

#### WWW. NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's U                           | S EPA ID No.   | Manifest Doc No.        |              | 2. Page 1  | of                               | 11:15                     |             |  |
|---|--|--|-------------------------|--------------|--|----------------------------------|---------------------------|-------------|--|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                     | BIN#10221                                  | Generator's Site Add<br>GEORGIA POWER<br>155 CROSSGATE<br>PORT WENTWOR | RD.                     | ng):         |  | st Number MNA B. State (         | 6677887<br>Generator's ID |             |  |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name  | 06-1365                                    | 6. U   | IS EPA ID Number        |              |  | -                                |                           |             |  |
| (Non that II)   | - 1  |  |                         |              |  | ransporter's II<br>orter's Phone |                           |             |  |
| 7. Transporter 2 Company Name   |  | 8. U   | S EPA ID Number         |              | E. State Transporter's ID F. Transporter's Phone |                                  |                           |             |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL  | Address                                    | 10.  | US EPA ID Number        |              | G. State Facility ID                             |                                  |                           |             |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |  |  |                         |              | H. State F                                       | acility Phone                    | e 912-927-6113            |             |  |
| 11. Description of Waste Materials  |  |  | 12. Contain<br>No.      | ners<br>Type | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.             | I. Misc. Comments         |             |  |
| a. COAL ASH& COAL CONTAN  |  |  | L07                     | IT           | 17   |                                  |                           |             |  |
| b. WM Profile   | # 375200GAK                                | (RA  |                         |              |  |                                  |                           | -           |  |
|   | VM Profile #                               | -1   |                         |              |  | -                                |                           |             |  |
| c. V  | VM Profile #                               |  |                         |              |  |                                  |                           |             |  |
| d.  | VM Profile #                               |  |                         |              |  |                                  |                           |             |  |
| J. Additional Descriptions for Mate   |  | ,  | K. Disposal I           | Location     | 3/0/2  | 7                                | Level 65                  |             |  |
| 15. Special Handling Instructions and   | Additional Inform                          | ation  | ) Grid                  | 1            | 311  | 6.0                              |                           |             |  |
| Purchase Order # GPC1076029   | 93   | EMERGE   | NCY CONTACT / PHON      | E NO.:       |  |                                  |                           |             |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descriaccurately described, classified and p                  |  |  | •                       |              |  |                                  | eve been fully and        |             |  |
| Printed Name  |  | Signature "(   | On behalf of"           |              |  |                                  | Month Day                 | Year<br>1 % |  |
| 17. Transporter 1 Acknowledgement Printed Name  | or Receipt of Mate                         | Signature  | 100                     |              |  |                                  | Month Day                 | Year        |  |
| 18. Transporter 2 Acknowledgement Printed Name  | of Receipt of Mate                         | 1  |                         |              |  |                                  | T Marit T Day T           |             |  |
| ranteu wanie  |  | Signature  |                         |              |  |                                  | Month Day                 | Year        |  |
| 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | treatment facility,<br>and licenses on the | dates listed above.  |                         |              |  | as managed i                     | n compliance with all     |             |  |
| 20. Facility Owner or Operator: Cert Printed Name   | ification of receipt                       | of non-hazardous ma<br>Signature                                       | terials covered by this | manifest.    |  |                                  | Month Days                | Year        |  |
| White-TREATMENT, STORAGE, DISPO   | OSAL FACILITY COP                          |  | ERATOR #2 COPY          |              | Ye   | llow- GENERA                     | 971                       | t           |  |

**Gold-TRANSPORTER #1 COPY** 

Pink- FACILITY USE ONLY



Original Ticket# 1249290

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL Volume

Ticket Date 04/27/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code '

Manifest 6677888

Destination

P8

Profile 3/5200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 04/27/2018 12:07:57 Inbound 1 Out 04/27/2018 12:07:57

Scale

Operator LBEJARAN LBEJARAN

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Gross Tare Net

Tons

68520 15 29480 15 39040 15

19.52

Comments

LD% Qty UOM Rate Tax Amount Origin Product 1 COAL ASH & COAL CO 100 19.52 Tons PORTW

Total Tax Total Ticket

403WM



### NON-HAZARDOUS MANIFEST

|                  | NON-HAZARDOUS MANIFEST 1. Ge   | nerator's US EP   |  | Manifest Doc I        | No.         | 2. Page 1  | of  | 11         | " 21        | 4    |  |  |
|------------------|--|-------------------|--|-----------------------|-------------|--|---|------------|-------------|------|--|--|
|                  | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#1 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-13             | 0221 GE0<br>POI   | perator's Site Address<br>ORGIA POWER PL<br>5 CROSSGATE RD.<br>RT WENTWORTH, | ANT KRAFT             | ailing):    |  | st Number MNA B. State G                                | 6677       |             |      |  |  |
|                  | 5. Transporter 1 Company Name  | 1.10              |  | A ID Number           |             |  | ransporter's IC<br>orter's Phone                        |            |             |      |  |  |
|                  | 7. Transporter 2 Company Name  | J                 | 8. US EP   | A ID Number           |             | E. State Transporter's ID F. Transporter's Phone |   |            |             |      |  |  |
|                  | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 55                | 10. US E   | PA ID Number          |             |  | 6. State Facility ID  I. State Facility Phone 912-927-0 |            |             | 3    |  |  |
| G                | 11. Description of Waste Materials   |                   |  |                       | ntainers    | 13. Total  | 14. Unit  | L M        | isc. Commen | its  |  |  |
| BEZER            | a. COAL ASH& COAL CONTAMINATE  | D WASTE           |  | LMF1                  | Туре        | Quantity   | Wt./Vol.  |            |             |      |  |  |
| A T O R          | b.<br>WM Pro   |                   |  |                       |             |  |   |            |             |      |  |  |
|                  | d. WM Pro  | file #            |  |                       |             |  | - X-110 M   |            |             |      |  |  |
|                  | WM Pro   | 43                |  | K. Dispos  Cell  Grid | al Location | 320  | 174   | Level      | U           | r s  |  |  |
|                  | 15. Special Handling Instructions and Addition   | onal Information  | 1  | GIIG                  | L           | i) Id  | 14 / C  |            |             |      |  |  |
|                  | Purchase Order # GPC10760293   | · · · ·           | EMERGENCY  | CONTACT / PHO         | ONE NO.:    |  |   |            |             |      |  |  |
|                  | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described ma accurately described, classified and packaged Printed Name             |                   |  | portation accor       |             |  |   | ve been fu | lly and     | Year |  |  |
| т                | 17. Transporter 1 Acknowledgement of Rece  | aint of Materials |  |                       | /           |  |   | A          | 9           | 15   |  |  |
| R<br>A<br>N<br>S | Printed Name   | y C               | Signature  | 11/1                  | 6           |  |   | Month      | Day         | Year |  |  |
| P O R T E R      | 18. Transporter 2 Acknowledgement of Rece<br>Printed Name  | eipt of Materials | Signature  |                       |             |  |   | Month      | Day         | Year |  |  |
| FAC .            | 19. Certificate of Final Treatment/Disposal<br>I certify, on behalf of the above listed treatm<br>applicable laws, regulations, permits and lice | nses on the date  | es listed above.   |                       |             |  | as managed in   | complianc  | e with all  |      |  |  |
| 1 7              | 20. Facility Owner or Operator: Certification Printed Name   | of receipt of no  |  | s covered by th       | is manifest | t.   |   | Menth      | 0           | V    |  |  |
| Y                | Trinted Walife   |                   | Signature  | 11                    | 2           |  |   | Month      | Day         | Year |  |  |
|                  | White-TREATMENT, STORAGE, DISPOSAUFA Pink- FACILITY USE ONLY   | CILITY COPY       | Blue- GENERAT  |                       |             | Yel  | low- GENERAT  | OR #1 CO   | ά/          |      |  |  |



Original Ticket# 1249291

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/27/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677889

Destination

PO

Profile 375200GAKRA (CDAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 04/27/2018 12:10:05 Inbound 1 Out 04/27/2018 12:10:05

Scale

LBEJARAN

Operator LBEJARAN

Gross Tare Net Tons

58380 lb 27500 lb 30880 1b

15.44

Comments

Product

LD% Qty UOM

Vehicle# 5306

Container

Billing #

Gen EPA ID NR

Driver

Check#

0001037

Rate Tax Amount Origin

COAL ASH & COAL/CO 100 15.44 Tons

PORTW

Total Tax Total Ticket

403WM



#### NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA                             |  | Manifest Doc    | No.              | 2, Page 1             | of                               | 11          | 129         | 2    |
|---|---|--|-----------------|------------------|-----------------------|----------------------------------|-------------|-------------|------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,   | GEC   | erator's Site Address<br>DRGIA POWER PL<br>CROSSGATE RD. | ·               | ailing):         |                       | st Number                        | 667         |             |      |
| ATLANTA, GA 30308-3374 4. Generator's Phone 404-5   |   | RT WENTWORTH,  |                 |                  |                       | b. state (                       | senerators  |             |      |
| 5. Transporter 1 Company Name   | 57 L. K.  | 6. US EP   | A ID Number     |                  |                       | ransporter's IC<br>orter's Phone | )           | - 11 - 11   |      |
| 7. Transporter 2 Company Name   |   | 8. US EP   | A ID Number     |                  |                       | ransporter's IC<br>orter's Phone | )           |             |      |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD  | Address   | 10. US E   | PA ID Number    |                  | G. State F            | acility ID                       | 912-9       | 927-611     | 3    |
| Savannah, GA 31419  |   |  |                 |                  | THE COLUMN            | actively 7 Horice                |             |             |      |
| G 11. Description of Waste Materials  |   |  | 12, Co<br>No.   | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             |             |             |      |
| a. COAL ASH& COAL CONTAM  WM Profile  |   |  | 13(6            | NT               | 1-                    |                                  |             |             |      |
| ь.  |   |  |                 |                  |                       |                                  |             |             |      |
| c.  | /M Profile #                                      |  |                 |                  |                       |                                  |             |             |      |
| d.  |   |  |                 |                  |                       |                                  |             |             |      |
| J. Additional Descriptions for Mater  | /M Profile #<br>rials Listed Above                |  | Cell            | sal Location     | 310                   | 179                              | Level       | (-1         |      |
| 15. Special Handling Instructions and   | Additional Information                            |  | Grid            |                  | nly                   | , 372                            |             |             |      |
| Purchase Order # GPC1076029   | 3   | EMERGENCY  | CONTACT / PHO   | ONE NO.:         |                       |                                  |             | -           |      |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descri   |   |  |                 |                  |                       |                                  | ive been fu | lly and     |      |
| Printed Name  | аскадео апо аге іп ргор                           | Signature "On be   |                 | roing to ap      | plicable regu         | lations.                         | Month       | Day         | Year |
| 17. Transporter 1 Acknowledgement Printed Name  | of Receipt of Materials                           | Signature  | -               |                  |                       |                                  | Month       | Day         | Year |
| 18. Transporter 2 Acknowledgement   | of Receipt of Materials                           | 1  | 1               |                  |                       |                                  |             | នាធ         | 185  |
| Printed Name  |   | Signature  |                 |                  |                       |                                  | Month       | Day         | Year |
| 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits<br>20. Facility Owner or Operator: Cert | treatment facility, that and licenses on the date | s listed above.  |                 |                  |                       | as managed ir                    | o complian  | ce with all |      |
| Printed Name  | ncation of receipt of not                         | Signature  | s covered by tr | ns manifes       |                       | 1941                             | Month       | Day         | Year |
| White- TREATMENT, STORAGE, DISPO  | SAL FACILITY COPY                                 | Blue- GENERATO   | OR #2 COPY      |                  | Ye                    | llow- GENERA                     | TOR #1 CO   | PY          |      |

Pink- FACILITY USE ONLY



Original Ticket# 1249297

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier BASHLOR TRUCKING B1

Ticket Date 04/27/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677890

Destination

P0

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

04/27/2018 12:25:37 Inbound 1 Out 04/27/2018 12:25:37

Scale

Operator LBEJARAN **LBEJARAN** 

Gross Tare Net

Tons

53140 lb 21240 lb 31900 lb

15.95

Comments

Product

LD% Qty

UOM

Rate

Vehicle# B1

Container

Billing #

Gen EPA ID NR

Driver

Check#

Tax

0001037

Amount

Origin

1 COAL ASH & COAL CO 100 15.95 Tons

PORTW

Bathe



### WATER NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |   | - AT 1700  |  |                            | .,   |                           |                     |              |              |  |  |
|---|---|--|--|----------------------------|--|---------------------------|---------------------|--------------|--------------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US   | S EPA ID No.   | Manifest Doc                                 | No.                        | 2. Page 1  | of                        | 11:                 | 33           |              |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE  | , BIN#10221   | Generator's Site Address (<br>GEORGIA POWER PLA<br>155 CROSSGATE RD.   | NT KRAFT                                     | ailing):                   |  | st Number MNA  B. State 6 | 6677<br>Generator's |              |              |  |  |
| ATLANTA, GA 30308-3374  4. Generator's Phone 404-   | 506-1365  | PORT WENTWORTH,  | GA 31407                                     |                            |  |                           |                     |              |              |  |  |
| 5. Transporter 1 Company Name   | 300-1303  | 6. US EPA  | ID Number                                    |                            |  |                           |                     |              | HIE          |  |  |
| 1703 61 (V)   | cut ve  |  |  |                            |  | ransporter's IC           |                     |              |              |  |  |
| 7. Transporter 2 Company Name   | E-9   | 8. US EPA  | ID Number                                    |                            |  |                           |                     |              |              |  |  |
|   |   |  |  |                            | E. State Transporter's ID F. Transporter's Phone |                           |                     |              |              |  |  |
| 9. Designated Facility Name and Si  | te Address  | 10. US EP  | A ID Number                                  |                            |  |                           |                     |              |              |  |  |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD   |   |  |  |                            | G. State F                                       | 27 (11)                   |                     |              |              |  |  |
| Savannah, GA 31419  |   |  |  |                            | H. State F                                       | acility Phone             | e 912-927-6113      |              |              |  |  |
|   |   |  | 12.60  | ntainers                   | 13. Total 14. Unit                               |                           |                     | ×0           |              |  |  |
| 11. Description of Waste Materials  |   |  | No.  | Type                       | Quantity   | Wt./Vol.                  | I. M                | isc. Commen  | ts           |  |  |
| a. COAL ASH& COAL CONTAI  | MINATED WASTE   |  | RI   | No                         | 1157   |                           |                     |              |              |  |  |
| WM Profil   | le# 375200GAK   | RA   |  |                            |  |                           |                     |              | 1 3          |  |  |
| b.  |   |  |  |                            |  |                           |                     |              |              |  |  |
|   |   |  |  |                            |  |                           |                     |              |              |  |  |
| c.  | WM Profile #  |  |  |                            | Supplement of the second                         |                           |                     | 10           |              |  |  |
|   |   |  |  |                            |  |                           |                     |              |              |  |  |
| d.  | WM Profile #  |  |  |                            |  |                           |                     |              |              |  |  |
|   |   |  |  |                            | 1  |                           |                     |              |              |  |  |
|   | WM Profile #  |  |  |                            |  | HE WE HE                  | FF 2                | The state of |              |  |  |
| J. Additional Descriptions for Mat  | enals Listed Above  |  | K. Dispos                                    | al Location                | 57 01  | 21                        |                     | 15           |              |  |  |
|   |   |  | Cell   | 13                         |  | 75                        | Level               | -            |              |  |  |
| 15. Special Handling Instructions ar  | nd Additional Informa   | ation  | Ona  |                            | 2711   |                           |                     |              |              |  |  |
|   |   |  |  |                            |  |                           |                     |              |              |  |  |
|   |   |  |  |                            |  |                           |                     |              |              |  |  |
| Purchase Order # GPC107602  | 293   | EMERGENCY (  | CONTACT / PH                                 | ONE NO.:                   |  |                           |                     |              |              |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc   | ribed materials are n   | ot hazardous wastes as de  | fined by CFR P                               | art 261 or                 |  |                           | ave been fu         | lly and      |              |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name  | ribed materials are n   | ot hazardous wastes as de  | fined by CFR P                               | art 261 or                 |  |                           | Month               | lly and      | Year         |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name  | ribed materials are n<br>packaged and are in  | ot hazardous wastes as de<br>proper condition for trans<br>Signature "On be  | fined by CFR P                               | art 261 or                 |  |                           |                     |              | Year<br>(년   |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name  | ribed materials are n<br>packaged and are in  | ot hazardous wastes as de<br>proper condition for trans<br>Signature "On be  | fined by CFR P                               | art 261 or                 |  |                           | Month               |              | Year<br>Year |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name   | ribed materials are n<br>packaged and are in<br>nt of Receipt of Mate   | ot hazardous wastes as de<br>proper condition for trans<br>Signature "On be<br>rials   | fined by CFR P                               | art 261 or                 |  |                           | Month               | Day          | (년           |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement  | ribed materials are n<br>packaged and are in<br>nt of Receipt of Mate   | ot hazardous wastes as de<br>proper condition for trans<br>Signature "On be<br>rials   | fined by CFR P                               | art 261 or                 |  |                           | Month               | Day          | (년           |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement  | ribed materials are n<br>packaged and are in<br>nt of Receipt of Mate   | ot hazardous wastes as de proper condition for trans Signature "On be rials Signature rials  | fined by CFR P                               | art 261 or                 |  |                           | Month               | Day          | Year         |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/E   | cribed materials are in packaged and are in   | ot hazardous wastes as de proper condition for trans.  Signature "On be rials  Signature  Signature  Signature   | fined by CFR P<br>portation acco<br>half of" | art 261 or<br>rding to ap  | oplicable regu                                   | lations,                  | Month Month Month   | Day Day Day  | Year         |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/E I certify, on behalf of the above lister  | ribed materials are in packaged and are in in the fraction of | ot hazardous wastes as de proper condition for trans.  Signature "On be rials  Signature  Signature  that to the best of my known in the proper condition for trans. | fined by CFR P<br>portation acco<br>half of" | art 261 or<br>rding to ap  | oplicable regu                                   | lations,                  | Month Month Month   | Day Day Day  | Year         |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/E   | ribed materials are in packaged and are in in the fraction of | ot hazardous wastes as de proper condition for trans.  Signature "On be rials  Signature  Signature  that to the best of my knowdates listed above.                  | fined by CFR P<br>portation acco<br>half of" | art 261 or<br>riding to ap | oplicable regu                                   | lations,                  | Month Month Month   | Day Day Day  | Year         |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/Elicertify, on behalf of the above lister applicable laws, regulations, permited. | ribed materials are in packaged and are in in the fraction of | ot hazardous wastes as de proper condition for trans.  Signature "On be rials  Signature  Signature  that to the best of my knowdates listed above.                  | fined by CFR P<br>portation acco<br>half of" | art 261 or<br>riding to ap | oplicable regu                                   | lations,                  | Month Month Month   | Day Day Day  | Year         |  |  |



Original Ticket# 1249302

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/27/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677891

Destination

20

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WHSTE Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Time

04/27/2018 12:32:11 Out 04/27/2018 12:32:11

Scale

Inbound 1

Operator LBEJARAN

**LBEJARAN** 

Gross Tare

64100 lb 24980 lb

Net Tons

39120 1b 19.56

Comments

Product

LD%

Qty

MOU

Rate

Vehicle# 601

Gen EPA ID NR

Container

Billing #

Driver

Check#

Tax

0001037

Amount

Origin

COAL ASH & COAL CO 100

19.56 Tons

MMJ Sul

PORTW

Total Tax Total Ticket

403WM



### NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's U    | S EPA ID No.   | Manifest Doc N    | lo.             | 2. Page 1   | of                                    | 11                  | 134           | 5           |  |  |
|---|---------------------|--|-------------------|-----------------|---|---------------------------------------|---------------------|---------------|-------------|--|--|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, E   | BIN#10221           | Generator's Site Addres<br>GEORGIA POWER P<br>155 CROSSGATE RD | LANT KRAFT        | iling):         |   | st Number MNA B. State (              | 6677<br>Generator's |               |             |  |  |
| ATLANTA, GA 30308-3374  4. Generator's Phone 404-50   | 06-1365             | PORT WENTWORTH   | I, GA 31407       |                 |   |                                       |                     |               |             |  |  |
| 5. Transporter 1 Company Name   | -1                  | 6. US E  | PA ID Number      |                 |   | ransporter's II                       |                     |               |             |  |  |
| 7. Transporter 2 Company Name   |                     | 8. US E  | PA ID Number      |                 | D. Transporter's Phone  E. State Transporter's ID  F. Transporter's Phone |                                       |                     |               |             |  |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL  | Address             | 10. US   | EPA ID Number     |                 | G. State F  |                                       |                     |               | 1,-3        |  |  |
| Savannah, GA 31419  |                     |  |                   |                 | H. State F  | acility Phone                         | e 912-927-6113      |               |             |  |  |
| G 11. Description of Waste Materials  |                     |  | 12. Con           | tainers<br>Type | 13. Total<br>Quantity   | 14. Unit<br>Wt./Vol.                  | I. M                | lisc. Comment | ts          |  |  |
| a. COAL ASH& COAL CONTAM  | INATED WASTI        |  | Ga                | D               | 17  |                                       |                     |               |             |  |  |
| E R WM Profile A b.   | # 375200GAk         | (RA  |                   |                 |   |                                       |                     |               |             |  |  |
| T<br>O<br>R   | WM Profile #        |  |                   |                 |   |                                       |                     | and side      | 2005 at 200 |  |  |
| c.  |                     |  |                   |                 |   |                                       |                     |               |             |  |  |
| d.  | /M Profile #        |  |                   |                 |   |                                       |                     |               |             |  |  |
| W   | /M Profile #        |  |                   |                 |   |                                       |                     | _             | -           |  |  |
| J. Additional Descriptions for Mater  | ials Listed Above   |  | Cell              | A Location      | 1 2 11  | · · · · · · · · · · · · · · · · · · · | Level               |               |             |  |  |
| 15. Special Handling Instructions and   | Additional Inform   | ation +  | Grid              | (C)             | Ye  | 19                                    | 3//                 | ي ر ي         |             |  |  |
| Purchase Order # GPC1076029   | 3                   | EMERGENC   | Y CONTACT / PHO   | ONE NO.:        | -   |                                       | -                   | _             |             |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descril  |                     |  |                   |                 |   |                                       | eve been fu         | lly and       |             |  |  |
| accurately described, classified and particle Name  | ackaged and are in  | proper condition for tra<br>Signature "On                      |                   | ding to ap      | plicable regu   | lations.                              | Month               | Day           | Year        |  |  |
| Tansporter 1 Acknowledgement  | of Receipt of Mate  | erials   |                   |                 |   |                                       | - Ei                | الحريسا       | 18          |  |  |
| Printed Name  |                     | Signature  | 4                 |                 |   |                                       | Month               | Day 37        | Year        |  |  |
| Printed Name  | of Receipt of Mate  | Signature  |                   |                 |   |                                       | Month               | Day           | Year        |  |  |
| 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits a | treatment facility, |  | nowledge, the ab  | ove-descri      | bed waste w   | ras managed i                         | n compliand         | ce with all   |             |  |  |
| 20. Facility Owner or Operator: Centi   |                     | of non-hazardous materi  | als covered by th | is manifes      | t.  |                                       | 1                   |               |             |  |  |
| Printed Name  White- TREATMENT, STORAGE, DISPO  | D SAL EACHITY COR   | Signature Y Blue- GENERA                                       | TOR #2 CORV       | 13              | V-  | llow- GENERA                          | Month               | Day           | Year        |  |  |

Pink-FACILITY USE ONLY



Original Ticket# 1249330

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date = 04/27/2018 Payment Type Credit Account

Manual Ticket#

Hauling Ticket# Route

State Waste Code

Time

Manifest 6677892

Destination

PO

Profile

Generator

Out 04/27/2018 13:05:39

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

In 04/27/2018 13:05:39

Scale Inbound 1

Operator

LBEJARAN LBEJARAN

Gross Tare Net

Tons

24080 lb 30680 1b 15, 34

54760 lb

Comments

Product

LD% Qty UDM Rate Tax

Vehicle# 5307

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Amount

Origin

COAL ASH & COAL CO 100 15.34 Tons

PORTW





## NON-HAZARDOUS MANIFEST

|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's                       | US EPA I   |                   | Manifest Do                | c No.        |          | 2. Page 1  | of                               | 12              | 1:/1       | <    |  |   |
|------------------|---|--------------------------------------|------------|-------------------|----------------------------|--------------|----------|--|----------------------------------|-----------------|------------|------|--|---|
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,   | RIN#10221                            | GEOF       | ator's Site Addre | PLANT KRAF                 |              | g):      |  | st Number                        | 6677            |            | 1    |  |   |
|                  | ATLANTA, GA 30308-3374  | 06-1365                              |            | WENTWORT          |                            |              |          |  | B. State G                       | ienerator's     | ID         |      |  |   |
|                  | 5. Transporter 1 Company Name   | 1 - 1 L                              |            | 6. US             | EPA ID Numbei              |              |          |  | ransporter's IC<br>orter's Phone |                 |            |      |  |   |
|                  | 7. Transporter 2 Company Name   | 1                                    |            |                   | EPA ID Numbei              |              |          | E. State Transporter's ID F. Transporter's Phone |                                  |                 |            |      |  |   |
|                  | 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD  | Address                              |            | 10. U             | S EPA ID Numbe             | er           |          | G. State F                                       | acility ID                       | ne 912-927-6113 |            |      |  |   |
|                  | Savannah, GA 31419  |                                      |            |                   |                            |              |          |  |                                  |                 |            |      |  |   |
| G                |   | IINATED WAS                          | TF         |                   | 12. Containers<br>No, Type |              |          | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.             | I. Misc. Comme  |            | s    |  |   |
| N<br>E           |   | COAL ASH& COAL CONTAMINATED WASTE    |            |                   |                            | 7 1          | 5-1      | 1  |                                  |                 |            |      |  |   |
| RAT              | b.  | WM Profile # 375200GAK  WM Profile # |            |                   |                            |              |          |  |                                  |                 |            |      |  |   |
| O<br>R           | V.  |                                      |            |                   |                            | WM Profile # |          |  |                                  |                 |            |      |  | - |
|                  |   | /M Profile #                         |            |                   |                            |              |          |  |                                  |                 |            | 7 79 |  |   |
|                  | d.  | VM Profile #                         |            |                   |                            |              |          |  |                                  |                 |            |      |  |   |
|                  | J. Additional Descriptions for Mater  |                                      | e          |                   | K. Disp<br>Cell<br>Grid    | osal l       | ocation  | ()/ <  | 29.1                             | Level           | - 2        | )/   |  |   |
|                  | 15. Special Handling Instructions and   | Additional Infor                     | rmation    |                   | 1                          |              |          |  |                                  |                 | Av est     |      |  |   |
|                  | Purchase Order # GPC1076029   | 93                                   |            | EMERGEN           | CY CONTACT / F             | HON          | E NO.:   |  |                                  |                 |            |      |  |   |
|                  | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descri accurately described, classified and p                  |                                      |            |                   |                            |              |          |  |                                  | ve been ful     | ly and     |      |  |   |
|                  | Printed Name  |                                      | р.         | Signature "On     |                            |              |          | price regu                                       |                                  | Month           | Day        | Year |  |   |
| _                | 17. Transporter 1 Acknowledgement   | of Dancint of Ma                     | ntoriale   | 15-               | -                          | _            |          |  |                                  | 11              | 74         | 18   |  |   |
| RA               | Printed Name  | or Receipt or IVI                    | ateriais   | Signature         | -                          | -            | -        |  | _                                | Month           | Day        | Year |  |   |
| N                | V Tall - Se S   |                                      |            | Vignotare         | -3-1                       |              | 1        | 1  |                                  | A               | 27         | 183  |  |   |
| 0                | 18. Transporter 2 Acknowledgement   | of Receipt of Ma                     | aterials   |                   |                            |              |          |  |                                  |                 |            |      |  |   |
| R<br>T<br>E<br>R | Printed Name  |                                      |            | Signature         |                            |              |          |  |                                  | Month           | Day        | Year |  |   |
| FAC              | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | treatment facili                     | the dates  | listed above.     |                            |              |          |  | as managed in                    | ı complianc     | e with all |      |  |   |
| 1                | 20. Facility Owner or Operator: Cert  | ification of receip                  | pt of non- | 1                 | rials covered by           | this I       | manifest |  | - 2                              | -               |            |      |  |   |
| Y                | Printed Name  | 4                                    | -5-        | Signature         | 5)                         |              |          |  | - (                              | Month           | 2ºy        | Year |  |   |
|                  | White-TREATMENT, STORAGE, DISPO   | OSAL FACILITY CO                     | OPY        | Blue- GENER       | ATOR#2 COPY                |              |          | Ye   | llow- GENERA'                    | TOR #1 COP      | Y          |      |  |   |

White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold-TRANSPORTER #1 COPY



Original Ticket# 1249341

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEE HER

Ticket Date 04/27/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677893

Destination

PO.

