): EPA 7470A

EPA 1311

Data File: hg130408a

TCLP RCRA Metals (ICP)

Analyte	Result	Units	Regulatory Limit	Qualifier	Date Analyzed
Arsenic	< 0.100	mg/L	5		4/5/2013
Barium	1.20	mg/L	100		4/5/2013
Cadmium	< 0.0250	mg/L	1		4/5/2013
Chromium	< 0.0500	mg/L	5		4/5/2013
Lead (Axial)	< 0.100	mg/L	5		4/5/2013
Selenium	< 0.100	mg/L	1		4/5/2013
Silver	< 0.0500	mg/L	5		4/5/2013

Method Reference(s): EPA 6010B

EPA 1311 / 3005

Data File: 040513b

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.



Client: CEM Services, Inc.

Project Reference: Harbor Center

Sample Identifier: 2 East

Lab Sample ID: 131128-02

Date Sampled: 4/3/2013

Matrix: TCLP Extract

Date Received: 4/3/2013

TCLP Mercury

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>Regulatory Limit</u>	<u>Qualifier</u>	<u>Date Analyzed</u>
Mercury	< 0.00200	mg/L	0.2		4/8/2013

Method Reference(s): EPA 7470A

EPA 1311

Data File: hg130408a

TCLP RCRA Metals (ICP)

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>Regulatory Limit</u>	<u>Qualifier</u>	<u>Date Analyzed</u>
Arsenic	< 0.100	mg/L	5		4/5/2013
Barium	0.806	mg/L	100		4/5/2013
Cadmium	< 0.0250	mg/L	1		4/5/2013
Chromium	< 0.0500	mg/L	5		4/5/2013
Lead (Axial)	< 0.100	mg/L	5		4/5/2013
Selenium	< 0.100	mg/L	1		4/5/2013
Silver	< 0.0500	mg/L	5		4/5/2013

Method Reference(s): EPA 6010B

EPA 1311 / 3005

Data File: 040513b

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Client: CEM Services, Inc.

Project Reference: Harbor Center

Sample Identifier: 3 North

Lab Sample ID: 131128-03

Date Sampled: 4/3/2013

Matrix: TCLP Extract

Date Received: 4/3/2013

TCLP Mercury

Analyte	Result	Units	Regulatory Limit	Qualifier	Date Analyzed
Mercury	< 0.00200	mg/L	0.2		4/8/2013

Method Reference(s): EPA 7470A

EPA 1311

Data File: hg130408a

TCLP RCRA Metals (ICP)

Analyte	Result	Units	Regulatory Limit	Qualifier	Date Analyzed
Arsenic	< 0.100	mg/L	5		4/5/2013
Barium	0.794	mg/L	100		4/5/2013
Cadmium	< 0.0250	mg/L	1		4/5/2013
Chromium	< 0.0500	mg/L	5		4/5/2013
Lead (Axial)	< 0.100	mg/L	5		4/5/2013
Selenium	< 0.100	mg/L	1		4/5/2013
Silver	< 0.0500	mg/L	5		4/5/2013

Method Reference(s): EPA 6010B

EPA 1311 / 3005

Data File: 040513b

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Client: CEM Services, Inc.

Project Reference: Harbor Center

Sample Identifier: 4 West

Lab Sample ID: 131128-04

Date Sampled: 4/3/2013

Matrix: TCLP Extract

Date Received: 4/3/2013

TCLP Mercury

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>Regulatory Limit</u>	<u>Qualifier</u>	<u>Date Analyzed</u>
Mercury	< 0.00200	mg/L	0.2		4/8/2013

Method Reference(s): EPA 7470A
EPA 1311
Data File: hg130408a

TCLP RCRA Metals (ICP)

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>Regulatory Limit</u>	<u>Qualifier</u>	<u>Date Analyzed</u>
Arsenic	< 0.100	mg/L	5		4/5/2013
Barium	0.919	mg/L	100		4/5/2013
Cadmium	< 0.0250	mg/L	1		4/5/2013
Chromium	< 0.0500	mg/L	5		4/5/2013
Lead (Axial)	< 0.100	mg/L	5		4/5/2013
Selenium	< 0.100	mg/L	1		4/5/2013
Silver	< 0.0500	mg/L	5		4/5/2013

Method Reference(s): EPA 6010B
EPA 1311 / 3005
Data File: 040513b

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Client: CEM Services, Inc.

Project Reference: Harbor Center

Sample Identifier: 5 Composite

Lab Sample ID: 131128-05A

Matrix: TCLP Extract

Date Sampled: 4/3/2013

Date Received: 4/3/2013

TCLP Semi-Volatile Organics

Analyte	Result	Units	Regulatory Limit	Qualifier	Date Analyzed
1,4-Dichlorobenzene	< 40.0	ug/L	7500		4/5/2013
2,4,5-Trichlorophenol	< 80.0	ug/L	400000		4/5/2013
2,4,6-Trichlorophenol	< 40.0	ug/L	2000		4/5/2013
2,4-Dinitrotoluene	< 40.0	ug/L	130		4/5/2013
Cresols (as m,p,o-Cresol)	< 40.0	ug/L	200000		4/5/2013
Hexachlorobenzene	< 40.0	ug/L	130		4/5/2013
Hexachlorobutadiene	< 40.0	ug/L	500		4/5/2013
Hexachloroethane	< 40.0	ug/L	3000		4/5/2013
Nitrobenzene	< 40.0	ug/L	2000		4/5/2013
Pentachlorophenol	< 80.0	ug/L	100000		4/5/2013
Pyridine	< 40.0	ug/L	5000		4/5/2013

Method Reference(s): EPA 8270C
EPA 1311 / 3510C
Data File: S68831.D

TCLP Mercury

Analyte	Result	Units	Regulatory Limit	Qualifier	Date Analyzed
Mercury	< 0.00200	mg/L	0.2		4/8/2013

Method Reference(s): EPA 7470A
EPA 1311
Data File: hg130408a

TCLP RCRA Metals (ICP)

Analyte	Result	Units	Regulatory Limit	Qualifier	Date Analyzed
Arsenic	< 0.100	mg/L	5		4/5/2013
Barium	0.870	mg/L	100		4/5/2013
Cadmium	< 0.0250	mg/L	1		4/5/2013
Chromium	< 0.0500	mg/L	5		4/5/2013

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Client: CEM Services, Inc.