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 04/27/2018 13:25:39 Out 04/27/2018 13:25:39

Scale

Inbound 1 RB

Operator

RB

Gross Tare

54600 16 23180 lb

Net Tons 31420 lb 15.71

Comments

Product

LD% Qty UOM

Rate

Vehicle# 117

Container

Billing #

Gen EPA ID NR

Driver

Check#

Tax

0001037

Amount

Origin

COAL ASH & COAL CO 100

15.71 Tons

PORTW

Willel



### WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's                           | US EPA ID No.  | Ma                        | nifest Doc N | 0.              | 2. Page 1 d           | of   | 17                 | 4:          | )          |  |  |  |
|---|--|--|---------------------------|--------------|-----------------|-----------------------|--|--------------------|-------------|------------|--|--|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE ATLANTA, GA 30308-3374 4. Generator's Phone 404- | , BIN#10221                              | Generator's Site<br>GEORGIA POV<br>155 CROSSGA<br>PORT WENTV | WER PLANTATE RD.          | T KRAFT      | iling):         |                       | st Number  MNA  B. State G                       | 6677<br>enerator's |             |            |  |  |  |
| 5. Transporter 1 Company Name   | 300-1303                                 | 6.   | US EPA ID                 |              |                 |                       | ransporter's ID<br>orter's Phone                 |                    |             |            |  |  |  |
| 7. Transporter 2 Company Name   |  | 8.   |                           |              |                 |                       | E. State Transporter's ID F. Transporter's Phone |                    |             |            |  |  |  |
| 9. Designated Facility Name and Si<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                  | te Address                               | 10.  | US EPA II                 | D Number     | 1.9             | G. State Fa           | acility ID<br>acility Phone                      | one 912-927-6113   |             |            |  |  |  |
| 11. Description of Waste Materials  |  |  | -                         | 12. Con      | tainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.                             | I. Mi              | sc. Comment |            |  |  |  |
| a. COAL ASH& COAL CONTA   | MINATED WAS                              |  |                           | L117         | 104             | 157                   |  |                    |             |            |  |  |  |
| c.  | WM Profile #                             |  |                           |              |                 |                       |  |                    |             |            |  |  |  |
| d.  J. Additional Descriptions for Ma   | WM Profile #<br>terials Listed Abov      | re   | K. Disposal Location Cell |              |                 |                       | 7-7  | Level              |             | · ·        |  |  |  |
| 15, Special Handling Instructions a   | nd Additional Info                       | rmation  |                           | Grid         | E               | 7116                  | 36   |                    |             |            |  |  |  |
| Purchase Order # GPC10760   | 293                                      | EMI  | ERGENCY CON               | NTACT / PHO  | ONE NO.:        | -                     |  | -                  |             | -3-1       |  |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name      | cribed materials a                       | in proper condition  |                           | tation accor |                 |                       |  | ve been ful        | ly and      | Vear       |  |  |  |
| R to Macon of   | and of December of Ad                    | le la                    | 2                         | _            |                 |                       |  | 4                  | 77          | 18         |  |  |  |
| 17. Transporter 1 Acknowledgeme   | ent of Receipt of Ivi                    | Signatu  | ire                       | l'ic         | 72              |                       | 28   | Month              | Day 77      | Year<br>18 |  |  |  |
| 18. Transporter 2 Acknowledgeme   | nt of Receipt of M                       | Signatu  | ure                       |              | -1              |                       |  | Month              | Day         | Year       |  |  |  |
| 19. Certificate of Final Treatment/ I certify, on behalf of the above list applicable laws, regulations, permi          | ed treatment facil<br>ts and licenses on | the dates listed abo   | ve.                       |              |                 |                       | as managed in                                    | complianc          | e with all  |            |  |  |  |
| 20. Facility Owner or Operator: Co  | ertification of recei                    | pt of non-hazardou<br>Signati                                |                           | overed by th | is manifes      | t.                    |  | [Month/            | Day         | Year       |  |  |  |
| Finited Name  | 103                                      | Signati  | 4                         |              |                 |                       |  |                    | 4/          |            |  |  |  |
| White-TREATMENT, STORAGE, DIS   | 1003                                     |  | GENERATOR (               |              |                 | Ye                    | llow- GENERA                                     | TOR #1 COF         | Υ           |            |  |  |  |



Original Ticket# 1245

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/27/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677894

Destination

P0

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 04/27/2018 13:42:46 Inbound 1 Out 04/27/2018 13:42:46

Scale

Operator LBEJARAN

Vehicle# 5306

Gen EPA ID NR

0001037

LD% Qty UOM Rate Tax Amount Origin

Container

Billing #

Driver

Check#

LBEJARAN

Gross Tare

57740 1b 27500 15 30240 lb

15, 12

Net Tons

Comments

Product

COAL ASH & COAL CO 100 15.12 Tons

FORTW





### NON-HAZARDOUS MANIFEST

|             | NON-HAZARDOUS MANIFEST  | 1. Generator's                         | US EPA ID No.  | N                      | lanifest Doc N | lo.         | 2. Page 1      | of                               | 1:6                 | )6         |              |  |
|-------------|---|--|--|------------------------|----------------|-------------|----------------|----------------------------------|---------------------|------------|--------------|--|
|             | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5   | BIN#10221<br>06-1365                   | Generator's Site<br>GEORGIA POV<br>155 CROSSGA<br>PORT WENTV | WER PLAI<br>ATE RD.    | NT KRAFT       | iling):     |                | st Number MNA  B. State (        | 6677<br>Generator's |            |              |  |
|             | 5. Transporter 1 Company Name   | (a / . ) =                             | 6.   | US EPA                 | ID Number      | B           |                | ransporter's IC                  | )                   |            | MILION COLUM |  |
|             | 7. Transporter 2 Company Name   | = <                                    | 8.   | US EPA                 | ID Number      |             |                | ransporter's IE<br>orter's Phone |                     |            |              |  |
|             | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                    | Address                                | 10.  | US EPA                 | ID Number      |             | G. State F     | acility ID<br>acility Phone      | 912-9               | 3          |              |  |
| G           | 11. Description of Waste Materials  |  |  |                        |                | ntainers    | 13. Total      | 14. Unit<br>Wt./Vol.             |                     |            | nts          |  |
| ENER        | a. COAL ASH& COAL CONTAM  | IINATED WAS                            |  |                        | 5306           | Туре        | Quantity       | Wt./VOI                          |                     |            | -26-         |  |
| ATO         | b.  |  |  | y '                    |                |             |                |                                  |                     |            | 5            |  |
| R           | с.  | VM Profile #                           |  |                        |                |             |                |                                  |                     |            |              |  |
|             | J. Additional Descriptions for Mater  | VM Profile #<br>rials Listed Above     | •  |                        | K. Dispose     | al Location | h 57           | 74                               | Level               | =1         |              |  |
|             | 15. Special Handling Instructions and   | l Additional Infor                     | mation   |                        | Grid           |             | 9716           | 7 6                              |                     |            |              |  |
|             | Purchase Order # GPC1076029   | 13                                     | EME  | RGENCY CO              | ONTACT / PHO   | NE NO :     |                | -                                |                     |            |              |  |
|             | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descri accurately described, classified and p                  | bed materials are                      | e not hazardous wa<br>in proper condition                    | stes as defi           | ned by CFR Pa  | ert 261 or  | any applicable | e state law, ha<br>lations.      | ive been ful        | ly and     | Year         |  |
| Ц           | 5 4.10 00 00 00 00 00 00 00 00 00 00 00 00 0  |  |  |                        |                |             | -7             |                                  | 4                   | 7-7        | 14           |  |
| T<br>R      | 17. Transporter 1 Acknowledgement Printed Name  | of Receipt of Ma                       |  | ***                    |                | - }         |                |                                  |                     | 200        | 1            |  |
| A<br>N<br>S |   | STON IN                                | Signatu  | le                     | 10.,1          |             | 1              |                                  | Month               | Day        | Year /9      |  |
| PORTER      | 18. Transporter 2 Acknowledgement Printed Name  | of Receipt of Ma                       | terials Signatu  | re                     |                | 1           |                |                                  | Month               | Day        | Year         |  |
| FAC         | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | treatment facilit<br>and licenses on t | he dates listed abov   | /e.                    |                |             |                | as managed ir                    | complianc           | e with all |              |  |
| L           | 20. Facility Owner or Operator: Certi   |  |  | covered by th          | is manifes     | it.         |                | 1                                | 7                   | 1,         |              |  |
| Ÿ           | Printed Name  | >                                      | Signatu  | re                     | X              | 2           |                |                                  | Month               | / Day      | Year         |  |
|             | White-TREATMENT, STORAGE, DISPO<br>Pink-FACILITY USE OF   | 1                                      |  | SENERATOR<br>RANSPORTE | 1              |             | Ye             | low- GENERA                      | TOR #1 COP          | Y          | 111          |  |



Original Ticket# 1249355

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 04/27/2018 Vehicle# LØ7

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6677895

Destination

Profile

P0

Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 04/27/2018 13:59:08

Scale Inbound 1

RB

9 - - -

Operator

Container

Billing # 0001037

Rate

Tax

Gen EPA ID NR

Driver

Check#

RB

UOM

Gross Tare

Amount

53680 15 25240 15 28440 1b

Net Tons 14, 22

Comments

Product

Out 04/27/2018 13:59:08

COAL ASH & COAL CO 100 14.22 Tons

LD% Qty

PORTW

Origin



#### WATER MANAGEMENT NON-HAZARDOUS MANIFEST

| AAVELE INTERFERENCE IN  |                            | 10.11                                       | 4 25 4 5 1                         |            |   |                 |                 |                    |        |  |
|---|----------------------------|---|------------------------------------|------------|---|-----------------|-----------------|--------------------|--------|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA      |   | Manifest Doc No                    | ).         | 2. Page 1                               | of              | 111             | 19                 |        |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                                  |                            | erator's Site Address (I<br>DRGIA POWER PLA | The second second                  | ing):      |   | st Number       | 6677            | 895                |        |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                               |                            | CROSSGATE RD.                               | GA 31407                           |            |   |                 | Generator's     | ID                 |        |  |
| 4. Generator's Phone 404-5  | 06-1365                    |   |                                    |            |   |                 |                 |                    |        |  |
| 5. Transporter 1 Company Name   |                            | 6. US EPA                                   | ID Number                          |            |   |                 |                 | - II R             | A. 100 |  |
| * 1 1 Y 1   |                            |   |                                    |            |   | ransporter's II | )               |                    |        |  |
| 7. Transporter 2 Company Name   | The Reservoir              | 8. US EPA                                   | ID Number                          |            | D. Transp                               | orter's Phone   |                 | THE REAL PROPERTY. |        |  |
| 7. Hansporter 2 company reame   | N. Carlotte                | 0. 05 27 4                                  | TO TTUTTOCT                        |            | E. State Tr                             | ansporter's IE  | )               |                    |        |  |
|   | 1925                       |   |                                    |            | F. Transporter's Phone                  |                 |                 |                    |        |  |
| 9. Designated Facility Name and Site  | Address                    | 10. US EP                                   | A ID Number                        |            |   |                 |                 |                    |        |  |
| SUPERIOR LANDFILL   |                            |   |                                    |            | G. State F                              | acility ID      |                 |                    |        |  |
| 3001 LITTLE NECK ROAD   |                            |   |                                    |            | H. State F                              | acility Phone   | ne 912-927-6113 |                    |        |  |
| Savannah, GA 31419  |                            |   |                                    |            |   |                 |                 |                    |        |  |
| 11. Description of Waste Materials  |                            |   | 12 Conta                           |            | 13. Total                               | 14. Unit        | I. Mi           | sc. Comment        | s      |  |
| a. COAL ASH& COAL CONTAM  | INATED WASTE               |   | No.                                | Туре       | Quantity                                | Wt./Vol.        |                 |                    |        |  |
| a. COAL ASHIA COAL CONTAIN  | INATED WASTE               |   | L 107                              | 135        | -2                                      |                 |                 |                    |        |  |
| WM Profile  | # 375200GAKRA              |   |                                    | Tarent No. | THE                                     |                 |                 |                    | Fur    |  |
| b.  | # 3/32000AKKKA             |   |                                    |            |   |                 |                 |                    | E 1112 |  |
|   |                            |   |                                    |            | 8                                       |                 |                 |                    |        |  |
| Na.   | /M Profile #               |   |                                    |            |   | +               |                 |                    |        |  |
| C.  | IN FIGHE W                 |   |                                    |            |   |                 |                 |                    |        |  |
|   |                            |   | - KG                               |            |   |                 |                 |                    |        |  |
| v   | /M Profile #               |   |                                    |            | 111111111111111111111111111111111111111 |                 |                 |                    |        |  |
| d.  |                            |   |                                    |            |   |                 |                 |                    |        |  |
|   |                            |   |                                    |            | !!!                                     |                 |                 |                    |        |  |
| v   | /M Profile #               |   |                                    |            | 10000 100                               | 100             |                 |                    |        |  |
| J. Additional Descriptions for Mate   | rials Listed Above         |   | K. Disposal                        | Location   |   |                 |                 | - 22               |        |  |
|   |                            |   | 0.11                               | -          |   | 100             | I awat I        | (2)                | 2      |  |
|   |                            |   | Cell                               |            | 11 )/0                                  | 49V 5           | Level           | 0                  | 100    |  |
| 15. Special Handling Instructions and   |                            |   | 1 0110                             | Ų          | 371                                     | is t            |                 |                    |        |  |
| Burchase Order # CDC107C020   | 12                         | EMERCENCY /                                 | CONTACT / DUOI                     | NE NO      |   |                 | _               |                    |        |  |
| Purchase Order # GPC1076029   | 75                         | EIVIERGENCY (                               | ONTACT / PHOI                      | NE NO.     |   |                 |                 |                    |        |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descri              |                            |   |                                    |            |   |                 | ave been ful    | ly and             |        |  |
| accurately described, classified and p  | ackaged and are in prop    | Signature "On be                            |                                    | ing to app | olicable regu                           | iations.        | Month           | Day                | Year   |  |
| T T T T T T T T T T T T T T T T T T T   |                            | Signature Office                            | non or                             |            |   |                 | 83              | 77                 | 151    |  |
| 17. Transporter 1 Acknowledgement   | of Receipt of Materials    |   | Made March - Chambridge of State 1 | ,          |   |                 |                 |                    |        |  |
| Printed Name  | Av.                        | , Signature A                               | 1                                  | JA 1       |   |                 | Month           | Day                | Year   |  |
| Y CONTA   | 2):                        | X VM  |                                    | -1-        |   |                 |                 | 90                 | 11/    |  |
| 18. Transporter 2 Acknowledgement   | of Receipt of Materials    |   | H H                                |            |   |                 |                 |                    | 14.17  |  |
| Printed Name  |                            | Signature                                   |                                    |            |   |                 | Month           | Day                | Year   |  |
| 19. Certificate of Final Treatment/Di<br>I certify, on behalf of the above listed |                            | to the best of my kno                       | wledge, the abo                    | ve-describ | ed waste w                              | as managed in   | n complianc     | e with all         |        |  |
| applicable laws, regulations, permits   |                            |   |                                    |            |   |                 | A               |                    |        |  |
| 20. Facility Owner or Operator: Cert  | ification of receipt of no | n-hazardous materials                       | covered by this                    | manifest   |   |                 |                 |                    |        |  |
| Printed Name  | 45                         | Signature                                   | Yn                                 |            |   |                 | Month           | Day /              | Year   |  |
| White- TREATMENT, STORAGE, DISPO  | DEAL EXCILITY CORY         | Blue- GENERATO                              | D HO CORV                          |            | Vo                                      | llow- GENERA    | TOP #1 COS      | . /                |        |  |

Pink- FACILITY USE ONLY



Original Ticket# 1249358

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL

Ticket Date 04/27/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6677896

Time

Destination

PO" Profile Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

04/27/2018 14:05:16 Inbound 1 Out 04/27/2018 14:05:16

Scale

LD%

Qty

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

RB RB

Operator

Vehicle# 1

Billing # 0001037

Gen EPA ID NR

Rate

Tax

Container

Driver

Check#

HOM

Gross Tare

Amount

29480 15 Net 35400 lb Tons

17.70

Origin

PORTW

54880 1b

Comments

Product

COAL ASH & COAL CO 100

17.70 Tons

Sull !





### WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | 1. Generator's US EP/      |                                      | Manifest Doc N      | 0.              | 2. Page 1             | of                   | 1/%            | 25          |        |
|--|----------------------------|--------------------------------------|---------------------|-----------------|-----------------------|----------------------|----------------|-------------|--------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,  | GEO                        | erator's Site Addre<br>ORGIA POWER I | PLANT KRAFT         | iling):         |                       | st Number            | 6677           |             |        |
| ATLANTA, GA 30308-3374   |                            | RT WENTWORT                          | H, GA 31407         |                 |                       | b. State (           | Jenerator 3    | 10          |        |
| 5. Transporter 1 Company Name  |                            | 6. US                                | EPA ID Number       |                 |                       | ransporter's II      |                |             |        |
| 7. Transporter 2 Company Name  |                            | 8. US                                | EPA ID Number       |                 | E. State T            | ransporter's I       |                |             | ETHINE |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL   | e Address                  | 10. US                               | EPA ID Number       |                 | G. State F            | acility ID           |                |             |        |
| 3001 LITTLE NECK ROAD  |                            |                                      |                     |                 | H. State F            | acility Phone        | e 912-927-6113 |             |        |
| Savannah, GA 31419   |                            |                                      |                     | 86              | 0 11                  | 100                  |                |             |        |
| 11. Description of Waste Materials   |                            |                                      | 12. Con<br>No.      | tainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol. |                |             |        |
| a. COAL ASH& COAL CONTAM   | IINATED WASTE              |                                      | LAFI                | 157             | 17%                   |                      |                |             |        |
| WM Profile   | # 375200GAKRA              | L                                    | RIII                |                 | THE MEST              | #====                |                | X IIIII     | W-66   |
| b.   |                            |                                      |                     |                 |                       |                      |                |             |        |
| c.   | VM Profile #               |                                      |                     |                 |                       |                      |                |             |        |
| v  | VM Profile #               |                                      |                     |                 | 1 385                 |                      | June 11        |             | 128/11 |
| d.   |                            |                                      |                     |                 |                       |                      |                |             |        |
| J. Additional Descriptions for Mate  | VM Profile #               |                                      | K. Dispos           | al Location     | )                     | 11=2300 0.000        |                |             |        |
|  |                            |                                      | Cell<br>Grid        | I               | 920                   | 76                   | Level          | (0)         | 1      |
| 15. Special Handling Instructions and  | d Additional Information   | 1                                    | Gild                | 4               | V) (                  | 6)2                  |                |             |        |
| Purchase Order # GPC107602!  | 93                         | EMERGEN                              | CY CONTACT / PHO    | ONE NO.:        |                       |                      |                |             |        |
| 16. GENERATOR'S CERTIFICATE:   |                            |                                      | _                   |                 |                       |                      |                |             |        |
| I hereby certify that the above-descr<br>accurately described, classified and p  |                            | per condition for tr                 | ansportation accor  |                 |                       |                      | _              | ,           |        |
| Printed Name   |                            | Signature "Or                        | behalf of"          |                 |                       |                      | Month          | Day         | Year   |
| 17. Transporter 1 Acknowledgemen   | t of Receipt of Materials  |                                      | . 3                 | £.              |                       |                      | ====           |             |        |
| Printed Name   | larre .                    | Signature                            | fre C               |                 |                       |                      | Month          | Day 77      | Year   |
| 18. Transporter 2 Acknowledgemen   | t of Receipt of Materials  |                                      |                     |                 |                       |                      |                |             | 6      |
| Printed Name   |                            | Signature                            |                     |                 |                       |                      | Month          | Day         | Year   |
| 19. Certificate of Final Treatment/Di<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | d treatment facility, that |                                      | knowledge, the ab   | ove-descri      | ibed waste w          | ras managed i        | n complian     | ce with all |        |
| 20. Facility Owner or Operator: Cert   |                            |                                      | rials covered by th | ls manifes      | t.                    |                      |                |             |        |
| Printed Name   | -                          | Signature                            | The second          | 107             |                       | 1023                 | Month          | Day-        | Year   |
|  | <i>(</i> )                 | Signature                            |                     | K               |                       |                      | 1              | / /         | 16.    |

Pink- FACILITY USE ONLY



Original Ticket# 1249366

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier BASHLOR TRUCKING B1 Vehicle# B1

Ticket Date 04/27/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677897

Destination

PO .

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

04/27/2018 14:17:43 Out @4/27/2018 14:17:43

Scale

Inbound 1 RB

Operator

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

RB

Gross Tare

51700 lb 21240 15

Net

30460 lb

Tons

Tax

15.23

Comments

Product LD% Qty UOM Rate

1 COAL ASH & COAL CO 100

15.23 Tons

Amount

Origin

PORTW

1) in Bart



### WW. NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  | -                        |                                  |                      |                  |   |                                  |              |             |       |  |  |
|---|--------------------------|----------------------------------|----------------------|------------------|---|----------------------------------|--------------|-------------|-------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US        | EPA ID No.  / A                  | 2. Page 1            | of               | 1:  | ファ                               |              |             |       |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | (4)                      | Generator's Site Addre           | •                    | iling):          |   | st Number                        | 6677         | 897         |       |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5                                       |                          | 155 CROSSGATE R<br>PORT WENTWORT |                      |                  |   | B. State G                       | enerator's   | ID          |       |  |  |
| 5. Transporter 1 Company Name   | 000 1303                 | 6. US                            | EPA ID Number        |                  | 1   |                                  |              |             |       |  |  |
| (1 - 1 - 1 - 1 - 1  | 1, 1.                    | -                                |                      |                  |   | ransporter's ID<br>orter's Phone | -            | 1 1         |       |  |  |
| 7. Transporter 2 Company Name   | 1                        | 8. US                            | EPA ID Number        |                  | E. State Transporter's ID  F. Transporter's Phone |                                  |              |             |       |  |  |
| 9. Designated Facility Name and Sit SUPERIOR LANDFILL   | e Address                | 10. U                            | S EPA ID Number      |                  | G. State F  |                                  |              |             |       |  |  |
| 3001 LITTLE NECK ROAD   |                          |                                  |                      |                  | 1   | acility Phone                    | 917-9        | 27-6113     |       |  |  |
| Savannah, GA 31419  |                          |                                  |                      |                  | n. State F  | acincy Priorie                   | 312 327 0113 |             |       |  |  |
| 11. Description of Waste Materials  |                          |                                  | 12. Cor<br>No.       | ntainers<br>Type | 13. Yotal<br>Quantity                             | 14. Unit<br>Wt./Vol              |              |             |       |  |  |
| a. COAL ASH& COAL CONTAN  | MINATED WASTE            |                                  | 8.1                  | T                | 17  |                                  |              |             |       |  |  |
| WM Profile  | # 375200GAKI             | RA                               |                      |                  |   |                                  |              |             |       |  |  |
| b.  |                          |                                  |                      |                  |   |                                  |              |             |       |  |  |
|   |                          |                                  |                      |                  |   |                                  |              |             |       |  |  |
|   | WM Profile #             |                                  |                      |                  |   |                                  |              |             |       |  |  |
| с.  |                          |                                  |                      |                  |   |                                  |              |             |       |  |  |
|   | WM Profile #             |                                  |                      |                  |   |                                  |              |             |       |  |  |
| d.  |                          |                                  |                      |                  |   |                                  |              |             |       |  |  |
|   |                          |                                  |                      |                  |   | 163                              |              |             |       |  |  |
|   | WM Profile #             |                                  | 10000                |                  |   | - 2 1                            |              |             | - 235 |  |  |
| J. Additional Descriptions for Mate   | erials Listed Above      |                                  | K. Dispos            | al Location      | 00  | 24                               |              | 1 4         |       |  |  |
|   |                          |                                  | Cell                 |                  | V)/   | 01/1                             | Level        | 6           |       |  |  |
|   |                          |                                  | Grid                 | 1                |   |                                  |              |             |       |  |  |
| 15. Special Handling Instructions an  | d Additional Informa     | tion                             |                      |                  |   | -)6                              |              |             |       |  |  |
| Purchase Order # GPC107602  | 93                       | EMERGEN                          | CY CONTACT / PHO     | ONE NO.:         |   |                                  |              |             |       |  |  |
| 16. GENERATOR'S CERTIFICATE:  | - '                      |                                  |                      |                  |   |                                  |              |             |       |  |  |
| I hereby certify that the above-desc<br>accurately described, classified and  |                          |                                  |                      |                  |   |                                  | ve been fu   | lly and     |       |  |  |
| Printed Name  |                          | Signature "Or                    |                      |                  |   |                                  | Month        | Day         | Year  |  |  |
| Ty This was to  |                          | - 15 minus                       |                      |                  |   |                                  | 14           | 27          | 180   |  |  |
| 17. Transporter 1 Acknowledgemen  | nt of Receipt of Mate    | - I who was a                    |                      |                  |   | 20                               | 1            |             |       |  |  |
| Printed Name  | The self of              | Signature                        |                      |                  | 1   | 11 6                             | Month        | Day         | Year  |  |  |
| 18. Transporter 2 Acknowledgemen  | of Receipt of Massa      | rials                            | 0.00                 |                  |   |                                  | 1 1          | -7          | 0     |  |  |
| Printed Name  | it of necespt of water   | Signature                        |                      |                  | -   |                                  | Month        | Day         | Year  |  |  |
| Trinted Haine   |                          |                                  |                      |                  |   |                                  |              |             |       |  |  |
| 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit | d treatment facility,    |                                  | knowledge, the ab    | ove-descr        | ibed waste w                                      | ras managed in                   | complian     | te with all |       |  |  |
| 20. Facility Owner or Operator: Cer   | tification of receipt of | of non-hazardous mate            | erials covered by th | nis manifes      | st.   | 995                              | - P          |             |       |  |  |
| Printed Name  | 24                       | Signature                        | rre (Month 1 / Day)  |                  |   |                                  |              | Year        |       |  |  |
| White- TREATMENT, STORAGE, DIS  | POSAL BACILITY CORY      | Plus GENER                       | ATOR #2 COPY         |                  | Va  | llow- GENERA                     | TOR #1 CO    | DV          |       |  |  |
| WHITE THE ATTVICTAL STORAGE, DIST   | COME MCILITY COPT        | DIGG. GEMEN                      | CHOK WE DOFT         |                  | 16  | OLIVERA                          | . UII HA CUI |             |       |  |  |

Pink- FACILITY USE ONLY



A - 21/2

Original Ticket# 1249369

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/27/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677898

Destination

PO

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

04/27/2018 14:22:08 Inbound 1 But 04/27/2018 14:22:08

Scale

Operator RB

RB

Gross Tare

52320 1b 24980 lb .