Project Reference: Harbor Center

Sample Identifier: 5 Composite

Lab Sample ID: 131128-05A

Date Sampled: 4/3/2013

Matrix: TCLP Extract

Date Received: 4/3/2013

Lead (Axial)	< 0.100	mg/L	5	4/5/2013
Selenium	< 0.100	mg/L	1	4/5/2013
Silver	< 0.0500	mg/L	5	4/5/2013

Method Reference(s): EPA 6010B
EPA 1311 / 3005
Data File: 040513b

TCLP Volatile Organics

Analyte	Result	Units	Regulatory Limit	Qualifier	Date Analyzed
1,1-Dichloroethene	< 20.0	ug/L	700		4/5/2013
1,2-Dichloroethane	< 20.0	ug/L	500		4/5/2013
2-Butanone	< 100	ug/L	200000		4/5/2013
Benzene	< 20.0	ug/L	500		4/5/2013
Carbon Tetrachloride	< 20.0	ug/L	500		4/5/2013
Chlorobenzene	< 20.0	ug/L	100000		4/5/2013
Chloroform	< 20.0	ug/L	6000		4/5/2013
Tetrachloroethene	< 20.0	ug/L	700		4/5/2013
Trichloroethene	< 20.0	ug/L	500		4/5/2013
Vinyl chloride	< 20.0	ug/L	200		4/5/2013

Method Reference(s): EPA 8260B
EPA 1311 / 5030
Data File: X04312.D

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PARADIGM
ENVIRONMENTAL SERVICES, INC.

Analytical Report Appendix

The reported results relate only to the samples as they have been received by the laboratory.

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All soil/sludge samples have been reported on a dry weight basis, unless qualified "reported as received". Other solids are reported as received.

The Chain of Custody provides additional information, including compliance with sample condition requirements upon receipt. Sample condition requirements are defined under the 2003 NELAC Standard, sections 5.5.8.3.1 and 5.5.8.3.2.

NYSDOH ELAP does not certify for all parameters. Paradigm Environmental Services or the indicated subcontracted laboratory does hold certification for all analytes where certification is offered by ELAP unless otherwise specified. Aliquots separated for certain tests, such as TCLP, are indicated on the Chain of Custody and final reports with an "A" suffix.

Data qualifiers are used, when necessary, to provide additional information about the data. This information may be communicated as a flag or as text at the bottom of the report. Please refer to the following list of analyte-specific, frequently used data flags and their meaning:

"<" = Analyzed for but not detected at or above the quantitation limit.

"E" = Result has been estimated, calibration limit exceeded.

"Z" = See case narrative.

"D" = Sample, Laboratory Control Sample, or Matrix Spike Duplicate results above Relative Percent Difference limit.

"M" = Matrix spike recoveries outside QC limits. Matrix bias indicated.

"B" = Method blank contained trace levels of analyte. Refer to included method blank report.

"V" = Sample concentration is >10 times the spike. No meaningful Spike Recovery can be calculated.

"J" = Result estimated between the quantitation limit and half the quantitation limit.

"L" = Laboratory Control Sample recovery outside accepted QC limits.

"NC" = Non Calculable due to Non Detect Results.

"" = Quality Control Outlier*

179 Lake Avenue • Rochester, NY 14608 • (585) 647-2530 • Fax (585) 647-3311 • ELAP ID# 10958

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Report Prepared Tuesday, March 12, 2013

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CEM Services.

Analysis Request & Chain of Custody

1815 Love Road Grand Island, NY 14072

Ph. 716.480.2125 Fax 716.773.3456

131128

10/2

Harbor Center _____ Raj _____ 4 day _____
 Project Number _____ Contact Person _____ Turnaround time _____ # of Samples _____
 Spoils Piles _____

Sample Number	Material Description	Quantity	Lab Use
1	South Matrix Soil	1	01
2	East	1	02
3	North	1	03
4	West	1	04
5	Composite	2	05A

Comments/Special Instructions: Sieved

Analyte (circle) Asbestos Lead other _____
 Analysis (circle) PLM PCM TEM AAS _____

Sampled/By _____ Date 4/3/13 Time 9:05A
 Relinquished By _____ Date 4-3-13 Time _____

Received By [Signature] Date 4-3-13 Time 8:45A
 Received By Elizabeth Atkinson Date 4/3/13 Time 1243



Chain of Custody Supplement

Client: CEM Services Completed by: EAH
 Lab Project ID: 131128 Date: 4/3/13

Sample Condition Requirements
 Per NELAC/ELAP 210/241/242/243/244

Condition	<i>NELAC compliance with the sample condition requirements upon receipt</i>		
	Yes	No	N/A
Container Type	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments	_____		
Transferred to method-compliant container	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Headspace (<1 mL)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments	_____		
Preservation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments	_____		
Chlorine Absent (<0.10 ppm per test strip)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments	_____		
Holding Time	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments	_____		
Temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Metals
Comments	5°Ciced		
Sufficient Sample Quantity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments	_____		