Net Tons 37340 1b 18.67

Comments

Product

LD%

Qty

UOM

Rate

Vehicle# GØ1

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

Tax

Amount

Origin

PORTW

1 A COAL ASH & COAL CO 100

18.67 Tons

Total Tax Total Ticket

MMbi

403WM



#### NON-HAZARDOUS MANIFEST

|                  | NON-HAZARDOUS MANIFEST   |   | Ma                  | anifest Doc N | lo.         | 2. Page 1 d           | of                          | 10/                 | 10           |           |
|------------------|--|---|---------------------|---------------|-------------|-----------------------|-----------------------------|---------------------|--------------|-----------|
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, BIN#10221<br>ATLANTA, GA 30308-3374  | Generator's Sitt<br>GEORGIA PO<br>155 CROSSG<br>PORT WENT | WER PLAN<br>ATE RD. | T KRAFT       | iling):     |                       | st Number MNA  B. State (   | 6677<br>Generator's |              |           |
|                  | 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name   | 6.  |                     | ) Number      |             |                       | ansporter's II              |                     |              |           |
|                  | 7. Transporter 2 Company Name  | 8.  | US EPA II           | Number        |             |                       | ansporter's IC              |                     |              |           |
|                  | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10.   | US EPA              | ID Number     |             | G. State Fa           | acility ID<br>acility Phone | 912-9               | 27-6113      | 3         |
|                  | ,  |   | REMEDIA             | 12.500        |             |                       |                             |                     |              |           |
| G                | 11. Description of Waste Materials   |   |                     | No.           | Type        | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.        | I. N                | lisc. Commen | ts        |
| E N              | a. COAL ASH& COAL CONTAMINATED WASTE   |   |                     | GOV           | 1) 7        | 17                    |                             |                     |              |           |
| R                | WM Profile # 375200GAK   | (RA   |                     | TIE           |             | 3811                  | 881                         |                     |              | 1051011 ) |
| A<br>T<br>O<br>R |  |   |                     |               |             | -                     |                             |                     |              |           |
|                  | WM Profile #   |   |                     |               |             |                       |                             | 491                 |              |           |
|                  | WM Profile #   |   |                     |               |             | 55                    |                             |                     |              | - "       |
|                  | J. Additional Descriptions for Materials Listed Above  |   |                     | K. Disposi    | al Location | Moi                   | 11                          | Level               | 6            | 194       |
|                  | 15. Special Handling Instructions and Additional Inform  | ation   |                     | 1 0           | Ų           | 2714                  | 32                          |                     |              |           |
|                  | Purchase Order # GPC10760293   | EM  | IERGENCY CO         | NTACT / PHO   | ONE NO.:    |                       |                             |                     |              |           |
|                  | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are a accurately described, classified and packaged and are in                 |   |                     |               |             |                       |                             | ave been fu         | lly and      |           |
|                  | Printed Name   |   | ure "On beha        |               |             |                       | 11 -                        | Month               | Day          | Year      |
| -                | 17. Transporter 1 Acknowledgement of Receipt of Mate   | orials  | 0 5                 | -             |             |                       |                             | A                   | 229          | 18        |
| TRAN             | Printed Name   | Signat  | ure Ala             | 19. Am        | n<br>nei/   |                       |                             | Month               | Day          | Year /K   |
| S<br>P           | 18. Transporter 2 Acknowledgement of Receipt of Mate   | erials  |                     |               |             |                       |                             |                     |              | 112       |
| RTER             | Printed Name   | Signat  | ture                |               |             |                       |                             | Month               | Day          | Year      |
| FAC .            | 19. Certificate of Final Treatment/Disposal certify, on behalf of the above listed treatment facility, applicable laws, regulations, permits and licenses on the | e dates listed abo  | ove.                | 1             |             |                       | as managed i                | n complian          | ce with all  |           |
| 1                | 20. Facility Owner or Operator: Certification of receipt   |   |                     | overed by th  | is manifes  |                       |                             |                     |              |           |
| Y                | Printed Name   | Signat  |                     | 1             | 7           | 16                    |                             | Month               | Day          | Year      |
|                  | White-TREATMENT, STORAGE, DISPOSAL FACILITY COP  | Y Blue-   | GENERATOR           | #2 CØPY       |             | Yel                   | llow- GENERA                | TOR #1 CO           | PY           |           |

Pink- FACILITY USE ONLY



Original Ticket# 1249529

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677899

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

In 04/30/2018 07:51:53 Dut 04/30/2018 07:51:53

Scale Inbound 1

LD%

rb

HOM

Operator

Vehicle# 1

Billing # 0001037

Gen EPA ID NR

Rate

Тах

Container

Driver

Check#

rb

Gross Tare Net

65400 lb 29480 lb 35920 16

Tons

Amount

17.96

Comments

Product

17.96 Tons COAL ASH & COAL CO 100

Qty

PORTW

Origin



### WATER NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | 1, Generator's US                               | EPA ID No. M   | inifest Doc I | Yo.                         | 2. Page 1  | of                         | 7:14                               |  |  |
|--|---|--|---------------|-----------------------------|--|----------------------------|------------------------------------|--|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365 |   |  | IT KRAFT      | ailing):                    | A. Manife  | 6677899<br>Generator's ID  |                                    |  |  |
| 5. Transporter 1 Company Name  | 5. Transporter 1 Company Name 6.                |  |               |                             | C. State Transporter's ID D. Transporter's Phone |                            |                                    |  |  |
|  |   | 8. US EPA ID Number  10. US EPA ID Number  |               |                             |  |                            |                                    |  |  |
| 9. Designated Facility Name and Sit SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419   | IU. US EPA                                      |  |               |                             |  | 912-927-6113               |                                    |  |  |
| 11. Description of Waste Materials   |   |  | 12. Cox       | ntainers<br>Type            | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.       | I. Misc. Comments                  |  |  |
| a. COAL ASH& COAL CONTAN   | MINATED WASTE                                   | ž  | 11/-1         | 13.                         | 1-15   |                            |                                    |  |  |
| b.   | WM Profile #                                    |  |               |                             |  |                            |                                    |  |  |
| c.   | WM Profile #                                    |  |               |                             |  |                            |                                    |  |  |
| d.   | WM Profile #                                    |  |               |                             |  |                            | (                                  |  |  |
| J. Additional Descriptions for Mate  |   |  | K. Dispos     | sal Location                | 6/ >   | 6121                       | Tefel 3                            |  |  |
| 15. Special Handling Instructions an   | d Additional Informa                            | tion   | ,             | 4                           | 1 6  | , 50                       | 665.1                              |  |  |
| Purchase Order # GPC107602   | 93  | EMERGENCY CO   | NTACT / PH    | ONE NO.:                    |  |                            |                                    |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name                        | ribed materials are n<br>packaged and are in    | ot hazardous wastes as defi<br>proper condition for transpo<br>Signature "On beh | ertation acco | Part 261 or<br>ording to ap | any applicabl<br>oplicable regu                  | e state law, h<br>lations. | ave been fully and  Month Day Year |  |  |
| 17. Transporter 1 Acknowledgemen   | at of Bossint of Mate                           | S TTL  | -             | -                           |  |                            | 7 5 1                              |  |  |
| Printed Name   | Signature                                       |  |               |                             |  | Month Day Year             |                                    |  |  |
| 18. Transporter 2 Acknowledgement Printed Name   | nt of Receipt of Mate                           | Signature  |               |                             |  |                            | Month Day Year                     |  |  |
| 19. Certificate of Final Treatment/E<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit                    | ed treatment facility,<br>s and licenses on the | dates listed above.  |               |                             |  | as managed                 | in compliance with all             |  |  |
| 20. Facility Owner or Operator: Gen Printed Name White- TREATMENT, STORAGE, DISI   |   | Signature  | 3)            | ins manifes                 |  | ellow- GENER               | Month Bay Year                     |  |  |

**Gold TRANSPORTER #1 COPY** 

Pink- FACILITY USE ONLY



Original Ticket# 1249535

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 04/30/2018 Vehicle# L07

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6677900

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHOT GEORGIA DOUBLE

Time 04/30/2018 08:00:50 Dut 04/30/2018 08:00:50

Scale Inbound 1

LD% Qty

rb nb

MOU

Operator

Container

Billing # 0001037

Gen EPA ID NR

Rate

Driver

Check#

Gross Tare Net

55340 16 25240 15 30100 15

Tons

15.05

Comments

Product

1 COAL ASH & COAL CO 100 15.05 Tons

Tax Amount Origin

PORTW



### WWW. NON-HAZARDOUS MANIFEST

| B. State G ansporter's ID orter's Phone ansporter's ID orter's Phone acidity ID acidity Phone 14. Unit Wt./vol. | 912-92        |                     |           |
|---|---------------|---------------------|-----------|
| ansporter's ID uter's Phone acility ID acility Phone  | 912-92        |                     |           |
| ansporter's ID uter's Phone acility ID acility Phone  | 912-92        |                     |           |
| ansporter's ID uter's Phone acility ID acility Phone  | 912-92        |                     |           |
| ansporter's ID acility ID acility Phone   | 912-92        |                     |           |
| acility ID acility Phone  | 912-92        |                     |           |
| acility Phone   |               |                     |           |
| acility Phone   |               |                     |           |
| 14. Unit  |               |                     |           |
|   | I. Miss       | c. Comment          |           |
|   | I. Miss       | c. Comment          |           |
|   | I. Misi       | c. Comment          |           |
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|   |               |                     |           |
| 14  | 1             | T                   |           |
|   | Level         | 27                  |           |
| my .  |               |                     |           |
| ) (   |               |                     |           |
|   |               |                     | -         |
| e state law, ha   | ave been full | ly and              |           |
|   | Month         | Day                 | Year      |
|   | 4             | -                   | 1         |
|   |               |                     |           |
|   | Month         | Day                 | Year      |
|   | 4.7           | -5                  | 1         |
|   | 4             |                     | 1         |
|   | Month         | Day                 | Year      |
|   |               |                     |           |
| vas managed i   | in compliance | e with all          |           |
|   |               |                     |           |
|   |               |                     |           |
|   | Month?        | Day                 | -         |
|   | gronu         |                     | Year      |
| _   | lations.      | Month  Month  Month | Month Day |

Pink- FACILITY USE ONLY



Original Ticket# 1249540

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677901

Destination

Generator

PO

LD%

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 04/30/2018 08:11:34 Out 04/30/2018 08:11:34

Scale

Inbound 1

Qty

Operator rb

Vehicle# C20

Gen EPA ID NR

Rate

Тах

Billing # 0001037

Container

Driver

Check#

rb

MOU

Gross Tare

52600 lb 26660 15 35940 1ь

Net Tons

Amount

17.97

Comments

Product

1 COAL ASH & COAL CO 100 17.97 Tons

PORTW

Origin

Tuka) Tax Total Ticket



# NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's US I                            | EPA ID No.              | Manifest Doc No.                                    | 2. P               | 2. Page 1 of                                     |                           |             |             |        |  |  |
|---|--|-------------------------|---|--------------------|--|---------------------------|-------------|-------------|--------|--|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374  Generator's Site Address: GEORGIA POWER 155 CROSSGATE R PORT WENTWORT |  |                         | ANT KRAFT   | Manifest Nu<br>WMN | A  | 6677901<br>Generator's ID |             |             |        |  |  |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name  | 06-1365  | 6. US EF                | PA ID Number  |                    | C. State Transporter's ID D. Transporter's Phone |                           |             |             |        |  |  |
| 7. Transporter 2 Company Name   |  |                         | US EPA ID Number  E. State Transpo F. Transporter's |                    |  |                           |             |             |        |  |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419   | e Address                                      | 10. US (                | PA ID Number  |                    | tate Facility                                    |                           | 912-9       | 27-6113     |        |  |  |
| 11. Description of Waste Materials  |  |                         | 12. Containe  |                    |  | 4. Unit<br>Vt./Vol.       | LM          | isc. Commen | s      |  |  |
| a. COAL ASH& COAL CONTAN  |  |                         | No.   | Type Qua           | ntity V  | vt., voi.                 |             |             |        |  |  |
| WM Profile  | # 375200GAKR                                   | IA                      |   |                    |  | -                         |             |             | =      |  |  |
|   | NM Profile #                                   |                         |   |                    |  |                           |             |             |        |  |  |
|   | WM Profile #                                   |                         |   |                    |  |                           |             |             | 11.115 |  |  |
| d.  | NM Profile #                                   | 1                       |   |                    |  |                           |             |             |        |  |  |
| J. Additional Descriptions for Mate   |  |                         | K. Disposal Lo                                      | Cation 3           | 7 .7   | 1)                        | Level       | 45          |        |  |  |
| 15. Special Handling Instructions an  | d Additional Informat                          | tion                    |   |                    | 1000   | 16000                     |             |             |        |  |  |
| Purchase Order # GPC107602  | 93   | EMERGENC                | CONTACT / PHONE                                     | NO.:               |  | _                         |             |             |        |  |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descr   | ribed materials are no                         | ot hazardous wastes as  | defined by CFR Part 2                               | 61 or any ap       | plicable sta                                     | te law, ha                | ave been fu | lly and     |        |  |  |
| accurately described, classified and Printed Name   |  | Signature "On I         |   | g to applicat      | e regulació                                      | 113.                      | Month       | Day         | Year   |  |  |
| 17. Transporter 1 Acknowledgement   | t of Receipt of Mater                          | Signature               |   |                    |  |                           | Month       | Day         | Year   |  |  |
| 18. Transporter 2 Acknowledgemen  |  | Signature               | 1.11  |                    |  |                           | Month       | Day         | Year   |  |  |
| 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits  | d treatment facility, t<br>and licenses on the | dates listed above.     |   |                    | aste was m                                       | nanaged i                 | n complian  | ce with all |        |  |  |
| 20. Facility Owner or Operator: Cer   | tification of receipt o                        |                         | als covered by this m                               | anifest.           |  |                           | Month       | Day         | Year   |  |  |
| Printed Name  White- TREATMENT, STORAGE, DISI   | PS   | Signature  Blue- GENERA | Un  |                    | Valleur  | CENCOA                    | TOR #1 CO   |             | rear   |  |  |

Pink- FACILITY USE ONLY

Original Ticket# 1249542

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 04/30/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6677902

Destination

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 04/30/2018 08:15:01 Inbound 1 In Out 04/30/2018 08:15:01

Scale

Operator rb rb

Gross Tare Net

63260 1b 25980 15 37280 16

Tons

18.64

Comments

Product

1 11%

Willy

HOM.

Ride

Vehicle# C26

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Tesa

(hereind.

thrigin

COAL ASH & COAL CO 100 18.64 Tons

PORTW



## WATER MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA  |   | Manifest Doc N                                   | lo.              | 2. Page 1  | of   |              |            |      |  |
|--|--|---|--|------------------|--|--|--------------|------------|------|--|
| ATLANTA, GA 30308-3374   | Generator's Mailing Address: GEORGIA POWER GEORGIA POWER PLANT KRAFT GEORGIL BLVD NE, BIN#10221 TLANTA, GA 30308-3374 GENERATOR'S Site Address (if different than mailing): GEORGIA POWER PLANT KRAFT 155 CROSSGATE RD. PORT WENTWORTH, GA 31407 |   |  |                  |  | A. Manifest Number WMNA  B. State Generator's ID |              |            |      |  |
| 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name 6. US EPA 1  7. Transporter 2 Company Name 8. US EPA      |  |   |  |                  | C. State Transporter's ID D. Transporter's Phone |  |              |            |      |  |
|  |  |   | E. State Transporter's ID F. Transporter's Phone |                  |  |  |              |            |      |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                   | 10. US EPA   | A ID Number                                   |  | G. State F       | acility ID<br>acility Phone                      | 912-9  | 3            |            |      |  |
| 11. Description of Waste Materials   | -  |   | 12. Co   | ntainers<br>Type | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.                             | I. Mi        | sc. Commen | ts   |  |
| a. COAL ASH& COAL CONTAM   | 1  | DT  | 17   |                  |  |  |              |            |      |  |
| b. W   | # 375200GAKRA /M Profile #   |   |  |                  |  |  |              |            |      |  |
| c.<br>V  | /M Profile #   |   |  | The said         |  |  |              |            | -    |  |
| d.   | /M Profile #   |   |  |                  |  |  |              |            |      |  |
| J. Additional Descriptions for Mater   |  |   | K. Dispos<br>Cell<br>Grid                        | al Location      | 137.   | 74   | Level        | 6          |      |  |
| 15. Special Handling Instructions and  | Additional Information   |   | Jona   | 100              | 7/16   | 21   |              |            |      |  |
| Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descri                           |  | EMERGENCY C                                   |  |                  | any applicabl                                    | e state law, h                                   | ave been ful | ly and     |      |  |
| accurately described, classified and p<br>Printed Name   | ackaged and are in pro   | per condition for transp<br>Signature "On bel | portation acco                                   | rding to ap      | oplicable regu                                   | llations.  | Month        | Day        | Year |  |
| 17. Transporter 1 Acknowledgement Printed Name   | of Receipt of Materials  | Signature                                     | ×  |                  |  |  | Month        | Day        | Year |  |
| 18. Transporter 2 Acknowledgement Printed Name   | of Receipt of Materials  | Signature                                     |  |                  |  |  | Month        | Day        | Year |  |
| 19. Certificate of Final Treatment/Di<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | l treatment facility, that<br>and licenses on the dat  | es listed above.                              |  |                  |  | vas managed i                                    | in complianc | e with all |      |  |
| 20. Facility Owner or Operator: Cert<br>Printed Name   | unication of receipt of no   | Signature Signature                           | Covered by t                                     | ns manie:        | ) t.   |  | Month        | /Day       | Year |  |

White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY



Original Ticket# 1249543

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Vehicle# C25

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677903

Destination

рΠ

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

Dut 04/30/2018 08:16:52

04/30/2018 08:16:52 Inbound 1

Scale

rb

Operator

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

rb

Gross Tare

64460 15 27040 15 37420 15

Net Tons

18.71

Comments

Product

1 11/2

121.0

HUH

Rate

Tax

Chartettark

1 COAL ASH & COAL CO 100

18.71 Tons

PORTW



### MANIFEST NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | 1. Generator's                                    | US EPA ID No.                         | М   | anifest Doc N | lo.              | 2. Page 1  | of                               | -                        | . 3.       | 3     |
|--|---|---------------------------------------|---|---------------|------------------|--|----------------------------------|--------------------------|------------|-------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374 | , BIN#10221                                       | Generator's<br>GEORGIA I<br>155 CROSS | Site Address (IF of POWER PLAN<br>SGATE RD.<br>NTWORTH, G | IT KRAFT      | riling):         |  | st Number MNA  8. State G        | 6677903<br>enerator's ID |            |       |
| 4. Generator's Phone 404-  | 506-1365  |                                       |   |               |                  |  |                                  |                          |            | 5     |
| 5. Transporter 1 Company Name  | 5. Transporter 1 Company Name 6. US EPA ID Number |                                       |   |               |                  |  | ransporter's 1D<br>orter's Phone |                          |            | - 2   |
| 7. Transporter 2 Company Name  | 1   | 8.                                    | LIC EDA I   | D Number      |                  | D. Trumsp  | orter stribite                   |                          |            |       |
|  | ,   | 1                                     |   |               |                  | E. State Transporter's ID F. Transporter's Phone |                                  |                          |            |       |
| 9. Designated Facility Name and Si   | te Address  | 10.                                   | US EPA  | ID Number     |                  |  |                                  |                          |            |       |
| SUPERIOR LANDFILL  |   |                                       |   |               |                  | G. State F                                       | acility ID                       |                          |            |       |
| 3001 LITTLE NECK ROAD  |   |                                       |   |               |                  | H. State F                                       | acility Phone                    | 912-9                    | 27-6113    | }     |
| Savannah, GA 31419   |   |                                       |   |               |                  |  |                                  |                          |            |       |
| G 11. Description of Waste Materials   |   |                                       |   | 12. Cor       | ntainers<br>Type | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.             | L Mi                     | sc. Commen | S     |
| a. COAL ASH& COAL CONTAI   | MINATED WAS                                       | TF                                    |   |               | -                | 1547   |                                  |                          |            |       |
| N  | AIIIANIED AAVO                                    |                                       |   | 11 75         | IN               | 1 Y  |                                  |                          |            |       |
| E  | 2752006   | A IVID A                              |   | -             | 1 1              |  |                                  |                          |            | 1.0   |
| K  | e# 375200G/                                       | AKRA                                  |   |               |                  | B 23   |                                  |                          |            |       |
| A p.   |   |                                       |   |               |                  |  |                                  |                          |            |       |
| <u>T</u>   |   |                                       |   |               |                  |  |                                  |                          |            |       |
| 0  | WM Profile #                                      |                                       |   |               |                  |  |                                  |                          |            |       |
| c.   |   |                                       |   |               |                  |  |                                  |                          |            |       |
|  |   |                                       |   |               |                  |  |                                  |                          |            |       |
|  | WM Profile #                                      |                                       |   |               |                  |  |                                  | 0330                     |            |       |
| d.   |   |                                       |   |               |                  |  |                                  |                          |            |       |
|  |   |                                       |   |               |                  |  |                                  |                          |            |       |
|  |   |                                       |   |               |                  |  |                                  |                          |            |       |
|  | WM Profile #                                      |                                       |   | 4 5           | 44 - 12          |  |                                  |                          |            | 0.800 |
| J. Additional Descriptions for Mat   | erials Listed Abov                                | re                                    |   | K. Dispos     | al Location      | 120  | 71                               |                          | 1          |       |
|  |   |                                       |   | Cell          | - 1/0            | 30   | / 7                              | Level                    | -          |       |
|  |   |                                       |   | Grid          | 1.               |  | 7                                | revei                    |            |       |
|  | 1 4 1 1942 1 1 - 5                                |                                       |   | Grid          | 1.0              | JF ) ( G   | 256                              |                          |            |       |
| 15. Special Handling Instructions at   | na Additional Intol                               | rmation                               |   |               |                  | -1   |                                  |                          |            |       |
| Purchase Order # GPC107603   | 293   |                                       | EMERGENCY CO  | NTACT / PH    | ONE NO.:         |  |                                  |                          |            |       |
|  |   |                                       |   |               |                  |  |                                  |                          |            |       |
| 16. GENERATOR'S CERTIFICATE:   |   |                                       |   |               |                  |  |                                  |                          |            |       |
| I hereby certify that the above-desc   | ribed materials ar                                | e not hazardou                        | s wastes as defi  | ned by CFR P  | art 261 or       | any applicabl                                    | e state law, ha                  | ive been tul             | iy and     |       |
| accurately described, classified and   | packaged and are                                  | in proper cond                        | lition for transpo  | ortation acco | rding to ap      | plicable regu                                    | liations.                        | Month                    | Davi       | Vane  |
| Printed Name   |   | Sig                                   | nature "On beh  | alt OL.       |                  |  |                                  | Month                    | Day        | Year  |
| By wheel to be a comment   | **          | . 14                                  | 1   |               |                  | <del></del>                                      |                                  | -                        | -          | 7-11  |
| 17. Transporter 1 Acknowledgeme  | nt of Receipt of M                                |                                       |   |               |                  |  |                                  | 1                        |            |       |
| Printed Name   |   | Sig                                   | nature  | 2"            |                  |  |                                  | Month                    | Day        | Year  |
| s Process  | NAME OF TAXABLE PARTY.                            | V                                     | 9797  |               |                  |  |                                  | 1                        | ~          | 1     |
| 18. Transporter 2 Acknowledgeme  | nt of Receipt of M                                | aterials 🐪                            |   |               |                  |  |                                  |                          |            |       |
| Printed Name   |   | Sig                                   | nature  |               |                  |  |                                  | Month                    | Day        | Year  |
| t .  |   |                                       |   |               |                  |  |                                  |                          |            |       |
|  |   |                                       |   |               |                  |  |                                  |                          |            |       |
| 19. Certificate of Final Treatment/  |   |                                       |   |               |                  |  |                                  |                          |            |       |
| 1 certify, on behalf of the above list applicable laws, regulations, permi                             |   |                                       |   | ledge, the at | ove-descri       | ibed waste v                                     | vas managed i                    | n compliant              | e with all |       |
| 20. Facility Owner or Operator: Ce   |   |                                       |   | overed by the | his manifes      | t.   |                                  |                          |            |       |
| Printed Name   | \/\   |                                       | nature /  | 1             |                  |  |                                  | Month -                  | Day /      | Year  |
| * Printed Name   | 16  | 318                                   | ,,ature   |               |                  |  |                                  | 1/5                      | 11/        | .0    |
| 11   | L'  |                                       |   |               | 1                |  | II . project                     | TOD #4 65                | 211        |       |
| White-TREATMENT, STORAGE, DIS  | POSAL FACILITY C                                  | OPY BI                                | lue- GENERATO   | (#2·GOPY      |                  | Ye   | ellow- GENERA                    | TOK #1 COI               | -1         |       |
| Pink-FACILITY USE  | ONLY  | Go                                    | id-TRANSPORT  | R #1 COPY     |                  |  |                                  |                          |            |       |



Original Ticket# 1249547

Customer Name GEDRGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/30/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Time

Manifest 6677904 Destination

PO

Generator

Comments

Product

Profile 375200GAKRA (CDAL ASH & CDAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale In 04/30/2018 08:23:45 Inbound 1

130% (25.9

Operator rb

rb

Container

Driver

Check#

Rate

Billing # 0001037

Gen EPA ID NR

Tass

Vehicle# 5306 Volume

Objective

-Gross

Tare

Net Tons

(hoj pian

61080 15

27500 lb

33580 lb

16.79

1 COAL ASH & COAL CO 100 16.79 Tons

Out 04/30/2018 08:23:45

HEB

PORTW



### WW. NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's US                                 | EPA ID No.  | Manifest Doc             | No.                                 | 2. Page 1          | of                                     |              | ) . 5        | -1   |  |  |  |  |
|---|---|---|--------------------------|-------------------------------------|--------------------|--|--------------|--------------|------|--|--|--|--|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                 | If different than m<br>ANT KRAFT<br>GA 31407      | alling):  |                          | WMNA 66779  B. State Generator's ID |                    |  |              |              |      |  |  |  |  |
| 4. Generator's Phone 404-5. Transporter 1 Company Name  |   |   |                          |                                     |                    | A ID Number  C. State Transporter's ID |              |              |      |  |  |  |  |
| 7. Transporter 2 Company Name   | A ID Number                                       | orter's Phone<br>ransporter's II<br>orter's Phone | one<br>'s ID             |                                     |                    |  |              |              |      |  |  |  |  |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                 | e Address   | 10. US EF   | A ID Number              |                                     | G. State F         |  | 912-9        | 27-6113      |      |  |  |  |  |
| G 11. Description of Waste Materials  |   |   | 12. Cc<br>No.            | ontainers<br>Type                   | 13. Total Quantity | 14 Unit<br>Wt./Vol.                    | t. Mi        | isc. Comment | is . |  |  |  |  |
| a. COAL ASH& COAL CONTAN<br>E<br>R WM Profil  | 11-11   | 101   | 1                        |                                     |                    |  |              |              |      |  |  |  |  |
| A b.  | e# 375200GAKR                                     | A   |                          |                                     |                    |  |              |              |      |  |  |  |  |
|   | WM Profile #                                      |   |                          |                                     |                    |  |              |              |      |  |  |  |  |
| d.  | WM Profile #                                      |   |                          |                                     |                    | 0                                      |              |              | 2005 |  |  |  |  |
| J. Additional Descriptions for Mat  |   |   | K. Dispo<br>Cell<br>Grid | sal Location                        | 520                | 79                                     | Level        | 6            | 5    |  |  |  |  |
| 15. Special Handling Instructions ar  | d Additional Informat                             | ion   | ,                        | Ų                                   | ~,711              | p) =                                   |              |              |      |  |  |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description                    | ribed materials are no                            | ot hazardous wastes as de                         | CONTACT / PH             | Part 261 or                         | any applicabl      | le state law, h                        | ave been ful | lly and      |      |  |  |  |  |
| accurately described, classified and Printed Name   |   | Signature "On be                                  |                          | ording to a                         | орисавіе гедс      | )                                      | Month        | Day          | Year |  |  |  |  |
| 17. Transporter 1 Acknowledgement Printed Name  | nt of Receipt of Mater                            | Signature   |                          |                                     | 1                  | 1                                      | Month        | Day          | Year |  |  |  |  |
| 18. Transporter 2 Acknowledgement Printed Name  | nt of Receipt of Mater                            | iałs Signature                                    |                          |                                     | 12                 |  | Month        | Day          | Year |  |  |  |  |
| 19. Certificate of Final Treatment/I<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit | ed treatment facility, t<br>s and licenses on the | dates listed above.                               |                          |                                     |                    | vas managed i                          | n compliand  | e with all   |      |  |  |  |  |
| 20. Facility Owner or Operator: Ce Printed Name  White TREATMENT STORAGE DIS  | 203   | Signature   | C                        | his manife                          |                    | ellow- GENERA                          | Month        | Day          | Jeal |  |  |  |  |

Pink-FACILITY USE ONLY



Original Ticket# 1249557

Customer Name GEORGIAPOWE3752006AKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/30/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6677905

Time

Destination

PO

In

Comments

Product

Generator

Profile

375200GAKRA (CDAL ASH & CDAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

LD%

Scale 04/30/2018 08:37:04 Inbound 1 Out 04/30/2018 08:37:04

Operator LBEJARAN **LBEJARAN** 

HOM

Container

Billing # 0001037

Gen EPA ID NR

Rate

Driver

Check#

Vehicle# 5307 Volume

Tax Amount

Drigin

PORTW

59280 15

24080 lb

35200 15

17.60

1 & COAL ASH & COAL CO 100

17.60 Tons

Qty



Total Tax Total Ticket

Gross

Tare

Net

Tons



|             | NON-HAZARDOUS MANIFEST  | 1. Generator's US E      |  | Manifest Doc N  | 0.         | 2. Page 1     | of                               |             | 211        |        |  |  |
|-------------|---|--------------------------|--|-----------------|------------|---------------|----------------------------------|-------------|------------|--------|--|--|
|             |   |                          | / A  |                 |            |               |                                  |             | . 4        | 1      |  |  |
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER                                  | G                        | enerator's Site Address (<br>EORGIA POWER PLA    |                 | iling);    |               | st Number<br>MNA                 | 6677        | 905        |        |  |  |
| 1           | 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5 |                          | 55 CROSSGATE RD.<br>ORT WENTWORTH,               | GA 31407        |            |               | B. State G                       | Senerator's | ID         |        |  |  |
|             | 5. Transporter 1 Company Name.  |                          | 6. US EPA  | ID Number       |            |               |                                  |             |            | - 0    |  |  |
|             | 175-1111  | aluna                    |  |                 |            |               | ransporter's ID<br>orter's Phone | )           |            | -      |  |  |
| H           | 7. Transporter 2 Company Name   | 2000                     | 8. US EPA  | ID Number       |            | D. ITalisp    | orter s riione                   |             |            |        |  |  |
|             |   |                          |  |                 |            | _             | ransporter's IC<br>orter's Phone |             |            |        |  |  |
|             | 9. Designated Facility Name and Site SUPERIOR LANDFILL                            | : Address                | 10. US EF  | A ID Number     |            | G. State F    | acility ID                       |             |            |        |  |  |
| - 4         | 3001 LITTLE NECK ROAD   |                          |  |                 |            | H. State F    | acility Phone                    | 912-9       | 27-611     | 3      |  |  |
|             | Savannah, GA 31419  |                          |  |                 |            |               |                                  |             |            |        |  |  |
|             | 11. Description of Waste Materials  |                          | 1  | 12. Con         | tainers    | 13 Total      | 14. Unit                         | I.M         | sc. Commen | ts     |  |  |
| G           | a. COAL ASH& COAL CONTAM  | UNIATED MACTE            |  | No.             | Туре       | Quantity      | Wt./Vol.                         |             |            |        |  |  |
| N           | a. CUAL ASH& CUAL CUNTAIN   | IINATED WASTE            |  | 1 - 17          | 1).        | 17            |                                  |             |            |        |  |  |
| Ε           | WM Profile  | # 375200GAKR             | A  | -               | E 38       |               |                                  |             |            |        |  |  |
| R_A         | b.  |                          |  |                 |            |               |                                  |             |            |        |  |  |
| Т           |   |                          |  | 0               |            |               |                                  |             |            |        |  |  |
| OR          | v   | VM Profile #             |  |                 |            |               |                                  | 5           |            |        |  |  |
|             | C.  |                          |  |                 |            |               |                                  |             |            |        |  |  |
|             |   | WM Profile #             |  |                 |            |               |                                  |             |            |        |  |  |
| -           | <u>v</u>  | VIVI Profile #           | #  |                 |            |               |                                  |             | _          |        |  |  |
|             |   |                          |  |                 |            |               |                                  |             |            |        |  |  |
|             | v   | VM Profile #             |  | 1               |            |               |                                  |             |            |        |  |  |
|             | J. Additional Descriptions for Mate   |                          |  | K. Disposa      | l Location | tion 2 3      |                                  |             |            |        |  |  |
|             |   |                          |  | Cell            | 1          | 16            | 1/5                              | Level       | (L)        | `      |  |  |
|             |   |                          |  | Grid            | 1          | Xali          | .77                              | cever       |            |        |  |  |
|             | 15. Special Handling Instructions and   | d Additional Informati   | ion  |                 |            |               | , ,                              |             |            |        |  |  |
|             | Purchase Order # GPC1076025   | 93                       | EMERGENCY (                                      | CONTACT / PHO   | NE NO.:    |               |                                  |             |            |        |  |  |
| H           | 16. GENERATOR'S CERTIFICATE:  |                          |  |                 |            |               |                                  |             | -          |        |  |  |
|             | I hereby certify that the above-descr   | ibed materials are no    | t hazardous wastes as de                         | fined by CFR Pa | art 261 or | any applicabl | e state law, ha                  | ave been fu | lly and    |        |  |  |
|             | accurately described, classified and p  | oackaged and are in p    |  |                 | ding to ap | plicable regu | lations.                         | Month       | Day        | Year   |  |  |
|             | Printed Name  |                          | Signature "On be                                 | nair oi         |            |               |                                  | L           | LORY       | / lear |  |  |
| T           | 17. Transporter 1 Acknowledgement   | t of Receipt of Materi   | als  |                 |            | 110           |                                  | 1           |            |        |  |  |
| A           | Printed Name  |                          | Signature  | 1               | 1.         | 1             | 1                                | Month       | Daγ        | Year   |  |  |
| 5           | 1 ST 30   | 3.30                     | N 3  | 4) /-           |            | -) 4          |                                  | 14          |            | 1      |  |  |
| 0 8         | 18. Transporter 2 Acknowledgemen  | t of Receipt of Materi   |  |                 |            |               |                                  | 1           |            |        |  |  |
| T<br>E<br>R | Printed Name  |                          | Signature  |                 |            |               |                                  | Month       | Day        | Year   |  |  |
| -           | 19. Certificate of Final Treatment/Di   | snosal                   | -  |                 |            |               |                                  | -           |            |        |  |  |
| FA          | I certify, on behalf of the above listed applicable laws, regulations, permits    | d treatment facility, th | hat to the best of my kno<br>lates listed above. | wledge, the ab  | ove-descri | bed waste w   | vas managed i                    | n compliand | e with all |        |  |  |
|             | 20. Facility Owner or Operator: Cert  |                          |  | s covered by th | is manifes | t.            |                                  |             |            |        |  |  |
| Ţ           | Printed Name  | < )                      | Signature  | 1               |            |               |                                  | Month       | Day        | Year   |  |  |
|             | MANAGE TREATMENT STORAGE DISC   | 1)                       | Rhie- GENERATI                                   |                 | -          |               | llow- GENERA                     | 700 111 77  |            |        |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1249607

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF i RENTAL Ticket Date 04/30/2018 Vehicle# 1

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677906 Destination

PO Profile

Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 04/30/2018 09:53:16 In Out 04/30/2018 09:53:16

Scale Inbound 1

LD%

Operator LBEJARAN **LBEJARAN** 

Container

Billing #

Gen EPA ID NR

Rate

0001037

Тах

Driver Check#

> Gross Tare Net Tons

> > Amount

61200 lb 29480 lb 31720 15

15.86

Comments

Product

COAL ASH & COAL CO 100 15.86 Tons

Qty UOM

PORTW

Origin

Total Tax Total Ticket



## WATER MANAGEMENT NON-HAZARDOUS MANIFEST

|           | NON-HAZARDOUS MANIFEST  | 1. Generator's                        | US EPA I        |  | Manifest Doc N            | lo.          | 2. Page 1      | of                                      | 9               | 12          |      |
|-----------|---|---------------------------------------|-----------------|--|---------------------------|--------------|----------------|---|-----------------|-------------|------|
|           | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                                 | BIN#10221                             | General<br>GEOF | ator's Site Address (I<br>RGIA POWER PLA<br>CROSSGATE RD.<br>TWENTWORTH, | NT KRAFT                  | iling):      |                | st Number MNA B. State G                | 6677            |             |      |
|           |   | 06-1365                               |                 |  | 1D Number                 |              | C State Ti     | ransporter's IC                         | <u> </u>        |             |      |
|           | 7. Transporter 2 Company Name   | 1//                                   | )               | 8. US EPA  | ID Number                 |              | D. Transpo     | orter's Phone<br>ansporter's IC         |                 |             |      |
|           | 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD  | Address                               |                 | 10. US EP  | A ID Number               |              | G. State F     | acility ID                              | 912-9           | 27-611      |      |
|           | Savannah, GA 31419  |                                       |                 |  | 12. Co                    | ntainers     | 13. Total      | 14. Unit                                |                 | isc. Commen |      |
| GENE      | COAL ASH& COAL CONTAM   | INATED WAS                            | TE              |  | Z ME                      | Туре         | Quantity       | Wt./Vol.                                | h. 199          | ist Commen  |      |
| RATOR     | b.  | # 375200G/                            | AKRA            |  |                           |              |                |   |                 |             |      |
|           |   | #                                     |                 |  |                           |              |                |   |                 |             |      |
|           | d.  | VM Profile #                          |                 |  |                           |              |                |   |                 |             |      |
|           | J. Additional Descriptions for Mate   |                                       | /e              |  | K. Dispos<br>Cell<br>Grid | al Location  | (11)6          | (برن ا                                  | Level           | 3)/         | 65   |
|           | 15. Special Handling Instructions and   | l Additional Info                     | rmation         |  | 1                         | 16           | ~,             |   | 1               | ) t         |      |
|           | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descriaccurately described, classified and p | bed materials ar                      | re not haz      | ardous wastes as de  | fined by CFR P            | art 261 or a | any applicabl  | e state law, hi                         | ave been fu     | lly and     |      |
|           | Printed Name  |                                       |                 | Signature "On be   |                           | tung to up   | procedure regu | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Month           | Day         | Year |
| TRANS     | 17. Transporter 1 Acknowledgement   | of Receipt of M                       | laterials       | Signature  |                           |              |                |   | Month           | Day         | Year |
| PORTER    | 18. Transporter 2 Acknowledgement   | of Receipt of M                       | laterials       | Signature  | 7                         |              |                |   | Month           | Day         | Year |
| F & U = - | 19. Certificate of Final Treatment/Di<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits              | I treatment facili<br>and licenses on | the dates       | listed above.  |                           |              |                | ras managed i                           | n compliand     | e with all  |      |
| TY        | 20. Facility Owner or Operator: Cert Printed Name White-TREATMENT, STORAGE, DISP  |                                       |                 | Signature  Blue- GENERATO  | 3)                        | iis manires  |                | llow- GENERA                            | Month TOP #1 CO | Bay         | Year |

Pink-FACILITY USE ONLY



Original Ticket# 1249608

| Customer Name GEORGIAPOW | IE375200GAKRA GE | ORGI Carrier     | COASTALGRADING   | COASTALGRADII | NG       |
|--------------------------|------------------|------------------|--|---------------|----------|
| Ticket Date 04/30/2018   | 3                | Vehicle#         | C50  | Volume        | 12       |
| Payment Type Credit Acc  | ount             | Container        |  |               |          |
| Manual Ticket#           |                  | Driver           |  |               |          |
| Hauling Ticket#          |                  | Check#           |  |               |          |
| Route                    |                  | Billing #        | 0001037  |               |          |
| State Waste Code         |                  | Gen EPA II       | ) NR   |               |          |
| Manifest 6677907         |                  |                  |  |               |          |
| Destination              |                  |                  |  |               |          |
| PO PO                    |                  |                  |  |               |          |
| Profile 375200GAKR       |                  |                  |  |               |          |
| Generator 126-GEDRGI     | APWRCHAT GEORGI  | (A POWER - PLANT | r KRAFT  |               |          |
| T:                       |                  |                  |  | 073           |          |
|                          | Scale            | Operator         |  | Gross         | 59040 lb |
| In 04/30/2018 09:55:10   |                  | LBEJARAN         |  | Tare          | 26660 lb |
| Out 04/30/2018 09:55:10  |                  | LBEJARAN         |  | Net           | 32380 15 |
| S                        |                  |                  |  | Tons          | 16.19    |
| Comments                 |                  |                  |  | 21            |          |
|                          |                  |                  |  |               |          |
| Product                  | LD% Qty          | UOM Rate         | Тах  | Amount        | Origin   |
| 1 COAL ASH & COAL CO     | 100 16.19        | Tons             | pm gam gang gang tilik tilik diab dala uko uata taris dala dala ulik u |               | PORTW    |

Total Tax Total Ticket

Out My



| NON-HAZARDOUS MANIFEST  | 1, Generator's US                              | EPAID No.  | Nanifest Doc I            | No.              | 2. Page 1             | of  | 7.1-               |
|---|--|--|---------------------------|------------------|-----------------------|---|--------------------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374   | BIN#10221                                      | Generator's Site Address (r<br>GEORGIA POWER PLA<br>155 CROSSGATE RD.<br>PORT WENTWORTH, ( | NT KRAFT                  | ailing}:         | A. Manife<br>W        | 6677907<br>Generator's ID                                       |                    |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | 06-1365  | 17.2   | ID Number                 |                  | D. Transpo            | ransporter's I<br>orter's Phone                                 |                    |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | e Address                                      | 10. US EP.   | A ID Number               |                  | F. Transpo            | ransporter's II<br>orter's Phone<br>acility ID<br>acility Phone | 912-927-6113       |
| 11. Description of Waste Materials  |  |  | 12. Co<br>No.             | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.  | f. Misc. Comments  |
| a. COAL ASH& COAL CONTAN  | /INATED WASTE                                  | (  | 1.00                      | DT               | 1-7                   |   |                    |
| b.  | WM Profile #                                   | nn .   |                           |                  |                       |   |                    |
| d.  | WM Profile #                                   |  |                           |                  | 1000                  |   | 1                  |
|   | WM Profile #                                   |  |                           |                  |                       |   |                    |
| J. Additional Descriptions for Mate   | erials Listed Above                            |  | K. Dispos<br>Cell<br>Grid | sal Location     | 1370                  | 119   | Level (C           |
| 15. Special Handling Instructions an  | d Additional Inform                            | ation  |                           | Ü                | XII                   | 6) L  |                    |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc   | ribed materials are r                          | EMERGENCY C  | fined by CFR I            | art 261 or       | any applicabl         | e state law, h  | ave been fully and |
| accurately described, classified and Printed Name   |  | Signature "On be   |                           | ording to ap     | oplicable regu        | lations.  | Month Day Year     |
| 17. Transporter 1 Acknowledgemen  | 4  | Signature  | 111                       |                  |                       |   | Month Day Year     |
| /18. Transporter 2 Acknowledgement  | nt of Receipt of Mate                          | Signature  |                           | 0                |                       |   | Month Day Year     |
| 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit<br>20. Facility Owner or Operator Cer | d treatment facility,<br>s and licenses on the | e dates listed above.<br>of non-hazardous material   |                           |                  |                       | vas managed   |                    |
| Printed Name White- TREATMENT STORAGE OIS   | DEACHITY CON                                   | Signature  Y Blue- GENERATO  | NO NO CODY                |                  | Vz                    | llow- GENER   | ATOR #1 COPY       |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1249613

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 04/30/2018 Vehicle# C25 Volume

Payment Type Credit Account Container Manual Ticket# Driver

Hauling Ticket# Check# Route Billing # 0001037 State Waste Code Gen EPA ID NR

Manifest 6677908

Destination

PO Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time Scale Operator Gross 59020 1b 04/30/2018 10:03:54 Inbound 1 RB Tare 27040 1ь Dut 04/30/2018 10:03:54 RB Net 31980 1b Tons 15.99

Consents,

Product LD% Qty MGU Rate Тах Amount Origin COAL ASH & COAL CD 100 15.99 Tons PORTW

> Total Tax Total Ticket

michel fregue



## WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's US<br>N                        | EPA ID No.   | Manifest Doc N         | No.             | 2. Page 1             | of                               | r)         | . 3         | 51   |
|---|---|--|------------------------|-----------------|-----------------------|----------------------------------|------------|-------------|------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                       | BIN#10221 1                                   | Generator's Site Address<br>GEORGIA POWER PL<br>LSS CROSSGATE RD.<br>PORT WENTWORTH, | ANT KRAFT              | ailing):        |                       | st Number MNA B. State G         | 6677       | 7908        | 1    |
|   | 06-1365                                       | OKT WEITTWOKTH,  | GA 31407               |                 |                       |                                  |            |             |      |
| 5. Transporter 1 Company Name  7. Transporter 2 Company Name  | t al  | 1  | A ID Number            |                 |                       | ransporter's ID<br>orter's Phone |            |             |      |
|   |   | 1  |                        |                 |                       | ransporter's ID<br>orter's Phone |            |             |      |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD  | Address                                       | 10. US E   | PA ID Number           |                 | G. State Fa           | acility ID                       | 912-9      | 927-611     | 3    |
| Savannah, GA 31419  |   |  |                        |                 |                       |                                  |            |             |      |
| 11. Description of Waste Materials  |   |  | 12. Cor<br>No.         | tainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | I. M       | lisc. Comme | nts  |
| a. COAL ASH& COAL CONTAM  |   |  | (15                    | 11/             | 17                    |                                  |            |             |      |
| WM Profile  | # 375200GAKR                                  | RA   |                        | -               |                       |                                  |            | - 5         |      |
|   | VM Profile #                                  |  |                        |                 |                       |                                  |            |             |      |
| c.  | WITTONIE #                                    |  |                        |                 |                       |                                  |            |             |      |
|   | VM Profile #                                  |  | U in the               |                 |                       | _                                |            | -           |      |
| d.  | The Dura Charle                               |  |                        |                 |                       |                                  |            |             |      |
| J. Additional Descriptions for Mater  | VM Profile #<br>rials Listed Above            |  | K. Dispos              | al Location     |                       |                                  |            |             |      |
| i   |   |  | Cell Grid              | (De             | N XIII                | w// b                            | Level /    | 751         | 1-   |
| 15. Special Handling Instructions and   | Additional Informat                           | ion  |                        |                 |                       |                                  |            |             |      |
| Purchase Order # GPC1076029   | 93  | EMERGENCY  | CONTACT / PHO          | ONE NO.:        |                       |                                  |            |             |      |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descrit accurately described, classified and p.                  |   |  |                        |                 |                       |                                  | ve been fu | lly and     |      |
| Printed Name  |   | Signature "On be   |                        |                 |                       |                                  | Month      | Day         | Year |
| 17. Transporter 1 Acknowledgement   | of Receipt of Materi                          | als  | l-time <sub>ters</sub> |                 | +-                    |                                  | 1          | 3,110       | 4    |
| Printed Name  |   | Signature  | hat                    |                 |                       |                                  | Month      | Đay         | Year |
| 18. Transporter 2 Acknowledgement Printed Name  | of Receipt of Materi                          | Signature  |                        |                 |                       |                                  | Month      | Day         | Year |
| 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits a | treatment facility, the and licenses on the d | lates listed above.  |                        |                 |                       | as managed in                    | compliance | ce with all |      |
| 20. Facility Owner or Operator: Certi<br>Printed Name   | receipt of                                    | non-hazardous material Signature   | B covered by th        | is manifes      |                       |                                  | Month ,    | <b>Д</b> ау | Year |



Original Ticket# 1249614

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 04/30/2018 Vehicle# C26 Volume Payment Type Credit Account Container Manual Ticket# Driver Hauling Ticket# Check# Route Billing # 0001037 State Waste Code Gen EPA ID NR Manifest 6677909

Destination

PO Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time Scale Operator Gross 58640 lb 04/30/2018 10:07:49 Inbound 1 RB Tare 25980 1ь Dut \04/30/2018 10:07:49 RB 32660 1b Net Tons 16.33

Comments

Froduct LD% Qty MOU Rate Tax Amount Origin COAL ASH & COAL CO 100 16.33 Tons PORTW

Total Tax Inhal ficket



|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's US EF             |   | anifest Doc No |               | 2. Page 1 of          |                                  | 9            | . 7        | 40    |  |  |  |
|------------------|---|----------------------------------|---|----------------|---------------|-----------------------|----------------------------------|--------------|------------|-------|--|--|--|
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, E<br>ATLANTA, GA 30308-3374                     | GE<br>BIN#10221 15               | nerator's Site Address (if d<br>CORGIA POWER PLAN<br>5 CROSSGATE RD.<br>DRT WENTWORTH, G. | IT KRAFT       | ng):          |                       | st Number<br>MNA<br>B. State G   | 6677         |            | (A)   |  |  |  |
|                  |   | 06-1365                          | , a velvi velvi velvi , d.  | A 31407        |               |                       |                                  |              |            | - 4   |  |  |  |
|                  | 5. Transporter 1 Company Name   | rad ia                           |   | D Number       |               |                       | ransporter's ID<br>orter's Phone | )            |            | - 24  |  |  |  |
|                  | 7. Transporter 2 Company Name   | 3                                | 8. US EPA II  | O Number       |               |                       | ansporter's ID<br>orter's Phone  |              |            |       |  |  |  |
|                  | 9. Designated Facility Name and Site SUPERIOR LANDFILL  | Address                          | 10. US EPA  | ID Number      |               | G. State F            |                                  |              |            |       |  |  |  |
|                  | 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |                                  |   | -              |               | H. State F            | acility Phone                    | 912-9        | 27-611     | 3     |  |  |  |
| G                | 11. Description of Waste Materials  |                                  |   | 12. Contai     | iners<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | I, MI        | sc. Commen | ts    |  |  |  |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAM  |                                  |   | 13/10          | 101           | 7                     |                                  |              |            |       |  |  |  |
| R                |   | # 375200GAKRA                    |   |                |               | 4                     | 1 m                              |              |            |       |  |  |  |
| A<br>T<br>O      | b.  | M Profile #                      |   |                |               |                       |                                  |              | T          |       |  |  |  |
| R                | c.  | William W                        |   |                |               |                       |                                  |              |            |       |  |  |  |
|                  | w   |                                  |   |                |               | Elmonasi              |                                  |              |            |       |  |  |  |
|                  | d.  | ras Desclie 4                    |   |                |               |                       |                                  |              |            |       |  |  |  |
|                  | J. Additional Descriptions for Mater  | M Profile #<br>ials Listed Above |   | K. Disposal    | Location      | ion                   |                                  |              |            |       |  |  |  |
|                  |   |                                  |   | Cell A         | Level         |                       | io                               |              |            |       |  |  |  |
|                  | 15. Special Handling Instructions and   | Additional Informatio            | n   |                | 30            | 4 - 1                 |                                  | ( ) /        |            | 3     |  |  |  |
|                  | Purchase Order # GPC1076029   | 3                                | EMERGENCY CO  | NTACT / PHON   | IE NO.:       |                       |                                  |              |            |       |  |  |  |
|                  | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-describ accurately described, classified and page 14.            |                                  |   |                |               |                       |                                  | ive been ful | ly and     |       |  |  |  |
|                  | Printed Name  | ackaged and are in pro           | Signature "On beha  |                | nik to abi    | meane regu            | auons.                           | Month        | Оау        | Year  |  |  |  |
| Ţ                | 17. Transporter 1 Acknowledgement   | of Receipt of Material           | s   | · ·            |               |                       |                                  | 1-1          |            |       |  |  |  |
| R<br>A<br>N<br>S | Printed Name  |                                  | Signature   | 4              |               |                       |                                  | Month.       | Day        | Year_ |  |  |  |
| P                | 18. Transporter 2 Acknowledgement   | of Receipt of Material           | ls  |                | .+            |                       |                                  |              | 7          |       |  |  |  |
| R<br>T<br>E<br>R | Printed Name  |                                  | Signature   |                |               |                       |                                  | Month        | Day        | Year  |  |  |  |
| FAC              | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits a | treatment facility, tha          |   | edge, the abov | re-describ    | ed waste w            | as managed ir                    | ı complianc  | e with all |       |  |  |  |
| i                | 20. Facility Owner or Operator: Certi   | fication of receipt of n         |   | overed by this | manifest.     |                       |                                  |              |            |       |  |  |  |
| Y                | Printed Name  | 1/3                              | Signature   | 3              |               |                       | llow CENEDA                      | Month        | Day        | Year, |  |  |  |

White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink-FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold-TRANSPORTER #1 COPY



Original Ticket# 1249622

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Vehicle# L07 Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677910

Destination

P8

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

Out 04/30/2018 10:19:36

Scale 04/30/2018 10:19:36 Inbound 1

Operator RB RB

Gross Tare Net

52660 16 25240 lb

27420 16 Tons 13.71

Comments

Product

LD% Qty UOM

Rate

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Тах

Amount

Origin

1 COAL ASH & COAL CD 100 13.71 Tons

PORTW

Total Tax fobal ficket



| 1                     | NON-HAZARDOUS MANIFEST   | 1. Generator's                         | US EPA                 |   | Manifest Doc N  | Vo.         | 2. Page 1  | of                               |             | 1 3          | T    |
|-----------------------|--|--|------------------------|---|-----------------|-------------|--|----------------------------------|-------------|--------------|------|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5  | BIN#10221<br>06-1365                   | Gener<br>GEOI<br>155 ( | rator's Site Address<br>RGIA POWER PL<br>CROSSGATE RD.<br>TWENTWORTH, | ANT KRAFT       | oiling):    |  | st Number<br>MNA<br>B. State (   | 6677        | 7910         |      |
|                       | 5. Transporter 1 Company Name  | - rul 1                                |                        | 6. US EPA   | A ID Number     |             | The second secon | ransporter's Il<br>orter's Phone | )           |              |      |
|                       | 7. Transporter 2 Company Name  |  | )                      | 8. US EPA   | A ID Number     |             |  | ransporter's IC<br>orter's Phone | )           |              |      |
|                       | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | Address                                |                        | 10. US E  | PA ID Number    |             | G. State F   | acility ID<br>acility Phone      | 912-9       | 927-611:     | 3    |
| G                     | 11. Description of Waste Materials   |  | - 1                    |   |                 | ntainers    | 13. Total  | 14. Unit                         | I. N        | Aisc. Commen | its  |
| E S E                 | a. COAL ASH& COAL CONTAM   |  |                        |   | No.             | Туре        | Quantity   | Wt./Vol.                         |             |              |      |
| R<br>A<br>T<br>O<br>R | b.   | # 375200GA                             | AKHA                   |   |                 |             |  |                                  |             |              |      |
|                       | d.   | - WM Profile #                         |                        |   |                 |             |  |                                  |             |              |      |
|                       |  | /M Profile #<br>rials Listed Above     | e                      |   | K. Dispos       | al Location | 47   | 1.75                             | Level       |              |      |
|                       | 15. Special Handling Instructions and  | Additional Infor                       | mation                 |   | Grid            |             | 51   | 632                              |             | -            |      |
| -                     | Purchase Order # GPC1076029  | 3                                      |                        | EMERGENCY (   | CONTACT / PHO   | ONE NO.:    |  |                                  |             |              |      |
|                       | 16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-descri<br>accurately described, classified and population.<br>Printed Name                             |  |                        |   | portation accor |             |  |                                  | we been fu  | olly and     | Year |
| T & A                 | 17. Transporter 1 Acknowledgement Printed Name   | of Receipt of Ma                       | terials                | Signature   |                 |             |  |                                  | Month       | B.U.J        | Van- |
| A B S P O             | 18. Transporter 2 Acknowledgement  | of Receipt of Ma                       | sterials               | Signature   | 16/1            | <u> </u>    |  |                                  | MOILLI      | Day          | Year |
| RTER                  | Printed Name   |  |                        | Signature   |                 | r'          |  |                                  | Month       | Оау          | Year |
| FACIL                 | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits ;<br>20. Facility Owner or Operator: Cefti | treatment facilit<br>and licenses on t | he dates               | listed above.   |                 |             |  | as managed ir                    | n compliant | ce with all  |      |
| Y                     | Printed Name   | 11                                     |                        | Signature   |                 | A.          |  |                                  | Month       | Day          | Year |
|                       | White-TREATMENT, STORAGE, DISPO  | SAL FACILITY CO                        | PY                     | Blue- GENERATO  | OR #2 CO9Y      |             | Yel  | low- GENERA                      | TOR #1 CO   | PY           |      |

Pink- FACILITY USE ONLY



Supervior I and (2011) 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

(horginal) Ticket# 1249625

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Ticket Date 04/30/2018 Vehicle# 5306 Volume Payment Type Credit Account Container Manual Ticket# Driver Hauling Ticket# Check# Route Billing # 0001037

State Waste Code Gen EPA ID NR Manifest 6677661

Destination PO Profile

375200GAKRA (CDAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time Scale Operator Gross 56460 1b 04/30/2018 10:22:54 Inbound 1 RB Tare 27500 1b Out 04/30/2018 10:22:54 RB Net 28960 1b Tons 14.48 Comments

Product LD% Qty MBU Rate Tax Amount Origin COAL ASH & COAL CO 100 14.48 Tons PORTW

Total Tax

Total Ticket



|             | WAS IE WURIEMENT                                 |                                   |          |  |                      |                  |   |                      |              |             |                  |  |  |
|-------------|--|-----------------------------------|----------|--|----------------------|------------------|---|----------------------|--------------|-------------|------------------|--|--|
|             | NON-HAZARDOUS MANIFEST                           | 1. Generator's                    | US EPA   |  | anifest Doc          | No.              | 2. Page 1   | of                   |              | 1:3         | 5                |  |  |
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER |                                   | GEO      | erator's Site Address (#<br>PRGIA POWER PLAI |                      | ailing):         |   | st Number<br>MNA     | 6677         | 661         | . 7              |  |  |
|             | 241 RALPH MCGILL BLVD NE,                        | BIN#10221                         |          | CROSSGATE RD.                                |                      |                  |   | B. State G           | enerator's   | ID          | ñ                |  |  |
|             | ATLANTA, GA 30308-3374                           |                                   | POR      | T WENTWORTH, G                               | A 31407              |                  |   |                      |              |             |                  |  |  |
|             |  | 06-1365                           |          | L  |                      |                  |   |                      |              |             |                  |  |  |
|             | 5. Transporter 1 Company Name                    |                                   |          | 6. US EPA I                                  | D Number             |                  | C State T   | ransporter's ID      |              |             |                  |  |  |
|             | Constal -  | Extin                             |          |  |                      |                  |   | orter's Phone        |              |             |                  |  |  |
|             | 7. Transporter 2 Company Name                    | 1                                 |          | 8. US EPA I                                  | D Number             |                  |   |                      |              |             |                  |  |  |
|             |  |                                   |          |  |                      |                  |   | ransporter's ID      |              |             |                  |  |  |
|             | 9. Designated Facility Name and Site             | Addross                           |          | 10. US EPA                                   | ID Number            |                  | F. Transpe  | orter's Phone        |              |             | -                |  |  |
|             | SUPERIOR LANDFILL                                | Audiess                           |          | IO. USEPA                                    | ID Number            |                  | G. State Facility ID  |                      |              |             |                  |  |  |
|             | 3001 LITTLE NECK ROAD                            |                                   |          |  |                      |                  | -   | acility Phone        | 912-927-6113 |             |                  |  |  |
|             | Savannah, GA 31419                               |                                   |          |  |                      |                  | TI. State I   | acinty rilotte       | ::ity Phone  |             |                  |  |  |
|             | Savarriari, Gri Ga 123                           |                                   |          |  |                      |                  |   |                      |              |             |                  |  |  |
| G           | 11. Description of Waste Materials               | 1                                 |          |  | No.                  | ntainers<br>Type | 13. Total<br>Quantity   | 14. Unit<br>Wt./Vol. | I. M         | isc. Commen | ts               |  |  |
| E           | a COAL ASH& COAL CONTAM                          | INATED WAS                        | TF       |  | 110.                 | 1100             | Quantity  | 771.7 101.1          |              |             |                  |  |  |
| N           |  | 1                                 |          |  | 10306                | DT               | 18  |                      |              |             |                  |  |  |
| E           | WM Profile                                       | # 375200GA                        | AKRA     |  |                      |                  |   |                      |              |             | اسعاده           |  |  |
| Α           | b.   | - T                               |          |  |                      |                  |   |                      |              |             |                  |  |  |
| T           |  |                                   |          |  |                      |                  |   |                      |              |             |                  |  |  |
| O           | v  | VM Profile #                      |          |  |                      | 2                |   |                      |              | - 0         |                  |  |  |
| ï           | C.   |                                   |          |  |                      | 1                |   |                      |              |             |                  |  |  |
|             |  |                                   |          |  |                      |                  |   |                      |              |             |                  |  |  |
|             | d.   | VM Profile #                      |          |  |                      | 1000000          |   |                      |              | -           | nate manufacture |  |  |
|             | u.   |                                   |          |  |                      |                  |   |                      |              |             |                  |  |  |
|             |  | una mastila H                     |          |  |                      |                  |   |                      |              |             |                  |  |  |
|             | J. Additional Descriptions for Mater             | VM Profile #<br>rials Listed Abov | e        |  | K. Disposal Location |                  |   |                      | 1 .          |             |                  |  |  |
|             |  |                                   |          |  |                      |                  | L 172   | 109                  | 9 /1         |             |                  |  |  |
|             |  |                                   |          |  | Cell                 |                  | VJU   | 16'                  | Level        |             | -                |  |  |
|             | 15. Special Handling Instructions and            |                                   |          |  | Grid                 |                  | St 111  | 3/                   | -            |             |                  |  |  |
|             | 15. Special Handring Instructions and            | i Additional inioi                | IIIauuii |  |                      | اسا              | 00110   |                      |              |             |                  |  |  |
|             |  |                                   |          |  |                      |                  |   |                      |              |             |                  |  |  |
|             | Purchase Order # GPC1076029                      | 93                                |          | EMERGENCY CO                                 | NTACT / PH           | ONE NO.:         |   |                      |              |             |                  |  |  |
|             | 16. GENERATOR'S CERTIFICATE:                     |                                   | -        |  |                      |                  |   |                      |              |             |                  |  |  |
|             | I hereby certify that the above-descri           | bed materials ar                  | e not ha | izardous wastes as defi                      | ned by CFR P         | art 261 or       | any applicabl   | e state law, ha      | ve been fu   | lly and     |                  |  |  |
|             | accurately described, classified and p           |                                   |          | er condition for transpo                     | ortation acco        | rding to ap      |   |                      |              |             |                  |  |  |
|             | Printed Name                                     |                                   |          | Signature "On beha                           |                      |                  | 1   |                      | Month        | Day         | Year             |  |  |
| _           | 17. Transporter 1 Acknowledgement                | of Receipt of M:                  | atorials | 1 1 7 7 7 7                                  |                      | -                | 1   |                      | 4            |             | 1                |  |  |
| R<br>A      | Printed Name                                     | . Of Receipt of Wil               | 31011013 | Signature                                    |                      | 1                | ر المراجع الم |                      | Month        | Day         | Year             |  |  |
| N<br>S      | 1  | + /                               |          |  |                      |                  | 12 (  |                      | 61           | 51          | 1                |  |  |
| P           | 18. Transporter 2 Acknowledgement                | of Receipt of Ma                  | aterials | 1  |                      | - 1              | Jan 1   |                      |              |             | 3                |  |  |
| R           | Printed Name                                     |                                   |          | Signature                                    |                      | 1                |   |                      | Month        | Day         | Year             |  |  |
| R           |  |                                   |          | 4  |                      | 1                |   |                      |              |             |                  |  |  |
| Ī           | 19. Certificate of Final Treatment/Dis           | sposal                            |          |  |                      | 1                |   |                      |              |             |                  |  |  |
| F<br>A<br>C | I certify, on behalf of the above listed         | -                                 | ty, that | to the best of my know                       | ledge, the al        | oove-descri      | bed waste w   | as managed in        | complian     | e with all  |                  |  |  |
| 1           | applicable laws, regulations, permits,           | and licenses on t                 | he date  | s listed above.                              |                      |                  |   |                      |              |             |                  |  |  |
| 1           | 20. Facility Owner or Operator: Cert             | ification of receip               | ot of no |  | overed by the        | nis manifes      | t.  |                      | 1 : -        | 7           | 6.14             |  |  |
| Y           | Printed Name                                     | 1                                 |          | Signature                                    |                      |                  |   |                      | Month        | Day         | War              |  |  |
|             |  |                                   |          |  |                      |                  |   |                      | 110          | )           |                  |  |  |

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue- GENERATOR #2 COPY

Pink- FACILITY USE ONLY

Gold-TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY



Original Ticket# 1249634

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Manifest 6677662

Destination

PO

In

Profile Generator

375200GAKRA (CDAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

LD%

04/30/2018 10:35:50 Out 04/30/2018 10:35:50

Scale

Inbound 1

Qty

Operator RB

RB

UOM

The best story of the

Gross Tare

Net Tons

24080 15 30420 lb 15, 21

54500 1b

0001037

Comments

Product

COAL ASH & COAL CO 100

15.21 Tons

Rate

Vehicle# 5307

Gen EPA ID NR

Container

Driver

Check# Billing #

Тах

Amount

Origin

PORTW

Total Tax fokat ficket



|                       | NON-HAZARDOUS MANIFEST  | 1. Generator's US EP                              |  | lanifest Doc No.        |               | 2. Page 1             | of  | 1           | 4           |        |
|-----------------------|---|---|--|-------------------------|---------------|-----------------------|---|-------------|-------------|--------|
|                       | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, I<br>ATLANTA, GA 30308-3374                   | GE<br>BIN#10221 15                                | nerator's Site Address (H<br>ORGIA POWER PLA<br>5 CROSSGATE RD.<br>RT WENTWORTH, ( | NT KRAFT                | ng):          |                       | MNA  B. State G                                   | 6677        |             |        |
|                       | 4. Generator's Phone 404-50<br>5. Transporter 1 Company Name  | 06-1365   | 6. US EPA  | ID Number               |               | C. State Tr           | ansporter's IC                                    | )           |             |        |
|                       | 7. Transporter 2 Company Name   | 7/1   | 8. US EPA  | ID Number               |               | D. Transpo            | orter's Phone                                     |             |             | 2000)  |
|                       | 9. Designated Facility Name and Site  | Address   | 10. US EP/   | ID Number               | -             | F. Transpo            | orter's Phone                                     |             | = 4 -       |        |
|                       | SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |   |  |                         |               | G. State F            | acility ID<br>acility Phone                       | 912-9       | 27-611      |        |
| G                     | 11. Description of Waste Materials  |   |  | 12. Contai              | iners<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.                              | I, Mi       | sc. Comment | is     |
| ENE                   | a. COAL ASH& COAL CONTAM  | INATED WASTE # 375200GAKRA                        |  |                         | DI            | 17.                   |   |             |             |        |
| R<br>A<br>T<br>O<br>R | b.  | /M Profile #                                      |  |                         |               |                       | 9   |             |             |        |
|                       | c.  | WM Profile #                                      |  |                         |               |                       |   | ļ<br>I      |             |        |
|                       | d.  | man officer                                       |  |                         |               |                       |   |             |             |        |
|                       | J. Additional Descriptions for Mater  | /M Profile #<br>ials Listed Above                 |  | K. Disposal  Cell  Grid | Location      | V320                  | 174   | Level       | 6           |        |
|                       | 15. Special Handling Instructions and   | Additional Informatio                             | n  |                         |               | -) /                  | <del>5}                                    </del> |             |             |        |
|                       | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descri                            |   |  | ONTACT / PHON           |               | and applicable        | o stato faur ha                                   | wa baan ful | heand       |        |
|                       | accurately described, classified and p  | ackaged and are in pro                            | per condition for transp<br>Signature "On beh                                      | ortation accordi        | ing to ap     | plicable regu         | lations.  | Month       | Day         | Year   |
| T R A N S             | 17. Transporter 1 Acknowledgement Printed Name  |   | Signature  |                         | J             |                       |   | Month       | Day         | Year   |
| P<br>R<br>T<br>E<br>R | 18. Transporter 2 Acknowledgement Printed Name  | of Receipt of Material                            | Signature  |                         |               |                       | 4   | Month       | Day         | Year   |
| FACT                  | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | treatment facility, tha<br>and licenses on the da | tes listed above.  |                         |               |                       | as managed in                                     | n complianc | e with all  |        |
| 4                     | 20. Facility Owner or Operator: Certi-  | TD  | Signature  |                         | manifest      |                       | llow- GENERA                                      | Month       | Оау         | / Year |

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY



Original Ticket# 1249669

Volume

Customer Name GEORGIAPOWE375200GAKRA GEDRGI Carrier LMF 1 RENTAL

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677664

Destination

PB

Profile Generator

Time

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale

Inbound 1

RB

RB

Operator

Gross Tare

65460 lb 29480 lb

Net Tons 35980 15 17.99

Comments

Product

LD%

Qty

UDM

Rate

Vehicle# 1

Billing #

Gen EPA ID NR

Container

Driver

Check#

Tax

0001037

Amount

Origin

COAL ASH & COAL CO 100

04/30/2018 11:41:14

Out 04/30/2018 11:41:14

17.99 Tons

PORTW

Total Tax Total fielet



|                  | NON-HAZARDOUS MANIFEST   | 1. Generator's                        | US EPA   |  | nifest Doc N              | No.                      | 2. Page 1             | of                               |               | 110        | 10             |
|------------------|--|---------------------------------------|----------|--|---------------------------|--------------------------|-----------------------|----------------------------------|---------------|------------|----------------|
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,  | DINI#10221                            | GEO      | rator's Site Address (H di<br>RGIA POWER PLAN<br>CROSSGATE RD. |                           | alling):                 |                       | st Number                        | 6677          |            |                |
|                  | ATLANTA, GA 30308-3374   | 06-1365                               |          | T WENTWORTH, GA  | 31407                     |                          |                       | B. State C                       | Generator's I | D          |                |
|                  | 5. Transporter 1 Company Name  | 1                                     |          | 6. US EPA IC   | Number                    |                          |                       | ransporter's II<br>orter's Phone | )             |            |                |
|                  | 7. Transporter 2 Company Name  |                                       |          | 8. US EPA II   | Number                    |                          |                       | ransporter's IC<br>orter's Phone | )             |            |                |
|                  | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                 | e Address                             |          | 10. US EPA   | D Number                  |                          | G. State F            | acility ID                       | 912-9         | 27-6113    | 1              |
| ,                | 11. Description of Waste Materials   |                                       |          |  | 12. Co                    | ntainers<br>Type         | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | t. Mi         | sc. Commen | ts             |
| GEZE             | a. COAL ASH& COAL CONTAN   | IINATED WAS                           |          | 1  | nF1                       | 07                       | 177                   | Will the second                  |               |            |                |
| RATOR            | b.   | VM Profile #                          | Nur      |  |                           |                          |                       |                                  |               |            |                |
| V                |  | WM Profile #                          |          |  |                           |                          |                       |                                  |               |            |                |
|                  | d.   | VM Profile #                          |          |  |                           |                          |                       |                                  |               |            | 13             |
|                  | J. Additional Descriptions for Mate  |                                       | e        |  | K. Dispos<br>Cell<br>Grid | sal Location             | X13.6                 | 187                              | Level         | 3 )        | <del>-</del> 6 |
|                  | 15. Special Handling Instructions and  | d Additional Infor                    | mation   |  | L                         | 99                       | 1) (                  |                                  |               |            | de             |
|                  | Purchase Order # GPC107602   | 93                                    |          | EMERGENCY CO   | NTACT / PH                | ONE NO.:                 |                       |                                  |               |            |                |
|                  | 16. GENERATOR'S CERTIFICATE:     I hereby certify that the above-descr     accurately described, classified and i        | ibed materials ar<br>backaged and are | e not ha | er condition for transpo                                       | rtation acco              | Part 261 or ording to ap | any applicabl         | e state law, h<br>lations.       | ave been ful  | ly and     |                |
| T                | Printed Name  17. Transporter 1 Acknowledgemen   | t of Receipt of M.                    | aterials | Signature "On beha   | If of"                    |                          |                       |                                  | Month         | Day        | Year           |
| R<br>A<br>N<br>S | Printed Name   | loves                                 |          | Signature  | <i>y</i> /                |                          |                       |                                  | Month         | Day        | Year           |
| PORTER           | 18. Transporter 2 Acknowledgemen Printed Name  | t of Receipt of M                     | aterials | Signature  | •                         |                          |                       |                                  | Month         | Day        | Year           |
| F A C            | 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits | d treatment facili                    | ty, that | to the best of my knowl  | edge, the al              | bove-descri              | bed waste w           | /as managed i                    | in complianc  | e with all |                |
| LITY             | 20. Facility Owner or Operator: Cer<br>Printed Name  |                                       |          |  | overed by t               | his manifes              | t.                    |                                  | Month         | Day        | yle            |
| 41               | White-TREATMENT, STORAGE, DISF   | OSAL FACILITY CO                      | OPY      | Blue- GENERATOR  | #2 COPY                   |                          | Ye                    | ellow- GENER                     | ATOR #1 CO    | 7          |                |

**Gold-TRANSPORTER #1 COPY** 

Pink- FACILITY USE ONLY



Original Ticket# 1249670

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COAS Ticket Date 04/30/2018 Vehicle# C26

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677665

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

LD%

Time
In 04/30/2018 11:43:50
Dut 04/30/2018 11:43:50

Scale

Inbound 1

Qty

Operator RB

Container

Billing #

Gen EPA ID NR

Driver

Check#

RB

HOU

Gross Tare

COASTALGRADING COASTALGRADING

Net Tons 61520 lb 25980 lb

35540 lb

Comments

Product

1 COAL ASH & COAL CO 100

17.77 Tons

Rate Tax A

0001037

Amount Origin

PORTW

Jan .

Total Tax Fotal Ficket



| NON-HAZARDOUS MANIFEST 1. Gene   | rator's US EPA ID No. N / A   | Manifest Doc f            | No.                        | 2. Page 1                      | of  | 11.00                     |
|--|---|---------------------------|----------------------------|--------------------------------|---|---------------------------|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#102 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365       | Generator's Site Address (<br>GEORGIA POWER PLA<br>155 CROSSGATE RD.<br>PORT WENTWORTH, | NT KRAFT                  | alling):                   |                                | st Number<br>MNA<br>B. State G                      | 6677665<br>Generator's ID |
| 5. Transporter 1 Company Name  7. Transporter 2 Company Name   | 6. US EPA   | ID Number                 |                            | D. Transpo                     | ransporter's IC<br>orter's Phone<br>ransporter's IC |                           |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10. US EP   | A ID Number               |                            | G. State F                     | acility ID  | 912-927-6113              |
| 11. Description of Waste Materials   |   | 12. Co                    | ntainers<br>Type           | 13. Total<br>Quantity          | 14. Unit<br>Wt./Vol.                                | I. Misc. Comments         |
| a. COAL ASH& COAL CONTAMINATED  WM Profile # 3752  | WASTE<br>200GAKRA   | 1 34                      | TU                         | 18                             |   |                           |
| b.  WM Profile c.  |   |                           |                            |                                |   |                           |
| WM Profile   | :#  |                           |                            |                                |   |                           |
| d.<br>WM Profile   | : #   |                           |                            |                                |   |                           |
| J. Additional Descriptions for Materials Listed  | 1 Above   | K. Dispos<br>Cell<br>Grid | al Location                | 2412                           | 1511  | Level                     |
| 15. Special Handling Instructions and Additiona  | al Information  |                           | ) - 1 <u>01</u>            |                                |   | 1                         |
| Purchase Order # GPC10760293   | EMERGENCY (   | ONTACT / PH               | ONE NO.:                   |                                |   |                           |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described mate accurately described, classified and packaged a                    | rials are not hazardous wastes as de<br>and are in proper condition for trans           | fined by CFR P            | art 261 or<br>arding to ap | any applicabl<br>plicable regu | e state law, ha                                     | ave been fully and        |
| Printed Name   | Signature "On be  | half of"                  |                            |                                |   | Month Day Year            |
| 17. Transporter 1 Acknowledgement of Receip Printed Name   | t of Materials Signature  |                           |                            |                                |   | Month Day Year            |
| 18. Transporter 2 Acknowledgement of Receip<br>Printed Name  | st of Materials Signature   |                           |                            |                                |   | Month Day Year            |
| 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatmer applicable laws, regulations, permits and licens | es on the dates listed above.   |                           |                            |                                | as managed i  | n compliance with all     |
| 20. Facility Owner or Operator: Certification o Printed Name White-TREATMENT, STORAGE, DISPOSAL FACI   | Signature   |                           | nis manifes                |                                | llow- GENERA  | Month Day Year            |

Pink- FACILITY USE ONLY



LD% Qty UDM

Original Ticket# 1249671

| Customer Name Ticket Date Payment Type Manual Ticket Hauling Ticket Route State Waste Co Manifest Destination PD | 04/30/2018<br>Credit Accou<br>#<br>t# | 75200GAKRA GEDR<br>nt             |                      | COASTALGRADI<br>Volume       | NG  |
|--|---------------------------------------|-----------------------------------|----------------------|------------------------------|---|
| Profile<br>Generator   |                                       | (COAL ASH & CDA<br>WRCHAT GEORGIA |                      |                              |   |
|  | 18 11:45:26<br>18 11:45:26            |                                   | Operator<br>RB<br>RB | Gross<br>Tare<br>Net<br>Tons | 61040 lb<br>27040 lb<br>34000 lb<br>17.00 |
| Comments   |                                       |                                   |                      | 10112                        | 17.00                                     |

Rate Tax

white and

Total Tax Total Ficket

Amount

Origin

PORTW

mill fry .

COAL ASH & CDAL CO 100 17.00 Tons

Product



| NON-HAZARDOUS MANIFEST   | 1. Generator's U                               | S EPA ID No.   | Mani   | ifest Doc I | No.                         | 2. Page 1                      | of                           | 1           |             | 0     |
|--|--|--|--|-------------|-----------------------------|--------------------------------|------------------------------|-------------|-------------|-------|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404- |  | Generator's Site A<br>GEORGIA POW<br>155 CROSSGAT<br>PORT WENTWO | ER PLANT<br>E RD.                              | KRAFT       | ailing):                    |                                | MNA                          |             |             |       |
| 5. Transporter 1 Company Name  | 200-1302                                       | 6.   | US EPA ID I                                    | Number      |                             | Jawoil 182 Lost                |                              |             |             |       |
| 7. Transporter 2 Company Name  |  | 8.   | US EPA ID I                                    | Number      |                             | E. State Tr                    | ransporter's IC              | )           |             |       |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                  | te Address                                     | 10.  | US EPA ID                                      | Number      |                             |                                |                              | 912-9       | 27-611      | 3     |
| 11. Description of Waste Materials   | _  | - Inches   | n'   |             | ontainers                   |                                |                              | I Mi        | sc. Commen  | ats   |
| a. COAL ASH& COAL CONTAIN  |  |  | 0  | 35          | Туре                        | Quantity                       | WLJ VOI.                     |             |             |       |
| ь.   |  |  |  |             |                             |                                |                              |             |             |       |
|  | sama mustils #                                 |  |  |             |                             |                                |                              |             |             |       |
| c.   | WM Profile #                                   |  |  |             |                             |                                |                              |             |             |       |
|  |  |  |  |             |                             |                                |                              |             |             |       |
| d.   | WM Profile #                                   |  |  |             |                             |                                |                              |             |             |       |
|  |  |  |  |             |                             |                                |                              |             |             |       |
|  | WM Profile #                                   |  |  | V D:        |                             |                                |                              |             |             |       |
| J. Additional Descriptions for Mat   | erials Listed Above                            |  |  | k. Dispo    | sal Location                |                                |                              |             |             |       |
|  |  |  |  | Cell        | 15                          | 79W                            | mil.                         | Level       | 1.01        | 1     |
| 15. Special Handling Instructions ar   | nd Additional Inform                           | ation  |  | Gild        | 100                         |                                |                              | U.E.        |             | elile |
| Purchase Order # GPC107602   | 102  | FMFR   | GENCY CON                                      | TACT / PH   | ONE NO                      |                                | -                            |             | -           |       |
| 16. GENERATOR'S CERTIFICATE:   | 233  |  |  |             |                             | -                              |                              |             |             |       |
| I hereby certify that the above-desc<br>accurately described, classified and<br>Printed Name                             | cribed materials are packaged and are in       | n proper condition   | tes as define<br>for transport<br>e "On behalf | ation acc   | Part 261 or<br>ording to ap | any applicabl<br>plicable regu | le state law, h<br>ilations. | ave been fu | ly and      | Year  |
| B. Filmonich   |  | 5  | F  |             |                             |                                |                              | L           | 21          | 118   |
| 17. Transporter 1 Acknowledgeme Printed Name   | nt of Receipt of Mat                           | erials<br>Signature  | 2 .  | -           |                             | -                              | -                            | Month       | Day         | Year  |
| Mark Clinia  |  | X /  | 1 11   | -           |                             |                                |                              | 110         | 25 30       | 4     |
| 18. Transporter 2 Acknowledgeme  | nt of Receipt of Mat                           |  |  |             |                             |                                |                              | Month       | Day         | Year  |
| Printed Name   |  | Signatur   | E  |             |                             |                                |                              | HUNG        | Day         | real  |
| 19. Certificate of Final Treatment/l<br>I certify, on behalf of the above list<br>applicable laws, regulations, permit   | ed treatment facility<br>ts and licenses on th | e dates listed above   | e  | _           |                             |                                | vas managed                  | n complian  | ce with all | 1     |
| 20. Facility Owner or Operator, Ce   | rtification of receipt                         |  | -  | vered by 1  | this manifes                | it.                            |                              | Mogth       | Day         | Year  |
|  |  |  |  |             |                             |                                |                              | moyer,      | - net       | 1     |
| Printed Name   | 1  | Signatur   | 1/   | 3           |                             |                                |                              | 4           | 30          | 1100  |



Original Ticket# 1249680

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Ticket Dake 04/30/2010 Vehicle 5306 Vehicle

\$ 10000 to the second

Payment Type Credit Account Container

Manual Ticket# Driver
Hauling Ticket# Check#

Route Billing # 0001037
State Waste Code Gen EPA ID NR

Manifest 6677666 Destination

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time Scale Operator Gross 58820 16 In 04/30/2018 11:58:06 Inbound 1 RB Tare 27500 lb Out 04/30/2018 11:58:06 RB Net 31320 lb Tons 15.66

Comments

Product LD% Qty DOM Rate Tax Amount Origin

1 COAL ASH & COAL CO 100 15.66 Tons PORTW

Total Tax

Africe



| NON-HAZARDOUS MANIFEST   | 1. Generator's US                              | EPA ID No.   | Manifest Doc   | No.               | 2. Page 1             | of  | 1/                          | . /         |      |
|--|--|--|----------------|-------------------|-----------------------|---|-----------------------------|-------------|------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                  | BIN#10221 1                                    | enerator's Site Address<br>SEORGIA POWER PL<br>.55 CROSSGATE RD.<br>PORT WENTWORTH | ANT KRAFT      | nailing);         |                       | MNA   |                             |             |      |
|  | 06-1365  | N-10   | A ID Number    |                   |                       | ere-  | -                           |             |      |
| 7. Transporter 2 Company Name  | soft 1   | 8. US EP   | A ID Number    |                   |                       | B. State Generator's ID  Fransporter's ID  Fransporter's ID  Fracility ID  Facility Phone  14. Unit Wt./vol.  1. Misc. Comments  Month Day  Month Day |                             |             |      |
| 9. Designated Facility Name and Site   | Addrace  | 10. USE  | PA ID Number   |                   |                       |   | D                           |             |      |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD   | : Address                                      | 10.  | PA ID INDINE   |                   | G. State F.           |   | 912-9                       | 27-611      | 3    |
| Savannah, GA 31419  11. Description of Waste Materials   |  |  | 12. Co         | ontainers<br>Type | 13. Total<br>Quantity |   | l. M                        | isc. Commen | ts   |
| a. COAL ASH& COAL CONTAN   | IINATED WASTE                                  |  | No.            | DT                | 17                    | , 701   |                             |             |      |
| b. WM Profile  |  | RA   |                |                   |                       |   |                             |             |      |
| c.   | VM Profile #                                   |  |                |                   |                       |   |                             |             |      |
| d.   |  |  |                |                   |                       |   |                             |             |      |
| J. Additional Descriptions for Mate  | VM Profile #<br>rials Listed Above             |  | K. Dispo       | sal Location      | 675                   | <u></u>   | , Level,                    | 37 (        | -(   |
| 15. Special Handling Instructions and  | d Additional Informa                           | tion   | Grid           |                   |                       |   |                             | ps.         |      |
| Purchase Order # GPC107602:  16. GENERATOR'S CERTIFICATE:  Liberally cartify that the above description                  |  |  | CONTACT / PH   |                   | anv applicabl         | e state law. h  | ave been fu                 | llv and     |      |
| accurately described, classified and printed Name  | packaged and are in p                          | oroper condition for tran<br>Signature "On b                                       | sportation acc | ording to ap      | plicable regu         | lations.  | 450                         |             | Year |
| 17. Transporter 1 Acknowledgemen Printed Name  18. Transporter 2 Acknowledgemen  | 41-1   | Signature  | 4              |                   | ),                    |   | Month                       | Day         | Year |
| Printed Name   |  | Signature  |                | al                |                       |   | Level  Nonth Day  Month Day |             | Year |
| 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits | d treatment facility, t<br>and licenses on the | dates listed above.  |                |                   |                       | as managed  | in complian                 | ce with all |      |
| 20. Facility Owner or Operator: Cer<br>Printed Name  | tification of receipt o                        | f non-hazardous materia  | als covered by | this manifes      | t.                    |   | Monthy                      | Day Day     | Year |

White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue-GENERATOR #2 COPY Pink- FACILITY USE ONLY



- - -

Original Ticket# 1249681

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Manifest 6677667

In 04/30/2018 12:00:00

Out 04/30/2018 12:00:00

Destination

PO

Profile

Time

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale

Inbound 1

Operator

RB RB

Gross Tare

55920 1b 25240 lb

Net

30680 1b 15.34

Tons

Comments

Product

403WM

LD% Qty UDM

Rate

Vehicle# L07

Billing # 0001037 Gen EPA ID NR

Container

Driver

Check#

Тах

Amount

Origin

**PORTW** 

COAL ASH & COAL CO 100

15.34 Tons

Total Tax fokat ficket



|                             | NON-HAZARDOUS MANIFEST   | 1, Generator's l                           | US EPA ID No<br>N / A | ).  | Manifest Doc N | No.          | 2. Page 1  | of  | 11           | LE L        |
|-----------------------------|--|--|-----------------------|---|----------------|--------------|--|---|--------------|-------------|
| GI<br>24<br>A               | Generator's Mailing Address:<br>EORGIA POWER<br>41 RALPH MCGILL BLVD NE,<br>TLANTA, GA 30308-3374<br>Generator's Phone 404-5 | BIN#10221                                  | GEORGIA<br>155 CRO    | 's Site Address (<br>A POWER PLA<br>SSGATE RD.<br>ENTWORTH, | NT KRAFT       | ailing);     |  | MNA   |              |             |
| 5.                          | Transporter 1 Company Name Transporter 2 Company Name  | 1 1, 1                                     | 6.                    |   | ID Number      |              | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID F. Transporter's Phone G. State Facility ID H. State Facility Phone 912-927-6113  13. Total Quantity Wt./Vol. I. Misc. Comments |   |              |             |
| 30                          | Designated Facility Name and Site UPERIOR LANDFILL 001 LITTLE NECK ROAD  | e Address                                  | 10.                   | US EP   | A ID Number    |              | F. Transpo   | B. State Generator's ID  ansporter's ID ansporter's Phone  ate Transporter's ID ansporter's Phone  ate Facility ID ate Facility Phone  114. Unit Wt./Vol.  Level  Level | 27-6113      |             |
| 11                          | avannah, GA 31419  L. Description of Waste Materials   |  |                       |   |                | ntainers     |  |   | L Mir        | c. Comments |
| 9                           | COAL ASH& COAL CONTAN  |  |                       |   | No.            | Туре         | Quantity   | Wt./Vol.  |              |             |
| R<br>A b.<br>T<br>O<br>R c. |  | # 375200GA                                 | KRA                   |   |                |              |  |   |              |             |
|                             |  | WM Profile #                               |                       |   |                |              |  |   |              |             |
| d.                          |  | WM Profile #                               |                       |   |                |              |  | Carlo   |              |             |
| J.                          | Additional Descriptions for Mate   | erials Listed Above                        |                       |   | Cell<br>Grid   | sal Location | 296  | Jail.   | Level        | 115         |
| 15                          | 5. Special Handling Instructions an  | d Additional Inform                        | nation                |   |                |              |  |   |              |             |
| 16                          | urchase Order # GPC107602  5. GENERATOR'S CERTIFICATE: hereby certify that the above-descr                                   | ribed materials are                        | not hazardo           | ous wastes as de  | CONTACT / PH   | Part 261 or  | any applicabl  | le state law, h   | ave been ful | ly and      |
| Pr                          | curately described, classified and rinted Name 7. Transporter 1 Acknowledgemen   | packaged and are i                         | in proper co          | ndition for trans<br>ignature "On be                        | portation acco | ording to ap | plicable regu  | lations.  | , ,          |             |
| R<br>A<br>N                 | Printed Name   | oll.                                       | S                     | ignature  | elk            | 2            |  |   | Month        | Day Ye      |
| O 18<br>T<br>E<br>R         | B. Transporter 2 Acknowledgemer<br>Printed Name  | or Receipt of Ma                           |                       | iignature   |                |              |  |   | Month        | Day Ye      |
| f I c                       | pplicable laws, regulations, permit  | d treatment facility<br>and licenses on th | he dates liste        | ed above.   |                |              |  | vas managed i   | in complianc | e with all  |
| 7 20                        | O. Facility Owner or Operator; Cer<br>Printed Name   | tification of receip                       |                       | ardous material   | s covered by t | his manifes  | t.   |   | Month        | Day Ye      |

Pink- FACILITY USE ONLY

Original Ticket# 1249691

Volume

Customer Name GEORGIAPOWE3752006AKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677668

Destination

PO

Time

375200GAKRA (CDAL ASH & CDAL CONTAMINATED WASTE)

Profile 3752006AKRA (COAL ASH & COAL CONTAMINATED WASTE Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Out 04/30/2018 12:24:52

Scale

In 04/30/2018 12:24:52 Inbound 1

Operator LBEJARAN

LBEJARAN

Gross Tare

57740 1b 24080 15 3366Ø 1b

Net Tons 16.83

Comments

Product

LD%

Qty

HOM

Rate

Vehicle# 5307

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Tax

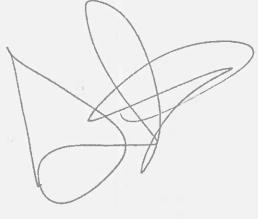
Amount

Origin

1 COAL ASH & COAL CD 100

16.83 Tons

PORTH



Total Tax Total Ticket



| NON-HAZARDOUS MANIFEST  | 1. Generator's US<br>N                       | EPA ID No.   | Manifest Doc No.               |  | 2. Page 1 (             | of                          | 11  | . 26        | -,   |
|---|--|--|--------------------------------|--|-------------------------|-----------------------------|---|-------------|------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, E<br>ATLANTA, GA 30308-3374 | BIN#10221 1                                  | Generator's Site Address<br>GEORGIA POWER PLA<br>SS CROSSGATE RD.<br>PORT WENTWORTH, | ANT KRAFT                      |  |                         | MNA                         | -   |             |      |
| 4. Generator's Phone 404-50 5. Transporter 1 Company Name 7. Transporter 2 Company Name                   | 06-1365                                      |  | A ID Number                    | C. State Transporter's ID D. Transporter's Phone |                         |                             | B. State Generator's ID  Transporter's ID porter's Phone  Transporter's ID porter's Phone  Facility ID Facility Phone  14. Unit Wt./vol.  Level  Month Day  Month Day |             |      |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | Address                                      | 10. US E   | PA ID Number                   |  | G. State F              | acility ID                  | 912-9   | 27-611      |      |
| G 11. Description of Waste Materials  |  |  | 12. Container                  | ype  | 13. Total<br>Quantity   |                             | l. M  | isc. Commen | ls   |
| a. COAL ASH& COAL CONTAM  |  |  | 153071                         | 5  | 17                      |                             |   |             |      |
| R WM Profile  | # 375200GAKR                                 | RA   |                                | 101  |                         |                             |   |             | -    |
| T   | M Profile #                                  |  |                                |  |                         |                             |   |             |      |
|   | M Profile #                                  |  |                                | -12  |                         |                             |   | - 5         |      |
| d.  |  |  |                                |  |                         |                             |   |             |      |
| Additional Descriptions for Mater   | M Profile #<br>ials Listed Above             |  | K. Disposal Lo<br>Cell<br>Grid | cation   |                         | wx                          | Level   | 1/          | 1.0  |
| 15. Special Handling Instructions and   | Additional Informa                           | tion   |                                | c  | 0                       |                             | , 0   | 0           | - 00 |
| Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE:   | 3  | EMERGENCY  | CONTACT / PHONE                | NO.:   |                         |                             |   |             |      |
| I hereby certify that the above-descrit<br>accurately described, classified and pa<br>Printed Name        | bed materials are no<br>ackaged and are in p | ot hazardous wastes as de<br>proper condition for trans<br>Signature "On be          | portation according            | 61 or any<br>to appli                            | applicabl<br>cable regu | e state law, ha<br>lations. | Month   |             | Year |
| 1 17. Transporter 1 Acknowledgement   | of Receipt of Mater                          | ials   |                                |  |                         |                             |   |             | 1    |
| Printed Name  |  | Signature  | 1. 1. 1.                       | 11   |                         |                             | Month   | Day         | Year |
| 7 Printed Name  | of Receipt of Mater                          | Signature  | ,                              |  |                         |                             | Month   | Day         | Year |
| 19. Certificate of Final Treatment/Dis  | treatment facility, t<br>and licenses on the | dates listed above.  |                                |  | d waste w               | ras managed ir              | ı compliand   | ce with all |      |
| 20. Facility Owner or Operator: Celtity Printed Name  | fication of receipt o                        | f non-hazardous materia  | s covered by this m            | anifest.   |                         |                             | Month   | Day         | Year |

White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold-TRANSPORTER #1 COPY



Original Ticket# 1249726

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL

Ticket Date 04/30/2018 Payment Type Credit Account

Manual Ticket#

Hauling Ticket# Route

State Waste Code Manifest 6677669

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Time In 04/30/2018 13:19:27 Out 04/30/2018 13:19:27

Scale Inbound 1

LD% Qty

rb rb

UOM

Operator

Vehicle# 1

Billing #

Gen EPA ID NR

Rate

0001037

Container

Driver

Check#

Gross Tare

Net

Tons

29480 lb 36860 1b 18.43

66340 1b

Comments

Freduct

COAL ASH & COAL CO 100 18.43 Tons

Тах Amount Origin

PORTW

Total Tax fokal ficket



# MANUEL NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | 1, Generator's                             | US EPA ID No. N / A   | Manifest Doc Ne  | D.             | 2. Page 1   | of                             | 1)                  | . 4        | 1    |
|--|--|---|------------------|----------------|---|--------------------------------|---------------------|------------|------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                  | BIN#10221                                  | Generator's Site Address (<br>GEORGIA POWER PLA<br>155 CROSSGATE RD.<br>PORT WENTWORTH, | NT KRAFT         | ling):         |   | st Number<br>MNA<br>B. State G | 6677<br>Generator's |            | 1    |
| 4. Generator's Phone 404-5   | 506-1365                                   |   |                  |                |   |                                |                     |            |      |
| 5. Transporter 1 Company Name  | 12.1.                                      |   | ID Number        |                | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID F. Transporter's Phone  G. State Facility ID H. State Facility Phone  912-927-6113  13. Total Quantity Wt./Vol. I. Misc. Comments |                                |                     |            |      |
| 7. Transporter 2 Company Name  |  | 8. US EPA ID Number   |                  |                |   |                                | )                   |            |      |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL   | e Address                                  | 10. US EP   | A ID Number      |                | G. State F  | acility ID                     | -                   |            |      |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |  |   |                  |                | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID F. Transporter's Phone  G. State Facility ID H. State Facility Phone  13. Total Quantity Wt./Vol.  1. Misc. Commo                 |                                |                     | 27-611     | 3    |
| 11. Description of Waste Materials   |  |   | 12. Cont         | ainers<br>Type | -   |                                | I. Mi               | sc. Commer | its  |
| a. COAL ASH& COAL CONTAN   | INATED WAS                                 | TE  | 11-1-1           | 181            | 17  |                                |                     |            |      |
| b. WM Profile  | ≇# 375200GA                                | AKRA  |                  |                |   |                                |                     | -          | 1    |
|  | WM Profile #                               |   |                  |                |   |                                |                     |            |      |
| c.   | WM Profile #                               |   |                  |                |   |                                |                     |            |      |
| d.   | THE PROPERTY OF                            |   |                  |                |   |                                |                     |            |      |
| J. Additional Descriptions for Mate  | WM Profile #                               |   | K. Disposa       | Location       |   |                                | -                   |            |      |
| J. Additional Descriptions for space   | enais disted Above                         | 34  | Cell<br>Grid     | LOCATION       | 1375  | 12.1                           | Level               | 6          |      |
| 15. Special Handling Instructions an   | d Additional Infor                         | mation  |                  | ( -            | 114   | 31                             |                     |            |      |
| Purchase Order # GPC107602   | 93   | EMERGENCY (   | ONTACT / PHO     | NE NO.:        |   |                                |                     |            |      |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr   | ribed materials are                        | e not hazardous wastes as de  | fined by CFR Pa  | rt 261 or      | any applicabl   | e state law, h                 | ave been ful        | ly and     |      |
| accurately described, classified and Printed Name  |  | Signature "On be  |                  | oing to at     | opiicable regu  | lations.                       | Month               | Day        | Year |
| 17. Transporter 1 Acknowledgement Printed Name   | nt of Receipt of Ma                        | aterials Signature  | V                | -10            | 1   |                                | Month               | Day        | Year |
| 18. Transporter 2 Acknowledgemen<br>Printed Name   | nt of Receipt of Ma                        | sterials Signature  |                  |                |   |                                | Month               | Day        | Year |
| 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits | d treatment facilit<br>s and licenses on t | he dates listed above.  |                  |                |   | ras managed i                  | n compliant         | e with all |      |
| 20. Facility Owner or Operator: Cer<br>Printed Name  | tification of receip                       | Signature   | s covered by thi | s manires      | ol.   |                                | Month               | Day        | Year |

Pink- FACILITY USE ONLY



Original Ticket# 1249729

PORTW

| Customer Name GEORGIAPOWE3752006 Ticket Date 04/30/2018 Payment Type Credit Account Manual Ticket# Hauling Ticket# Route | AKRA GEORG) |             | COASTALGRADING<br>C25<br>0001037 | COASTALGRADI<br>Volume       | NG  |
|--|-------------|-------------|----------------------------------|------------------------------|---|
| State Waste Code   |             | Gen EPA II  | ) NR                             |                              |   |
| Manifest 6677670   |             |             |                                  |                              |   |
| Destination  |             |             |                                  |                              |   |
| PO   | į.          |             |                                  |                              |   |
| Profile 375200GAKRA (COAL  | ASH & COAL  | CONTAMINATI | ED WASTE)                        |                              | 4   |
| Generator 125-GEORGIAPWRCHAT   | GEORGIA PO  | JWER - PLAN | T KRAFT                          |                              |   |
| Time Scal In 04/30/2018 13:23:34 Inbou Out 04/30/2018 13:23:34 Comments  |             |             |                                  | Gross<br>Tare<br>Net<br>Tons | 61860 lb<br>27040 lb<br>34820 lb<br>17.41 |
|  |             |             |                                  |                              |   |
| Product LD%  | Qty UO      | 1 Rate      | Tax                              | Asount                       | Origin                                    |

Total Tax
Total Ticket

- mich from

1 COAL ASH & COAL CO 100 17.41 Tons



## WATER MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's                           |   | Manifest Doc I            | Vo.              | 2. Page 1             | of  | 1-11   |             |      |  |
|---|--|---|---------------------------|------------------|-----------------------|---|--|-------------|------|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5 | BIN#10221                                | N / A  Generator's Site Address GEORGIA POWER PL 155 CROSSGATE RD. PORT WENTWORTH | ANT KRAFT                 | ailing):         | 1                     | st Number<br>MNA<br>B. State (  |  |             |      |  |
| 5. Transporter 1 Company Name  7. Transporter 2 Company Name  |  |   | A ID Number               |                  | D. Transp             | ransporter's II<br>orter's Phone<br>ransporter's II                     |  | a           |      |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419                           | e Address                                | 10. US E  | PA ID Number              |                  | G. State F            |   | B. State Generator's ID  sporter's ID  sporter's ID  r's Phone  ity ID  ity Phone  14. Unit Wt /Vol.  Level  ate law, have been fully and ons.  Month Day  Month Day | 3           |      |  |
| 11. Description of Waste Materials  |  |   | 12. Co                    | ntainers<br>Type | 13. Total<br>Quantity |   | L M  | lsc. Commen | its  |  |
| a. COAL ASH& COAL CONTAN  | INATED WAS                               |   | 1.5                       | UT               | 17                    |   | one 912-927-6113   |             |      |  |
| c.  | WM Profile #                             |   |                           |                  |                       |   |  |             |      |  |
| d.  | WM Profile #                             |   |                           |                  |                       |   | =  |             | 1    |  |
| J. Additional Descriptions for Mate   | WM Profile #<br>Prials Listed Above      | B   | K. Dispos<br>Cell<br>Grid | al Location      | V376V                 | 0179  | Level  | 6           | 5    |  |
| 15. Special Handling Instructions an  | d Additional Infor                       | mation  | Gild                      |                  | 57                    | 1650  |  |             |      |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descri                           | ribed materials are                      | e not hazardous wastes as c   | CONTACT / PH              | art 261 or a     | any applicabl         | e state law, h  | ave been fu  | lly and     |      |  |
| Printed Name  |  | Signature "On b   | ehalf of"                 | rung to ap       | piicabie regu         | ilations.   | Month  | Day         | Year |  |
| 17. Transporter 1 Acknowledgemen  | 41. V                                    | Signature   | J                         |                  |                       |   | -  |             | Year |  |
| 1B. Transporter 2 Acknowledgemen Printed Name   | it of Receipt of Ma                      | Signature   |                           |                  |                       |   | Month  | Day         | Year |  |
| 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits  | d treatment facilis<br>and licenses on t | he dates listed above.  |                           |                  |                       | as managed i  | n compliano  | e with all  |      |  |
| 20. Facility Owner or Operator: Cer<br>Printed Name   | tification of receip                     | ot of non-hazardous materia<br>Signature  | als covered by the        | nis manifes      |                       | 14. Unit Wt /Vol.  Level  Level  Level  Month Day  Month Day  Month Day |  |             | Ypar |  |

White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue-GENERATOR #2 COPY

Pink- FACILITY USE ONLY

**Gold-TRANSPORTER #1 COPY** 

Yellow-GENERATOR #1 COPY



Original Ticket# 1249732

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 04/30/2018 Vehicle# C26 Volume Payment Type Credit Account Container Manual Ticket# Driver Hauling Ticket# Check# Rouber Billing # 9001037 Gen EPA ID NR State Waste Code Manifest 6677671 Destination PO Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

|     | Time                | Scale     | Operator | Gross | 61340 lb |
|-----|---------------------|-----------|----------|-------|----------|
| In  | 04/30/2018 13:28:04 | Inbound 1 | rb       | Tare  | 25980 16 |
| Out | 04/30/2018 13:28:04 |           | rb       | Net   | 35360 15 |
|     |                     |           |          | Tons  | 17.68    |
| -   | 4                   |           |          |       |          |

Comments

| Pro | duct       |      | LD%    | Qty   | MOU  | Rate | Тах | Amount | Origin |   |
|-----|------------|------|--------|-------|------|------|-----|--------|--------|---|
|     |            |      |        |       |      |      |     |        |        | - |
| 1   | COAL ASH & | COAL | CD 100 | 17.68 | Tons |      |     |        | PORTW  |   |

James 1

Total Tax Total Ticket



| NON HAZADDONG MANUETET  | 1. Generator's          | S US EPA ID No.  | Ma  | nifest Doc N   | Vo.         | 2. Page 1     | of                               | 9.0                 |              | de   |
|---|-------------------------|------------------|---|--|-------------|---------------|----------------------------------|---------------------|--------------|------|
| NON-HAZARDOUS MANIFEST  |                         | N/A              |   |  |             |               |                                  |                     | 204/         |      |
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE ATLANTA, GA 30308-3374 4. Generator's Phone 404- | , BIN#10221<br>506-1365 | GEORGIA P        | Site Address (If di<br>POWER PLAN<br>GGATE RD.<br>ITWORTH, GA | TKRAFT   | ailing):    |               | st Number<br>MNA<br>B. State G   | 6677<br>Generator's |              |      |
| 5. Transporter 1 Company Name   | 300 1303                | 6.               | US EPA ID   | Number   |             |               |                                  |                     |              |      |
| 11 1 1  | . 1                     |                  |   |  |             |               | ransporter's IC                  | )                   |              |      |
| (2 00 1 C)  | 1. 1. 1                 |                  |   |  |             | D. Transp     | orter's Phone                    |                     |              |      |
| 7. Transporter 2 Company Name   | 1                       | 8.               | US EPA ID   |  |             |               | ransporter's IC<br>orter's Phone |                     |              |      |
| 9. Designated Facility Name and Sit SUPERIOR LANDFILL   | te Address              | 10.              | US EPA I  | D Number   |             | G. State F    | acility ID                       |                     | COL I        |      |
| 3001 LITTLE NECK ROAD   |                         |                  |   |  |             | H. State F    | acility Phone                    | 912-9               | 27-6113      |      |
| Savannah, GA 31419  |                         |                  |   |  |             |               |                                  |                     |              |      |
|   |                         |                  |   | 12. Cor  | ntainers    | 13. Total     | 14. Unit                         |                     |              |      |
| G 11. Description of Waste Materials  |                         |                  |   | No.  | Туре        | Quantity      | Wt./Vol.                         | I. Mt               | sc. Comments |      |
| a. COAL ASH& COAL CONTAINE  | MINATED WAS             | STE              | 0   | 25   | Di          | 17            |                                  |                     |              |      |
| WM Profil   | e# 375200G              | AKRA             | 100   |  |             |               |                                  |                     |              |      |
| b.  |                         |                  |   |  | 242         |               |                                  |                     |              |      |
|   |                         |                  |   |  |             |               |                                  |                     |              |      |
| 3   | WM Profile #            |                  |   | (Language of the Control of the Cont |             |               |                                  |                     |              |      |
| c.  |                         |                  |   |  |             |               |                                  |                     |              |      |
|   | WM Profile #            |                  |   | -  |             |               |                                  |                     |              | 100  |
| d.  | WIN FIDING W            |                  |   |  |             |               |                                  |                     |              |      |
|   |                         |                  |   |  |             |               |                                  |                     |              |      |
|   | WM Profile #            |                  |   |  |             |               | 6                                |                     |              | 245  |
| J. Additional Descriptions for Mat  |                         | re               |   | K. Dispos  | al Location |               |                                  |                     |              |      |
|   |                         |                  |   | - "  |             | 7.            | 24-1                             |                     |              |      |
|   |                         |                  |   | Cell<br>Grid   | - 1         | 100           | 17                               | Level               | 6)           |      |
| 15. Special Handling Instructions ar  | nd Additional Info      | rmation          |   | Gila   | -           | 1 A-1         | 131                              |                     | - 3          |      |
| 13. Special Handling matractions of   | ia radicalia ilila      | THE LIGHT        |   |  | C           |               |                                  |                     |              |      |
|   |                         |                  |   |  |             |               |                                  |                     |              |      |
| Purchase Order # GPC107602  | 293                     | E                | MERGENCY CO   | VTACT / PHO  | ONE NO.:    |               |                                  |                     |              |      |
| 16. GENERATOR'S CERTIFICATE:  |                         |                  |   |  |             |               |                                  |                     |              |      |
| I hereby certify that the above-desc  |                         |                  |   |  |             |               |                                  | ve been ful         | ly and       |      |
| accurately described, classified and  | packaged and are        | in proper condit | tion for transpor   | tation acco  | rding to ap | plicable regu | lations.                         | 1                   | 90           |      |
| Printed Name  | 1.                      | Sign             | ature "On behal   | f ot"  |             |               |                                  | Month               | Day          | Year |
| 17. Transporter 1 Acknowledgemen  | nt of Receipt of M      | aterials         |   |  | 0.0         |               |                                  | 1-7-1               |              |      |
|   | S. Hedelpt of It        |                  | ature ,   |  |             |               |                                  | Month               | Day          | Year |
| Printed Name  | X J.70 .                |                  | - Jane  |  |             |               |                                  | 4                   | 50 10        | 1-1  |
| 18. Transporter 2 Acknowledgemen  | nt of Receipt of M      | aterials         |   | -  |             | JC =          |                                  | 1                   |              |      |
| Printed Name  |                         | Sign             | nature  |  |             |               |                                  | Month               | Day          | Year |
| R   |                         |                  |   |  |             |               |                                  |                     |              |      |
| 19. Certificate of Final Treatment/L<br>I certify, on behalf of the above liste   | d treatment facili      |                  |   | edge, the ab   | ove-descri  | bed waste w   | as managed in                    | n complianc         | e with all   |      |
| applicable laws, regulations, permit  |                         |                  |   | uses II - ct   | .le         |               |                                  |                     |              |      |
| 20. Facility Owner or Operator: Ce  | rtification of recei    |                  |   | overed by th   | ns manifes  |               |                                  | Adams I             | d Day        | V    |
| Printed Name  | 10                      |                  | nature  | 10   |             |               |                                  | Month               | ) / t        | Year |
| White-TREATMENT, STORAGE, DIS   | POSAL FACILITY C        | OPY Blu          | e- GENERATOR  | #Z COPY  |             | Ye            | llow-GENERA                      | TOR #1 COP          | Y            |      |

Pink- FACILITY USE ONLY



Original Ticket# 1249752

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Vehicle# L07

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code Manifest 6677673

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 04/30/2018 13:52:28 Inbound 1 Dut 04/30/2018 13:52:28

Scale

rb rb

Operator

Container

Billing #

Gen EPA ID NR

Driver Check#

Gross Tare

25240 15 Net 27060 1b

Tons

13.53

52300 1b

Comments

Product

LD%

Qty

MOU

Rate

Tax

0001037

Amount

Origin

COAL ASH & COAL CO 100

13.53 Tons

PORTW

Total Tax Total Ticket



### MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's                         | US EPA ID No.   | Manifest Doc I                        | No.                        | 2. Page 1 o                     | of                              | 10          | 14          |      |  |
|---|--|---|---------------------------------------|----------------------------|---------------------------------|---------------------------------|-------------|-------------|------|--|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE  | , BIN#10221                            | Generator's Site Addr<br>GEORGIA POWER<br>155 CROSSGATE R | PLANT KRAFT                           | ailing);                   |                                 | st Number MNA B. State G        | 6677        |             |      |  |
| ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-   | 506-1365                               | PORT WENTWORT   | TH, GA 31407                          |                            |                                 |                                 |             |             |      |  |
| 5. Transporter 1 Company Name   |  | 6. US   | EPA ID Number                         |                            |                                 | ansporter's II<br>orter's Phone | )           |             |      |  |
| 7. Transporter 2 Company Name   |  | 8. US   | EPA ID Number                         |                            |                                 | ansporter's IC<br>orter's Phone | )           |             |      |  |
| 9. Designated Facility Name and Sit SUPERIOR LANDFILL   | te Address                             | 10. U   | S EPA ID Number                       |                            | acility ID                      | 0                               |             |             |      |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |  |   |                                       |                            | H. State F                      | acility Phone                   | 912-9       | 2-927-6113  |      |  |
| G 11. Description of Waste Materials  |  |   | 12. Co<br>No.                         | ntainers<br>Type           | 13. Total<br>Quantity           | 14. Unit<br>Wt./Vol.            | I-MI        | isc. Commen | ts   |  |
| a. COAL ASH& COAL CONTAINE  |  |   | 2-17                                  | 1-7                        | 17                              |                                 |             |             |      |  |
| WM Profil   | le# 375200G/                           | AKRA  |                                       |                            |                                 |                                 |             |             | -    |  |
| T<br>O<br>R   | WM Profile #                           |   |                                       |                            |                                 |                                 |             |             |      |  |
| C.  | WM Profile #                           |   |                                       |                            |                                 |                                 |             |             |      |  |
| d.  |  |   |                                       |                            |                                 |                                 |             |             |      |  |
| J. Additional Descriptions for Mat  | WM Profile #<br>erials Listed Abov     | e   | K. Dispos                             | sal Location               | 152                             | 174                             | Level       | 6           | _    |  |
| 15. Special Handling Instructions an  | nd Additional Info                     | mation  | Gild                                  | -                          | Jun                             | ( ( ) (                         |             |             |      |  |
| Purchase Order # GPC107602  | 293                                    | EMERGEN   | CY CONTACT / PH                       | ONE NO.:                   |                                 |                                 |             |             |      |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descaccurately described, classified and                  | ribed materials ar<br>packaged and are | e not hazardous wastes a<br>in proper condition for t     | is defined by CFR Fransportation acco | Part 261 or<br>ording to a | any applicabl<br>pplicable regu | e state law, h                  | ave been fu | lly and     |      |  |
| Printed Name  |  | Signature "O  | n behalf of"                          |                            |                                 |                                 | Month       | Day         | Year |  |
| 17. Transporter 1 Acknowledgement   | nt of Receipt of M                     | Signature   | 1                                     |                            |                                 |                                 | Month       | Day         | Year |  |
| 18. Transporter 2 Acknowledgeme   | nt of Receipt of M                     | aterials Signature  |                                       |                            |                                 |                                 | Month       | Day         | Year |  |
| 19. Certificate of Final Treatment/U<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit | ed treatment facili                    | the dates listed above.                                   |                                       | A                          |                                 | as managed i                    | n compliand | e with all  |      |  |
| 20. Facility Owner or Operator: Ce<br>Printed Name  | rtification of recei                   | pt of non-hazardous mat<br>Signature                      | erials covered by t                   | his manife:                | st.                             |                                 | Month       | pry         | Year |  |

White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue-GENERATOR #2 COPY Pink- FACILITY USE ONLY

Gold-TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY



Original Ticket# 1249759

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Manifest 6677672

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale In 04/30/2018 14:00:49

Inbound 1

rb rb

Operator

Gross Tare

27500 lb Net 30000 1b 15.00

Tons

Product

Comments

LD%

Qty

MOU

Rate

Vehicle# 5306

Container

Billing #

Gen EPA ID NR

Driver Check#

Тах

0001037

Amount

57500 lb

1 COAL ASH & COAL CO 100

But 04/30/2018 14:00:49

15.00 Tons

PORTW

Total Tax Total Ticket



# WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  1. Generate  | or's US EPA ID No.                        | Manifest Doc No.               | 2. Page 1                     | of   | 1                         |
|--|---|--------------------------------|-------------------------------|--|---------------------------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, BIN#10221<br>ATLANTA, GA 30308-3374  | Generator's Site Address GEORGIA POWER PL | ANT KRAFT                      |                               | st Number<br>MNA<br>B. State                                       | 6677672<br>Generator's ID |
| 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name  7. Transporter 2 Company Name  | -4  | A ID Number                    | D. Transp                     | ransporter's I<br>orter's Phone<br>ransporter's I<br>orter's Phone |                           |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10. US E                                  | PA ID Number                   | G. State F                    |  | 912-927-6113              |
| a. COAL ASH& COAL CONTAMINATED W.  WM Profile # 375200   |   | No.                            | rs 13. Total<br>Type Quantity | 14. Unit<br>Wt./Vol.   | I. Misc. Comments         |
| b.  WM Profile # 375200  WM Profile #  | NATION                                    |                                |                               |  |                           |
| d.  WM Profile #   |   |                                |                               |  |                           |
| J. Additional Descriptions for Materials Listed Al   | pove                                      | K. Disposal Lo<br>Cell<br>Grid | Cation                        | 2:29   | Level   (                 |
| 15. Special Handling Instructions and Additional In  | nformation                                |                                | しくつ                           | 165  |                           |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described material accurately described, classified and packaged and Printed Name   | s are not hazardous wastes as c           | sportation accordin            | 261 or any applicab           | le state law, hulations.   | Month Day Year            |
| 17. Transporter 1 Acknowledgement of Receipt of Printed Name  18. Transporter 2 Acknowledgement of Receipt of Printed Name   | Signature                                 | X                              |                               |  | Month Day Year            |
| 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment for applicable laws, regulations, permits and licenses 20. Facility Owner or Operator: Certification of response Printed Name | on the dates listed above.                |                                |                               | was managed  | in compliance with all    |

White-TREATMENT, STORAGE, I

Pink- FACILITY USE ONLY



Original Ticket# 1249780

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket# Route

State Waste Code

Time

Manifest 6677674

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Generator

In 04/30/2018 14:26:16 Dut 04/30/2018 14:26:16 Scale

Inbound 1

Operator LBEJARAN

**LBEJARAN** 

Gross Tare

24080 15 Net 33820 1b 16.91 Tons

Comments

Product

403WM

LD% Qty UOM

Rate

Vehicle# 5307

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

Tax

Amount

Origin

57900 lb

1 COAL ASH & COAL CO 100 16.91 Tons

PORTW

Total Tax Inhat fleket



# WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | 1. Generator's US  | S EPA ID No. N   | lanifest Doc No.             | 2. Page 1 c        | of                              | 1                   | 2             | ,    |
|--|--|--|------------------------------|--------------------|---------------------------------|---------------------|---------------|------|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5          | BIN#10221  | Generator's Site Address (If<br>GEORGIA POWER PLAI<br>155 CROSSGATE RD.<br>PORT WENTWORTH, G | NT KRAFT                     | A. Manifes         | MNA                             | 6677<br>Generator's |               |      |
| 5. Transporter 1 Company Name  | 00-1303  | 6. US EPA  | D Number                     |                    | ansporter's li                  | 0                   |               |      |
| 7. Transporter 2 Company Name  |  | 8. US EPA  | ID Number                    |                    | ansporter's II<br>orter's Phone | )                   |               |      |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                           | e Address  | 10. US EPA   | ID Number                    | G. State Fa        | acility ID<br>acility Phone     | 912-9               | 27-6113       |      |
| 11. Description of Waste Materials   | -  | - 1  | 12. Containers No. Type      | 13. Total Quantity | 14. Unit<br>Wt /Vol.            | L M                 | lisc. Comment | s    |
| a. COAL ASH& COAL CONTAN   |  |  | F30 D                        | 1 1-2              |                                 |                     |               |      |
| с.   | WM Profile #<br>WM Profile #   |  |                              |                    |                                 |                     |               |      |
|  | VM Profile#  |  |                              |                    |                                 |                     |               |      |
| J. Additional Descriptions for Mate  | rials Listed Above   |  | K. Disposal Loca  Cell  Grid | 1320               | 29                              | Level               | (0            | J    |
| 15. Special Handling Instructions an   | d Additional Inform  | ation  | ,                            | uh                 | 1731                            |                     |               |      |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descraccurately described, classified and | ibed materials are r   | not hazardous wastes as def<br>proper condition for transp                                   | ortation according to        | or any applicable  | e state law, h<br>lations.      | ave been fu         | illy and      |      |
| Printed Name   |  | Signature."On bel  | alf of"                      | 5                  |                                 | Month               | Day           | Year |
| 17. Transporter 1 Acknowledgemen Printed Name  18. Transporter 2 Acknowledgemen  | T-A-   | Signature  |                              |                    |                                 | Month               | Day           | Year |
| Printed Name   | t of Necespt of Wate   | Signature  |                              |                    |                                 | Month               | Day           | Year |
| 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits           | d treatment facility,  | , that to the best of my knove dates listed above.   | vledge, the above-de         | scribed waste w    | ras managed i                   | in complian         | ce with all   |      |
| 20. Facility Owner or Operator: Cer  |  |  | covered by this man          | ifest.             |                                 | Month               | Day           | Year |
| Printed Name  White- TREATMENT, STORAGE, DISF  | KIS TO SOLUTION SOLUT |  | b Ha CORY                    | Va                 | llow- GENER/                    | 14                  | 101           | 8    |

Pink-FACILITY USE ONLY



Original Ticket# 1249791

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677675

Destination

PO

Profile Generator

Time

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

04/30/2018 14:47:26

Scale Inbound 1

Operator LBEJARAN **LBEJARAN** 

Vehicle# 1

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

Gross Tare Net

Tons

29480 15 34280 1b 17.14

63760 1b

Comments

Product

LD% Qty UOM Rate

Tax

Amount Origin

1 COAL ASH & COAL CO 100 17.14 Tons

Out 04/30/2018 14:47:25

PORTW



| NON-HAZARDOUS MANIFEST  | 1. Generator's US  |  | anifest Doc No.   | 2. Page 1                       | of                               | 1111              |            |         |  |  |
|---|--|--|---|---------------------------------|----------------------------------|-------------------|------------|---------|--|--|
|   |  | / A  |   |                                 |                                  |                   | 1          |         |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,   | 0  | Generator's Site Address (16 d<br>GEORGIA POWER PLAN<br>155 CROSSGATE RD.  |   |                                 | MNA                              | 6677              |            |         |  |  |
| ATLANTA, GA 30308-3374  |  | PORT WENTWORTH, G.   | A 31407   |                                 | B. State (                       | Senerator's I     | D          |         |  |  |
| 5. Transporter 1 Company Name   |  | 6. US EPA II   | D Number  |                                 |                                  |                   |            |         |  |  |
| 11 111  | 1 /  |  |   |                                 | ransporter's II                  |                   | _          |         |  |  |
| 7. Transporter 2 Company Name   |  | 8. US EPA II   | D Number  | D. Transporter's Phone          |                                  |                   |            |         |  |  |
| 7. I ransporter 2 Company Name  | 1  | a. USEFAII   | ) Number  |                                 | ransporter's II<br>orter's Phone | )                 |            | _       |  |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL  | e Address  | 10. US EPA   | iD Number   | G. State F                      |                                  |                   |            |         |  |  |
| 3001 LITTLE NECK ROAD   |  |  |   | H. State F                      | acility Phone                    | 912-9             | 27-611     | 3       |  |  |
| Savannah, GA 31419  |  |  |   |                                 |                                  |                   |            |         |  |  |
| 11. Description of Waste Materials  |  |  | 12. Containers<br>No. Type                                    | 13. Total<br>Quantity           | 14. Unit<br>Wt./Vol.             | l. Mis            | sc. Commen | ts      |  |  |
| a. COAL ASH& COAL CONTAM  | INATED WASTE   |  |   | 1                               |                                  |                   |            |         |  |  |
|   |  |  | 25 por 1 11   | 17                              |                                  |                   |            |         |  |  |
| WM Profile  | # 375200GAKR   | RA .   |   |                                 |                                  |                   |            |         |  |  |
| b.  |  |  |   |                                 |                                  |                   |            |         |  |  |
|   |  |  |   |                                 |                                  |                   |            |         |  |  |
|   | WM Profile #   |  |   |                                 |                                  | -                 |            | _       |  |  |
| c.  |  |  |   |                                 |                                  |                   |            |         |  |  |
|   | WM Profile #   |  | 1   |                                 |                                  | -                 | 2000       | _       |  |  |
| d.  | NW Profile #   |  | 1   |                                 |                                  |                   |            |         |  |  |
|   |  |  |   |                                 |                                  |                   |            |         |  |  |
|   | WM Profile #   |  |   | 100000                          |                                  |                   |            | tion.   |  |  |
| J. Additional Descriptions for Mate   |  |  | K. Disposal Location  | n                               |                                  | -                 |            |         |  |  |
|   |  |  |   |                                 |                                  |                   |            |         |  |  |
|   |  |  | Cell Grid   | 11/1/                           | 100 11                           | Level )           | - 15       | -1      |  |  |
| age goods to a succession   | d Additional Informa   | tion   | I did U   | 11-11                           | 4 8 171                          | 1                 |            | 31      |  |  |
| US Special Handling Instructions an   |  |  |   |                                 |                                  |                   |            |         |  |  |
|   | 0.2  | ENAEDGENCY CC  | INTACT / DUCALE NO -  |                                 |                                  |                   |            | _       |  |  |
| 15. Special Handling Instructions and Purchase Order # GPC107602  | 93   | EMERGENCY CO   | ONTACT / PHONE NO.:   |                                 |                                  |                   |            |         |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:  |  |  |   | any annlicah                    | e state law. h                   | ave been ful      | lv and     |         |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr  | ribed materials are no   | ot hazardous wastes as defii   | ned by CFR Part 261 or  | any applicabl                   | e state law, h                   | ave been ful      | ly and     |         |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:  | ribed materials are no   | ot hazardous wastes as defii   | ned by CFR Part 261 or<br>ortation according to a             | any applicabl<br>pplicable regu | e state law, h<br>lations.       | ave been ful      | ly and     | Ye      |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descraccurately described, classified and printed Name   | ribed materials are no<br>packaged and are in p  | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha   | ned by CFR Part 261 or<br>ortation according to a             | any applicabl<br>pplicable regu | le state law, h                  | -                 |            | Ye /    |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described, classified and printed Name  17. Transporter 1 Acknowledgement  | ribed materials are no<br>packaged and are in p  | ot hazardous wastes as defii<br>proper condition for transpo<br>Signature "On beha<br>rials  | ned by CFR Part 261 or<br>ortation according to a             | any applicab<br>pplicable regu  | e state law, h<br>dations.       | Month             | Day        | /       |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descraccurately described, classified and printed Name   | ribed materials are no<br>packaged and are in p  | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha   | ned by CFR Part 261 or<br>ortation according to a             | any applicabl<br>pplicable regu | e state law, h<br>llations.      | -                 |            | /       |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described, classified and printed Name  17. Transporter 1 Acknowledgement Printed Name   | ribed materials are no<br>packaged and are in p<br>nt of Receipt of Mater  | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>rials<br>Signature   | ned by CFR Part 261 or<br>ortation according to a             | any applicabl<br>pplicable regu | e state law, h<br>dations.       | Month             | Day        | /       |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement  | ribed materials are no<br>packaged and are in p<br>nt of Receipt of Mater  | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>rials<br>Signature   | ned by CFR Part 261 or<br>ortation according to a             | any applicab<br>pplicable regu  | le state law, h                  | Month             | Day        | Ye /    |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described, classified and printed Name  17. Transporter 1 Acknowledgement Printed Name   | ribed materials are no<br>packaged and are in p<br>nt of Receipt of Mater  | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>rials<br>Signature   | ned by CFR Part 261 or<br>ortation according to a             | any applicabl<br>pplicable regu | e state law, h<br>llations.      | Month             | Day<br>Day | Ye /    |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  | ribed materials are no<br>packaged and are in p<br>nt of Receipt of Mater<br>nt of Receipt of Mater  | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>rials<br>Signature   | ned by CFR Part 261 or<br>ortation according to a             | any applicab<br>pplicable regu  | le state law, h                  | Month             | Day<br>Day | Yei     |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/D I certify, on behalf of the above lister                                       | ribed materials are no<br>packaged and are in p<br>at of Receipt of Mater<br>at of Receipt of Mater<br>disposal<br>ed treatment facility, t                          | ot hazardous wastes as define proper condition for transposition f | ned by CFR Part 261 or<br>ortation according to a<br>alf of"  | pplicable regu                  | elations.                        | Month Month Month | Day<br>Day | Ye      |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/D I certify, on behalf of the above listed applicable laws, regulations, permits | ribed materials are no<br>packaged and are in p<br>at of Receipt of Mater<br>at of Receipt of Mater<br>bisposal<br>and treatment facility, to<br>and licenses on the | ot hazardous wastes as define proper condition for transport of transport of the second signature. On behavior of the second of  | ned by CFR Part 261 or<br>pritation according to a<br>alf of" | pplicable regu                  | elations.                        | Month Month Month | Day<br>Day | Yes Yes |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/D I certify, on behalf of the above lister                                       | ribed materials are no<br>packaged and are in p<br>at of Receipt of Mater<br>at of Receipt of Mater<br>bisposal<br>and treatment facility, to<br>and licenses on the | ot hazardous wastes as define proper condition for transport of transport of the second signature. On behavior of the second of  | ned by CFR Part 261 or<br>pritation according to a<br>alf of" | pplicable regu                  | elations.                        | Month Month Month | Day<br>Day | Yes     |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1249795

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 04/30/2018 Vehicle# C25 Volume Payment Type Credit Account Container Manual Ticket# Driver Hauling Ticket# Check# Billing # Route 0001037 State Waste Code Gen EPA ID NR Manifest 6677676 Destination PD Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Generator Time Scale Operator Gross 63020 1b 04/30/2018 14:58:58 LBEJARAN Tare 27040 15 Inbound 1 Out 04/30/2018 14:58:58 LBEJARAN Net 35980 1b

Comments

Product LD% Qty UOM Rate Tax Amount Origin

1 COAL ASH & COAL CO 100 17.99 Tons PORTW

Total Tax -Total Ticket

Tons

michlen

23

17.99



| NON-HAZARDOUS MANIFEST   | 1. Generator's                           |                   | Ma                               | inifest Doc  | No.         | 2. Page 1              | of                               | 27          | /              |  |  |
|--|--|-------------------|----------------------------------|--------------|-------------|------------------------|----------------------------------|-------------|----------------|--|--|
|  |  | N/A               |                                  | -            |             |                        |                                  | CY          | 1              |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   |  | GEORGIA I         | Site Address (If d<br>POWER PLAN |              | ailing):    |                        | st Number                        | 6677        | 676            |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5  | BIN#10221<br>606-1365                    | PORT WEN          | SGATE RD.<br>NTWORTH, G          | A 31407      |             |                        | B. State (                       | Senerator's | ID             |  |  |
| 5. Transporter 1 Company Name  | 1303                                     | 6.                | US EPA IC                        | ) Number     | _           |                        |                                  | -           | -              |  |  |
| 1 1 1 1 7  | 7 /                                      |                   |                                  |              |             | C. State T             | ransporter's l                   | D           |                |  |  |
|  | 7. (4)                                   |                   |                                  |              |             | D. Transporter's Phone |                                  |             |                |  |  |
| 7. Transporter 2 Company Name  | 1 8                                      | 8.                | US EPA II                        | ) Number     |             |                        | ransporter's IC<br>orter's Phone | )           | ***            |  |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL   | Address                                  | 10.               | US EPA                           | ID Number    |             | G. State F             | acility ID                       |             |                |  |  |
| 3001 LITTLE NECK ROAD  |  |                   |                                  |              |             | H. State F             | acility Phone                    | 912-9       | 27-6113        |  |  |
| Savannah, GA 31419   |  |                   |                                  |              |             | 1                      |                                  |             |                |  |  |
|  | _  | i i               |                                  | 12. Co       | ntainers    | 13. Total              | 14. Unit                         | -           |                |  |  |
| 11. Description of Waste Materials   |  |                   |                                  | No.          | Туре        | Quantity               | Wt./Vol.                         | 1. IV       | lisc. Comments |  |  |
| a. COAL ASH& COAL CONTAN   | IINATED WAS                              | TE                | 1                                | 150          | Di          | 1-7                    |                                  |             |                |  |  |
| WM Profile   | # 375200GA                               | KDV               | 1                                | 1            | 12.1        | 1                      |                                  | -           |                |  |  |
| b.   | :# 3/J200GF                              | אוואר             | _                                |              |             | +                      |                                  |             |                |  |  |
|  |  |                   |                                  |              |             | 1                      |                                  |             |                |  |  |
|  | VM Profile #                             |                   |                                  |              |             |                        |                                  |             |                |  |  |
| c.   |  |                   |                                  |              |             |                        |                                  |             |                |  |  |
|  |  |                   |                                  |              |             |                        |                                  |             |                |  |  |
|  | VM Profile #                             |                   |                                  |              |             |                        |                                  |             |                |  |  |
| d.   |  | 45                |                                  |              |             |                        |                                  |             |                |  |  |
|  | VM Profile #                             |                   |                                  |              |             |                        |                                  |             | -              |  |  |
| J. Additional Descriptions for Mate  | rials Listed Above                       | •                 |                                  | K. Dispos    | al Location | n                      |                                  |             |                |  |  |
|  |  |                   |                                  | Cell A       | 17          | 1                      |                                  | Level       |                |  |  |
|  |  |                   |                                  | Grid /       |             | 1111                   | 4                                | 21/1        | 031            |  |  |
| 15. Special Handling Instructions and  | f Additional Infor                       | mation            |                                  |              |             |                        |                                  |             | 46             |  |  |
| Purchase Order # GPC107602   | 93                                       |                   | MERGENCY CO                      | NTACT / PH   | ONE NO.:    |                        |                                  |             |                |  |  |
| 16. GENERATOR'S CERTIFICATE:   |  |                   |                                  |              |             |                        |                                  |             |                |  |  |
| I hereby certify that the above-descr<br>accurately described, classified and p  |  | in proper condi   | tion for transpo                 | rtation acco |             |                        |                                  | ave been fu | lly and        |  |  |
| Printed Name   |  | Sign              | nature "On behal                 | f of"        |             |                        |                                  | Month       | Day            |  |  |
| 17. Transporter 1 Acknowledgemen   | of Possint of 14-                        | etorials          | 0 1                              |              |             | _                      |                                  | 1 '671      | 3              |  |  |
| 17. Transporter 1 Acknowledgemen Printed Name  | or neceipt of Ma                         |                   | nature                           |              |             |                        |                                  | Month       | Day            |  |  |
| Printed Ivanie   | 102.                                     | JIBII             | 1111                             | west         |             |                        |                                  | J           | Oay A          |  |  |
| 18. Transporter 2 Acknowledgemen   |  | terials           |                                  |              |             |                        |                                  |             | 3              |  |  |
| Printed Name   |  | Sigr              | nature                           |              |             |                        |                                  | Month       | Day            |  |  |
| 19. Certificate of Final Treatment/Di<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits<br>20. Facility Owner or Operator: Cert | l treatment facilit<br>and licenses on t | he dates listed a | above.                           |              |             |                        | ras managed i                    | n complian  | e with all     |  |  |
| Printed Name   | meadon of receip                         |                   | nature                           | veren by ti  | na maime:   | 74.                    |                                  | Month       | Pay            |  |  |
| , integration  | 3  | Jigi              |                                  | 11           | )           |                        |                                  | / /         | 2111           |  |  |
| White-TREATMENT, STORAGE, DISP   | DEAL EACILITY CO                         | NOV DIA           | re- GENERATOR                    | H2 CODY      | /           | Va                     | llow- GENERA                     | TOP #1 CD   | 2              |  |  |



Original Ticket# 1249802

| Cush seen Nees | CERTIFICATION          | proper confin  | COACTAL CRAPTIC | CONCTAL COORTING |
|----------------|------------------------|----------------|-----------------|------------------|
| Customer Name  | GEORGIAPOWE375200GAKRA | brukul Larrier | COASTALGRADING  | COHO I HERKHDING |
| Ticket Date    | 04/30/2018             | Vehicle#       | C26             | Volume           |
| Payment Type   | Credit Account         | Container      |                 |                  |

Payment Type Credit Account Contair
Manual Ticket# Driver
Hauling Ticket# Check#
Route Billing

Route Billing # 0001037 State Waste Code Gen EPA ID NR

Manifest 6677677 Destination

PO Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

|     | Time       |          | Scale   |   | Operator | Gross | 63780 | 16 |
|-----|------------|----------|---------|---|----------|-------|-------|----|
| In  | 04/30/2018 | 15:08:32 | Inbound | 1 | RB       | Tare  | 25980 | 1b |
| Dut | 04/30/2018 | 15:08:32 |         |   | RB       | Net   | 37800 | 1b |
|     |            |          |         |   |          | Tons  | 18.   | 90 |

Comments

| Pro | duct |     |     |      |    | LD% | G | ty.   | MOU  | Rate | Тах  | Amount | Origin |  |
|-----|------|-----|-----|------|----|-----|---|-------|------|------|------|--------|--------|--|
| *** |      |     |     |      |    |     |   |       |      | <br> | <br> | <br>   | <br>   |  |
| 1   | CDAL | ASH | 8 C | COAL | CO | 100 |   | 18.90 | Tons |      |      |        | PORTW  |  |

Total Tax Total Ticket

L



|             | NON-HAZARDOUS MANIFEST  | 1. Generator's                        |           | 1D  | anifest Doc N     | No.              | 2. Page 1             | of                               | -           | 1.3         | 1      |
|-------------|---|---------------------------------------|-----------|---|-------------------|------------------|-----------------------|----------------------------------|-------------|-------------|--------|
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER  |                                       |           | rator's Site Address (If a<br>RGIA POWER PLAN |                   | ailing):         |                       | st Number                        | 6677        | 677         | of the |
|             | 241 RALPH MCGILL BLVD NE, I<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5   | BIN#10221<br>06-1365                  |           | CROSSGATE RD.<br>F WENTWORTH, G               | A 31407           |                  |                       | B. State G                       | ienerator's | ID          |        |
|             | 5. Transporter 1 Company Name   |                                       | -10-      | 6. US EPA I                                   | D Number          |                  |                       | ransporter's ID<br>orter's Phone |             |             |        |
|             | 7. Transporter 2 Company Name   |                                       |           | 8. US EPA I                                   | D Number          |                  |                       | ransporter's ID<br>orter's Phone |             |             |        |
|             | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  | Address                               |           | 10. US EPA                                    | ID Number         |                  | G. State F            | acility ID                       | 912-9       | 27-611      | 3      |
|             | Savannah, GA 31419  |                                       |           | ,   |                   |                  |                       |                                  | Al-uni      |             |        |
| G           | 11. Description of Waste Materials  |                                       |           | ····  | No.               | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | i, M        | isc. Commer | its    |
| ENE         | a. COAL ASH& COAL CONTAM  WM Profile  |                                       |           |   | 136               | 17.              | 17                    |                                  |             |             |        |
| RATO        | b.  |                                       |           |   |                   |                  |                       |                                  |             | 100         |        |
| R           | c. V  | /M Profile #                          | -         | * 1444-6                                      |                   |                  |                       |                                  |             |             |        |
|             | d.  | /M Profile #                          |           |   |                   |                  |                       |                                  |             | -           |        |
|             | <u></u>   | /M Profile #                          |           |   |                   |                  |                       |                                  | 1 1 1 1     |             |        |
|             | J. Additional Descriptions for Mater  | rials Listed Abov                     | e         |   | K. Dispos<br>Cell | sal Location     | 11                    | 174                              | Level       | 1           |        |
|             | 15. Special Handling Instructions and   | Additional Infor                      | rmation   |   |                   | (                | ~)7l                  | 676                              |             |             |        |
|             | Purchase Order # GPC1076029   | )3                                    |           | EMERGENCY CO                                  | NTACT / PH        | ONE NO.:         |                       |                                  |             |             |        |
|             | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descri accurately described, classified and p                 | bed materials ar                      | e not ha  | zardous wastes as defi                        | ned by CFR P      | art 261 or       | any applicabl         | e state law, ha                  | ive been fu | lly and     |        |
|             | Printed Name  | anagae ana an                         |           | Signature "On beha                            |                   |                  |                       |                                  | Month       | Day         | Year   |
| Т           | 17. Transporter 1 Acknowledgement   | of Receipt of M                       | aterials  | 1)  |                   |                  |                       |                                  | 1 1         | 31          | 1      |
| RAN         | Printed Name  |                                       |           | Signature                                     |                   |                  |                       |                                  | Month       | Day         | Year   |
| 5<br>P<br>O | 18. Transporter 2 Acknowledgement   | of Receipt of M                       | aterials  | 1   | 0                 | -                |                       |                                  | 1           | need feet   | 13     |
| RTE         | Printed Name  |                                       |           | Signature                                     |                   |                  |                       |                                  | Month       | Day         | Year   |
| FACI        | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | treatment facili<br>and licenses on t | the dates | s listed above.                               |                   |                  |                       | vas managed in                   | n complian  | ce with all |        |
| L           | 20. Facility Owner or Operator: Cert  | ification of recei                    | pt of non |   | overed by th      | nis manifes      | it.                   |                                  | Monthy      | 7 Day       | Year   |
| Y           | Printed Name White- TREATMENT, STORAGE, DISPI   | OSAL FACILITY CO                      | OPY       | Signature Blue- GENERATOR                     | #2 COPY           |                  | Ye                    | llow- GENERA                     | 4           | 01          | Viear  |

Pink-FACILITY USE ONLY



Original Ticket# 1249813

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677678

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 04/30/2018 15:36:02 Inbound 1 Out 04/30/2018 15:36:02

Scale

Operator RB RB

Gross Tare

54280 15 25240 lb 29040 lb

Net 14.52 Tons

Comments

Product

1 COAL ASH & COAL CO 100 14.52 Tons

Vehicle# L07

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

LD% Qty UOM Rate Tax Amount Origin

PORTW

Total Tax fotals ficket

M. letk



## WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| 3. Generator's Mailing Address:   |   | N / A  |   |  | 2.21   |   |   |  |  |
|---|---|--|---|--|--|---|---|--|--|
| GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5                                 | BIN#10221<br>06-1365  | Generator's Site Address (IF d<br>GEORGIA POWER PLAN<br>155 CROSSGATE RD.<br>PORT WENTWORTH, G.  | T KRAFT   | iling):  |  | st Number  MNA  B. State G  | 6677  |  |  |
| 5. Transporter 1 Company Name 7. Transporter 2 Company Name   | 00-1303   |  | Number  Number  |  | D. Transp  | ransporter's ID<br>orter's Phone<br>ransporter's ID   |   |  |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                  | e Address   | 10. US EPA   | D Number  |  | G. State F   | acility ID  | 912-9   | 927-611  | 3  |
| 11. Description of Waste Materials  |   |  |   |  | 13. Total  | 14. Unit  | I. M  | lisc. Commen   | its  |
| a. COAL ASH& COAL CONTAM  |   | 1  | No. Type  |  | Quantity   | WL/VOI.   |   |  |  |
| b.  |   |  |   |  |  |   |   |  |  |
| v   | WM Profile #  |  |   |  | 111  |   |   |  |  |
| d.  | VM Profile #  |  |   |  |  |   |   |  |  |
|   |   |  | Cell  | l Location   | 120  | 124   | Level   | 61   | -  |
| 15. Special Handling Instructions and   | d Additional Inform   | nation   | 1 0110  |  | Sit  | 6)0   |   |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descri   | ibed materials are  | not hazardous wastes as defin  | ed by CFR Pa  | rt 261 or  |  |   | ve been fu  | lly and  |  |
| Printed Name  | ackaged and are i   |  |   | ding to ap   | plicable regu  | lations.  | Month   | Day  | Year   |
|   | of Receipt of Mat   | Signature  | 1   |  |  |   | Month   | Day  | Year   |
| 18. Transporter 2 Acknowledgement<br>Printed Name   | of Receipt of Mat   | Signature  |   |  |  |   | Month   | Day  | Year   |
| I certify, on behalf of the above listed<br>applicable laws, regulations, permits<br>20. Facility Owner or Operator: Cert | I treatment facility<br>and licenses on th  | e dates listed above.<br>t of non-hazardous materials c  |   |  |  | as managed in   | compliand   | ce with all  | Year   |
|   | SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAM  WM Profile b.  c.  V. d.  15. Special Handling Instructions and Purchase Order # GPC1076029 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and p Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/Di I certify, on behalf of the above listed applicable laws, regulations, permits 20. Facility Owner or Operator: Cert Printed Name | 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WAST  WM Profile # 375200GA b.  WM Profile # d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  15. Special Handling Instructions and Additional Inform  Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are accurately described, classified and packaged and are in Printed Name  17. Transporter 1 Acknowledgement of Receipt of Materials Name  18. Transporter 2 Acknowledgement of Receipt of Materials Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility applicable laws, regulations, permits and licenses on the 20. Facility Owner or Operator: Certification of receipt Printed Name | SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA b.  WM Profile # d.  WM Profile # d.  J. Additional Descriptions for Materials Listed Above  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY COI 16. GENERATOR'S CERTIFICATE: 1 hereby certify that the above-described materials are not hazardous wastes as definancurately described, classified and packaged and are in proper condition for transpoi  Printed Name Signature On behal  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature  19. Certificate of Final Treatment/Disposal 10. Certificate of Final Treatment/Disposal 11. Certify, on behalf of the above listed treatment facility, that to the best of my knowledge applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials con Printed Name Signature  Signature Signature | SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA b.  WM Profile #  d.  WM Profile #  d.  WM Profile #  C.  WM Profile #  C.  UMM Profile #  C.  Eell Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHO 16. GENERATOR'S CERTIFICATE: 16. Hereby certify that the above-described materials are not hazardous wastes as defined by CFR Pa accurately described, classified and packaged and are in proper condition for transportation accor Printed Name Signature "On behalf of"  17. Transporter 1 Acknowledgement of Receipt of Materials Printed Name Signature  18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name Signature  19. Certificate of Final Treatment/Disposal 1 certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the abopplicable laws, regulations, permits and licenses on the dates listed above. 19. Certificate of Final Treatment/Disposal 10. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this Printed Name Signature  Signature Signature | SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  c.  WM Profile #  d.  WM Profile #  1. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  11 hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or accurately described, classified and packaged and are in proper condition for transportation according to ap  Printed Name  Signature "On behalf of"  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  19. Certificate of Final Treatment/Disposal  Lecrtify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-descripplicable laws, regulations, permits and licenses on the dates listed above.  19. Certificate of Final Treatment/Disposal  Lecrtify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-descripplicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifes  Signature  Signature  Signature | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA b.  WM Profile # 6  C.  WM Profile # 6  D. Additional Descriptions for Materials Listed Above  WM Profile # 15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations. Printed Name  17. Transporter 1 Acknowledgement of Receipt of Materials Printed Name  Signature  Signature  Signature  Signature  Signature  19. Certificate of Final Treatment/Disposal Lecrify, on behalf of the above-described waste waspplicable laws, regulations, permits and licenses on the dates listed above.  19. Certificate of Final Treatment/Disposal Lecrify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste waspplicable laws, regulations, permits and licenses on the dates listed above.  19. Certificate of Final Treatment/Disposal Lecrify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste waspplicable laws, regulations, permits and licenses on the dates listed above.  19. Signature  Signature  Signature  Signature  Signature  Signature | S. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA b.  WM Profile # 6.  WM Profile # 7.  Additional Descriptions for Materials Listed Above  Cell Grid  Grid  15. Special Handling Instructions and Additional Information  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: thereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 26.1 or any applicable state law, ha accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Signature | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 37520DGAKRA b.  WM Profile # 37520DGAKRA b.  WM Profile # 6.  WM Profile # 6.  WM Profile # 7. Additional Descriptions for Materials Listed Above  EMERGENCY CONTACT / PHONE NO.:  Level Grid Grid Grid Grid Grid Grid Grid Transporter 1 Acknowledgement of Receipt of Materials Frinted Name  Signature  Signature  Meconi Signatur | S. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA b.  WM Profile # 375200GAKRA b.  WM Profile # 6.  WM Profile # 7.  Additional Descriptions for Materials Listed Above  EMERGENCY CONTACT / PHONE NO.:  15. Special Handling Instructions and Additional Information  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  16. hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature Moeth of Final Treatment/Disposal Location for the above-described waste was managed in compliance with all applicable treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable treatment for the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable was regulations. Printed Name Signature Moeth Corp.  19. Certificate of Final Treatment/Disposal Location of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Location of receipt of non-hazardous materials covered by this manifest. |

Pink- FACILITY USE ONLY



Original Ticket# 1249815

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Time

Manifest 6677679

Destination

pn

Profile

Generator

Comments

Product

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale

Inbound 1

Operator

Vehicle# 5306

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

RB

RB

Gross Tare

Volume

56820 16 27500 1ь

Net Tons 29320 1ь 14.66

LD% Qty UOM

Rate

Тах

Amount

Origin

1 COAL ASH & COAL CO 100

04/30/2018 15:41:12

Out 04/30/2018 15:41:12

14.66 Tons

PORTW



|   | 1. Generator's                      | US EPA ID N | lo. M   | anifest Doc N | lo.         | 2. Page 1   | of                               |             | 100        | **   |  |  |
|---|-------------------------------------|-------------|---|---------------|-------------|-------------|----------------------------------|-------------|------------|------|--|--|
| NON-HAZARDOUS MANIFEST  |                                     | N/A         |   |               |             |             |                                  | 3           |            |      |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE    | DINI#10221                          | GEORGI      | r's Site Address (# 0<br>IA POWER PLAN<br>DSSGATE RD. |               | iling}:     |             | st Number                        | 6677        |            |      |  |  |
| ATLANTA, GA 30308-3374  | 506-1365                            |             | /ENTWORTH, G  | A 31407       |             |             | B. State G                       | ienerator's | ID         |      |  |  |
| 5. Transporter 1 Company Name   |                                     | 6.          | US EPA I  | D Number      |             |             |                                  |             |            |      |  |  |
| March   | 1                                   |             |   |               |             |             | ransporter's IC<br>orter's Phone |             |            |      |  |  |
| 7. Transporter 2 Company Name   | 1                                   | 8.          | US EPA I  | D Number      |             | D, Hallsp   | Orter 3 Thoric                   |             |            |      |  |  |
| 1   |                                     | 1           |   |               |             |             | ransporter's ID<br>orter's Phone |             |            |      |  |  |
| 9. Designated Facility Name and Si SUPERIOR LANDFILL                            | te Address                          | 10          | . US EPA  | ID Number     |             | G. State F  | acility ID                       |             | -          |      |  |  |
| 3001 LITTLE NECK ROAD   |                                     |             |   |               |             | -           |                                  | 017.0       | 27-611     | 2    |  |  |
| Savannah, GA 31419  |                                     |             |   |               |             | n. State r  | acility Phone                    | 31Z-3       | 727-011    | 3    |  |  |
|   |                                     |             |   | 12. Cor       | tainers     | 13. Total   | 14. Unit                         |             |            |      |  |  |
| 11. Description of Waste Materials  |                                     |             |   | No.           | Type        | Quantity    | Wt./Vol.                         | I. M        | isc. Comme | nts  |  |  |
| a. COAL ASH& COAL CONTA   | MINATED WAST                        | ΓE          |   | 1/3010        |             | 17          |                                  |             |            |      |  |  |
|   | 27520004                            | VD4         |   | LIN MI        | DI          | 1           |                                  | -           |            |      |  |  |
|   | le# 375200GA                        | KKA         |   |               |             |             |                                  |             |            | -    |  |  |
| b.  |                                     |             |   |               |             |             |                                  |             |            |      |  |  |
|   | WM Profile #                        |             |   |               |             | 10000       |                                  |             |            | -    |  |  |
| c.  |                                     |             | -   |               |             |             |                                  |             |            |      |  |  |
|   |                                     |             |   |               |             |             |                                  |             |            |      |  |  |
|   | WM Profile #                        |             |   |               |             | -           | 2                                |             |            |      |  |  |
| d.  |                                     |             |   |               |             |             |                                  |             |            |      |  |  |
|   |                                     |             |   |               |             |             |                                  |             |            |      |  |  |
| J. Additional Descriptions for Mat  | WM Profile #<br>erials Listed Above | •           |   | K. Dispos     | al Location |             |                                  |             |            |      |  |  |
|   |                                     |             |   |               | 1           | 1221        | 174                              |             | /_         | 15   |  |  |
|   |                                     |             |   | Cell          | -11         | VIV         | 11                               | Level       | 0          | 1    |  |  |
| 15. Special Handling Instructions a   | nd Additional Infor                 | mation      |   | Grid          |             | Mi          | 676                              |             |            |      |  |  |
| 1   |                                     |             |   |               |             |             |                                  |             |            |      |  |  |
| Purchase Order # GPC107602  | 293                                 |             | EMERGENCY CO  | NTACT / PHO   | ONE NO.     |             |                                  |             |            | 4    |  |  |
| 16. GENERATOR'S CERTIFICATE:  |                                     |             |   |               |             | \           |                                  |             |            | 4    |  |  |
| I hereby certify that the above-desc<br>accurately described, classified and    |                                     |             |   |               |             |             |                                  | ve been tu  | lly and    | 4    |  |  |
| Printed Name  | position and a second               |             | Signature "On beh                                     |               |             |             |                                  | Month       | Day        | Year |  |  |
| BFilipponich  | 1                                   |             | BACK  |               |             |             |                                  | 11          | الها       | 1    |  |  |
| 17. Transporter 1 Acknowledgeme   | nt of Receipt of Ma                 | -           |   |               |             |             |                                  | T           |            | T    |  |  |
| Printed Name  | Ara Val                             | V           | Signature   | 201           | 1           | 1           |                                  | Month       | Day        | Year |  |  |
| 18. Transporter 2 Acknowledgeme   | nt of Receipt of Ma                 | terials     | 10-11   | Lat.          | 1           | 1           |                                  | +           | -          | 12   |  |  |
| Printed Name  |                                     |             | Signature   |               | 1           |             |                                  | Month       | Day        | Year |  |  |
|   |                                     |             | 1 )   | . /           |             |             |                                  |             |            |      |  |  |
| 19. Certificate of Final Treatment/I  | Disposal                            |             |   | 1             |             |             |                                  | 1           |            |      |  |  |
| I certify, on behalf of the above lists<br>applicable laws, regulations, permit | ed treatment facilit                |             |   | ledge, the ab | ove-descri  | bed waste w | vas managed ü                    | complian    | e with all | 1    |  |  |
| 20. Facility Owner or Operator: Ce  |                                     |             |   | overed by th  | is manifes  | t.          |                                  |             |            |      |  |  |
| Printed Name  | 124                                 | T           | Signature   |               | 777         |             |                                  | Month       | / Day      | Year |  |  |
|   | YD                                  |             |   | _             | 0           |             |                                  | 11          | 10         | 10   |  |  |
| White-TREATMENT, STORAGE, DIS   | POSAL FACILITY CO                   | PY          | Blue- GENERATOR                                       | #2 COPY       |             | Ye          | llow- GENERA                     | TOR #1 CO   | PY         |      |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1249827

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 04/30/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code 6677680

Manifest Destination

PO

Profile Generator

375200GAKRA (CDAL ASH & CDAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 04/30/2018 16:11:43 Dut 04/30/2018 16:11:43

Scale Inbound 1

LBEJARAN **LBEJARAN** 

Operator

Vehicle# 5307

Gen EPA ID NR

0001037

Container

Driver

Check# Billing #

> Gross Tare Net Tons

24080 1b 32040 1b 16.02

56120 1ь

Comments

Product LD% Qty UOM Rate Tax Amount Origin COAL ASH & COAL CO 100 16.02 Tons PORTW



|   | Tage Lines  | DA 10 N. M   | author Dan I                             | Na.                         | 2 Dage 1                              | of                               |                       |             | **9  |  |  |
|---|---|--|--|-----------------------------|---------------------------------------|----------------------------------|-----------------------|-------------|------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US E   |  | anifest Doc f                            | NO.                         | 2. Page 1                             | 01                               | 3.33                  |             |      |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | GI  | nerator's Site Address (# a<br>EORGIA POWER PLAN   |  | ailing):                    |                                       | st Number<br>MNA                 | 6677                  | 680         |      |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5   |   | 55 CROSSGATE RD.<br>ORT WENTWORTH, G   | A 31407                                  |                             |                                       | B. State G                       | ienerator's l         | D           |      |  |  |
| 5. Transporter 1 Company Name   | 000-1303  | 6. US EPA I  | D Number                                 | -                           |                                       |                                  |                       |             |      |  |  |
| 3. Halisporter I company Halife   | 1. 1.   |  |  |                             |                                       | ransporter's IC<br>orter's Phone |                       |             |      |  |  |
| 7. Transporter 2 Company Name   | )   | 8. US EPA I  | D Number                                 |                             |                                       | ransporter's ID<br>orter's Phone | )                     |             |      |  |  |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL  | e Address   | 10. US EPA   | ID Number                                |                             | G. State F                            |                                  |                       |             |      |  |  |
| 3001 LITTLE NECK ROAD   |   |  |  |                             | H. State Facility Phone 912-927-61    |                                  |                       |             |      |  |  |
| Savannah, GA 31419  |   |  | 10 976                                   |                             | Ti, State I                           | Beinty / Hone                    | 312.3                 | ., 0111     |      |  |  |
| 11. Description of Waste Materials  |   |  | 12. Co                                   | ntainers<br>Type            | 13. Total<br>Quantity                 | 14. Unit<br>Wt /Vol.             | t. Mi                 | sc. Comment | s    |  |  |
| a. COAL ASH& COAL CONTAN  | MINATED WASTE   |  | 80                                       | 107                         | 1.00                                  |                                  |                       |             |      |  |  |
| WM Profile  | # 375200GAKR/   | 4  |  |                             |                                       |                                  |                       |             |      |  |  |
| b.  |   |  |  |                             |                                       |                                  |                       |             |      |  |  |
|   |   |  |  |                             |                                       |                                  |                       |             |      |  |  |
|   | WM Profile #  |  | -  |                             |                                       |                                  |                       |             |      |  |  |
| C.  |   |  |  |                             |                                       |                                  |                       |             |      |  |  |
|   | WM Profile #  |  |  |                             |                                       |                                  |                       |             |      |  |  |
| d.  |   |  |  |                             |                                       |                                  |                       |             |      |  |  |
|   |   |  |  |                             |                                       |                                  |                       |             |      |  |  |
| J. Additional Descriptions for Mate   | WM Profile #  |  | K Dispos                                 | sal Location                | tion                                  |                                  |                       |             |      |  |  |
| 1. Additional Descriptions for Iviati   | Eligia Daten Monac  |  | ik. Dispo.                               | L                           | " " " " " " " " " " " " " " " " " " " |                                  |                       |             |      |  |  |
|   |   |  | Cell                                     |                             | 11)19                                 | 11-1                             | Level                 | 601         |      |  |  |
| 15. Special Handling Instructions an  | d Additional Informati  | on .   | Grid                                     | - 11                        | 10/2                                  | 637                              |                       |             |      |  |  |
|   |   |  |  |                             | , , ,                                 |                                  |                       |             |      |  |  |
|   |   |  |  |                             |                                       |                                  |                       |             |      |  |  |
| Purchase Order # GPC107602  | 93  | EMERGENCY CO   | ONTACT / PH                              | ONE NO.:                    |                                       |                                  |                       |             |      |  |  |
| 16. GENERATOR'S CERTIFICATE:  |   |  |  |                             |                                       |                                  |                       |             |      |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc   | ribed materials are not   | t hazardous wastes as defi   | ned by CFR F                             | Part 261 or                 | any applicable                        | e state law, ha                  | ave been ful          | ly and      |      |  |  |
| 16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-desc<br>accurately described, classified and  | ribed materials are not   | t hazardous wastes as defi<br>oper condition for transpo   | ned by CFR F                             | Part 261 or                 | any applicabl                         | e state law, ha                  | ave been ful<br>Month | ly and      | Year |  |  |
| 16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-desc<br>accurately described, classified and<br>Printed Name  | ribed materials are not   | t hazardous wastes as defi   | ned by CFR F                             | Part 261 or                 | any applicabl                         | e state law, ha<br>lations.      |                       |             | Year |  |  |
| 16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-desc<br>accurately described, classified and  | ribed materials are not<br>packaged and are in pu   | t hazardous wastes as defi<br>oper condition for transp<br>Signature "On beh   | ned by CFR F                             | Part 261 or                 | any applicabl                         | e state law, ha                  |                       |             | Year |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name   | ribed materials are not<br>packaged and are in pr<br>nt of Receipt of Materia   | t hazardous wastes as defi<br>oper condition for transpo<br>Signature "On beh<br>als<br>Signature  | ned by CFR F                             | Part 261 or                 | any applicab<br>oplicable regu        | e state law, ha                  |                       |             | Year |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement  | ribed materials are not<br>packaged and are in pr<br>nt of Receipt of Materia   | t hazardous wastes as defi<br>roper condition for transpo<br>Signature "On beh<br>als<br>Signature   | ned by CFR F                             | Part 261 or                 | any applicabl                         | e state law, ha                  | Month                 | Day<br>Day  | Year |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgemer Printed Name  | ribed materials are not<br>packaged and are in pr<br>nt of Receipt of Materia   | t hazardous wastes as defi<br>oper condition for transpo<br>Signature "On beh<br>als<br>Signature  | ned by CFR F                             | Part 261 or                 | any applicabl                         | e state law, ha                  | Month                 | Day         | Year |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name   | ribed materials are not<br>packaged and are in po<br>nt of Receipt of Materia<br>nt of Receipt of Materia   | t hazardous wastes as defi<br>roper condition for transpo<br>Signature "On beh<br>als<br>Signature   | ned by CFR F                             | Part 261 or                 | any applicab<br>pplicable regu        | e state law, ha                  | Month                 | Day<br>Day  | 1    |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement  | ribed materials are not packaged and are in protection of Receipt of Materials of Receipt of Materia  | s hazardous wastes as define oper condition for transport of the Signature "On behinds als Signature als Signature als Signature als to the best of my known   | ned by CFR F<br>ortation acco<br>alf of  | Part 261 or<br>ording to ap | pplicable regu                        | lations.                         | Month Month Month     | Day<br>Day  | Year |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/D I certify, on behalf of the above lister  | ribed materials are not packaged and are in produced in packaged and are in produced in the facility of Materials are not of Receipt of Materials are not packaged treatment facility, the sand licenses on the desired treatment facility, the sand licenses on the desired in the | s hazardous wastes as definence condition for transport condition for transport condition for transport condition for transport conditions for the conditions for transport conditions for the conditi | ned by CFR F<br>ortation acco<br>alf of* | Part 261 or<br>ording to ap | ibed waste v                          | lations.                         | Month Month Month     | Day<br>Day  | Year |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/D I certify, on behalf of the above lister applicable laws, regulations, permitted pages 1. | ribed materials are not packaged and are in produced in packaged and are in produced in the facility of Materials are not of Receipt of Materials are not packaged treatment facility, the sand licenses on the desired treatment facility, the sand licenses on the desired in the | s hazardous wastes as definence condition for transport condition for transport condition for transport condition for transport conditions for the conditions for transport conditions for the conditi | ned by CFR F<br>ortation acco<br>alf of* | Part 261 or<br>ording to ap | ibed waste v                          | lations.                         | Month Month Month     | Day<br>Day  | Year |  |  |

Pink- FACILITY USE ONLY



Reprint Ticket# 1249901

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Vehicle# J11

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Manifest 6677681

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/01/2018 08:07:30

Out 05/01/2018 08:07:30

Scale

LD%

Inbound 1

RB

WASTE MANAGEMENT

Container Driver

Check#

RB

HOM

Rate

Billing # 0001037

Gen EPA ID NR

Bross Tare Net

Tons

Volume

54840 1b 22380 lb 32460 1b

16.23

Comments

Product

COAL ASH & COAL CO 100

16.23 Tons

Qty

Tax

Amount

Origin

PORTW



### WANA NON-HAZARDOUS MANIFEST

|             | WASTE MANAGEMENT   |  |                                      |                     |                         |  |                                  |               |              | - 1  |
|-------------|--|--|--------------------------------------|---------------------|-------------------------|--|----------------------------------|---------------|--------------|------|
|             | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                    |                                      | Manifest Doc N      | No.                     | 2. Page 1  | of                               |               | 7:2          | 2    |
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER                             | GEO  | erator's Site Addre<br>DRGIA POWER F | PLANT KRAFT         | ailing):                | The state of the s | st Number                        | 6677          | 681          |      |
|             | 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                          | POF  | CROSSGATE RE                         |                     |                         |  | B. State G                       | ienerator's I | D            | 7,4  |
| -           | 4. Generator's Phone 404-5  5. Transporter 1 Company Name                    | 06-1365  | 6. US                                | EPA ID Number       |                         |  |                                  |               |              |      |
|             | C095491 G  | radina   |                                      | A TOTAL PROPERTY OF |                         |  | ransporter's ID<br>orter's Phone | )             |              |      |
|             | 7. Transporter 2 Company Name /  | 9  | 8. US                                | EPA ID Number       |                         |  | ransporter's ID<br>orter's Phone |               |              |      |
|             | 9. Designated Facility Name and Site SUPERIOR LANDFILL                       | Address  | 10. US                               | EPA ID Number       |                         | G. State F   | acility ID                       |               |              |      |
|             | 3001 LITTLE NECK ROAD  |  | The state of                         |                     |                         |  | acility Phone                    | 912-9         | 912-927-6113 |      |
|             | Savannah, GA 31419   |  |                                      |                     |                         |  |                                  |               |              |      |
| G           | 11. Description of Waste Materials   |  |                                      | 12. Co<br>No.       | ntainers<br>Type        | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.             | I. Mi         | sc. Commen   | ts   |
| E<br>N      | a. COAL ASH& COAL CONTAIN  | IINATED WASTE  |                                      | JII                 | TIT                     | 18   |                                  |               |              |      |
| E<br>R      | WM Profile   | # 375200GAKRA  |                                      |                     |                         |  |                                  |               |              |      |
| A<br>T      | b.   |  |                                      |                     | 100                     |  |                                  |               |              |      |
| 0           |  | WM Profile #   |                                      |                     |                         |  |                                  |               |              |      |
| R           | C.   |  |                                      |                     |                         |  |                                  |               |              |      |
|             |  | WM Profile #   |                                      |                     |                         |  | -54                              |               |              |      |
|             | d.   | With Frome #   |                                      |                     |                         |  |                                  |               |              | 4    |
|             |  |  |                                      |                     |                         |  | E-MINISTER STATE                 |               |              |      |
|             | J. Additional Descriptions for Mate  | WM Profile #   |                                      | K. Dispo            | sal Location            | 1  |                                  |               |              |      |
|             | 3. Auditional Descriptions for Mac   | Cell   |                                      |                     |                         |  |                                  | Level         | 6            |      |
|             | 15. Special Handling Instructions an   | d Additional Informatio                                  | n                                    | Grid                | 4                       | solv   | 31                               |               |              | 4    |
|             | Rurchase Order # GPC107602   | 93   | EMERGEN                              | CY CONTACT / PH     | ONE NO.:                |  |                                  |               |              |      |
| 1           | 16. GENERATOR'S CERTIFICATE:   |  | 78                                   |                     |                         |  |                                  |               |              |      |
|             | I hereby certify that the above-desc<br>accurately described, classified and | ribed materials are not l                                | hazardous wastes a                   | s defined by CFR    | Part 261 or ording to a | any applicab   | le state law, h<br>ulations.     | ave been fu   | lly and      |      |
|             | Printed Name   | packaged and are in pro                                  | Signature "O                         | n behalf of"        |                         |  |                                  | Month         | Day          | Year |
|             | B. Filipovich  |  | D#                                   |                     |                         | 0-   |                                  |               |              | 11 X |
| T<br>R<br>A | 17. Transporter 1 Acknowledgement  | nt of Receipt of Material                                | Signature.                           | 7~                  | 0.                      | 1  |                                  | Month         | Day          | Year |
| N<br>S      | V DIXIMIC  | TIOL!  | 1 Och                                | murch               | 300                     |  |                                  | 16            |              | 1/2  |
| P<br>O<br>R | 18. Transporter 2 Acknowledgemen   | nt of Receipt of Material                                | 7 1                                  |                     |                         |  |                                  | Month         | Day          | Year |
| T<br>E<br>R | Printed Name   |  | Signature                            |                     |                         |  |                                  |               |              |      |
| IN.         | 19. Certificate of Final Treatment/I   | Disposal   | *                                    |                     | T. T.                   |  |                                  |               |              |      |
| FAC         | I certify, on behalf of the above liste applicable laws, regulations, permit | ed treatment facility, that<br>is and licenses on the da | ites listed above.                   |                     |                         | 4  | was managed                      | in complian   | ce with a    |      |
| L           | 20. Facility Owner or Operator: Ce   | rtification of receipt of r                              | non-hazardous mat                    | erials covered by   | this manife             | st.  |                                  | Marith        | Days         | Venr |
| T<br>Y      | Printed Name   | AD   | Signature                            |                     |                         |  |                                  | Month         | Day          | Year |
| _           | White-TREATMENT, STORAGE, DIS  | POSAL FACILITY COPY                                      | Blue- GENE                           | RATOR #2 COPY       |                         | Y  | ellow- GENER.                    | ATOR #1 CO    | PΥ           |      |

Pink- FACILITY USE ONLY



Original Ticket# 1249910

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677682

Destination

PO

Generator

Profile 3752006AKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 08:24:56 Out 05/01/2018 08:41:53 Scale

Operator Inbound 1 RB

Outbound

Gross Tare

54500 lb 2328Ø 1b

Net Tons 31220 lb 15.61

Comments

Vehicle# JØ5

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Origin LD% Qty MOU Rate Tax Amount Product PORTW 15.61 Tons COAL ASH & COAL CO 100



|        | 1. Generator's U   | S EPA ID No. Ma                 | nifest Doc No                           | o                    | 2. Page 1 c   | of                  |                 | 7          |                        |
|--------|--|---------------------------------|---|----------------------|---|---------------------|-----------------|------------|------------------------|
|        | NON-HAZARDOUS MANIFEST   | I / A                           |   |                      |   |                     | 7               | 12         | -                      |
|        | 3. Generator's Mailing Address:  | Generator's Site Address (If di | fferent than mail                       | ing):                | A. Manifes  | t Number            | 1               | ·X         | )                      |
| No.    |  | GEORGIA POWER PLAN              | T KRAFT                                 |                      | THE REPORT OF THE PARTY OF THE | MNA                 | 66776           | 82         |                        |
|        | 241 RALPH MCGILL BLVD NE, BIN#10221  | 155 CROSSGATE RD.               |   |                      | VVI   |                     | Generator's ID  |            |                        |
|        |  | PORT WENTWORTH, GA              | 31407                                   |                      |   | B. State            | Generator's ID  |            |                        |
|        | 4. Generator's Phone 404-506-1365  |                                 |   |                      | Maria Car   |                     |                 |            | 1                      |
|        | 5. Transporter 1 Company Name  | 6. US EPA ID                    | Number                                  |                      |   |                     |                 |            |                        |
|        | 1 1 1 /1 18  |                                 | 100000000000000000000000000000000000000 |                      | C. State Tr   | ansporter's I       | D               |            | NAME OF TAXABLE PARTY. |
| H      | 1 00 Stal brade  |                                 |   |                      | D. Transpo  | rter's Phone        |                 |            | A                      |
|        | 7. Transporter 2 Company Name  | 8. US EPA ID                    | Number                                  |                      |   |                     |                 |            |                        |
| V      |  |                                 |   |                      |   | ansporter's I       |                 |            |                        |
|        |  | J 40 110 504                    | <b>D</b> 11 - 1                         |                      | F. Transpo  | rter's Phone        |                 |            |                        |
|        | 9. Designated Facility Name and Site Address   | 10. US EPA I                    | D Number                                |                      | 0.61.1.5  | The second          |                 |            |                        |
|        | SUPERIOR LANDFILL  |                                 |   |                      | G. State Fa   |                     |                 |            |                        |
|        | 3001 LITTLE NECK ROAD  |                                 |   | Samuel Sylvania in S | H. State Fa   | cility Phone        | 912-92          | 7-6113     |                        |
|        | Savannah, GA 31419   |                                 |   |                      |   |                     |                 |            | 110500                 |
| 1      |  |                                 | 12. Cont                                | ainers               | 13. Total   | 14. Unit            |                 |            |                        |
| G      | 11. Description of Waste Materials   | 0.00                            | No.                                     | Туре                 | Quantity  | Wt./Vol.            | I. Misc         | . Comments |                        |
| Ε      | a. COAL ASH& COAL CONTAMINATED WASTI   |                                 | 1                                       | 5                    | 13  |                     |                 |            |                        |
| N<br>E |  |                                 | TAS                                     | DI                   | 10  |                     |                 |            |                        |
| R      | WM Profile # 375200GAk   | (RA -                           |   |                      |   |                     |                 |            |                        |
| A      | b.   |                                 |   |                      |   |                     |                 |            |                        |
| T      |  |                                 |   |                      |   |                     |                 |            |                        |
| 0      | WM Profile #   | A                               |   |                      | and the second second   |                     |                 |            |                        |
| R      | C.   |                                 |   | hs                   |   | (190 <del>0</del> ) |                 |            |                        |
|        |  |                                 |   | 1                    |   | 7                   |                 | Mark       |                        |
|        | WM Profile #   |                                 |   | 4                    |   |                     |                 |            |                        |
|        | d.   |                                 |   | 1                    |   |                     |                 |            | 1                      |
|        |  |                                 |   |                      |   | 1                   |                 |            | . 94                   |
|        | WM Profile #   |                                 |   |                      |   |                     |                 |            | - cumpus               |
|        | J. Additional Descriptions for Materials Listed Above  |                                 | K. Disposal Location                    |                      |   |                     |                 |            | A                      |
|        | A STATE OF THE PARTY OF THE PAR |                                 | Cell                                    | 1/                   | 137011  | 79                  | Level           | 66         |                        |
|        |  |                                 | Grid                                    | - 1                  | 0 1 -   | 7 7                 | Lever           |            |                        |
|        | 15. Special Handling Instructions and Additional Inform  | nation                          |   | 0                    | 1116  | 16-                 |                 |            |                        |
|        | 15. Special finding institutions   |                                 |   | -                    |   |                     |                 |            |                        |
|        |  |                                 |   |                      |   |                     |                 |            | 8. 11                  |
|        | Purchase Order # GPC10760293   | EMERGENCY CO                    | NTACT / PHC                             | NE NO.:              |   |                     |                 |            | 178                    |
| 250    | 16. GENERATOR'S CERTIFICATE:   |                                 |   |                      |   |                     |                 |            | 4-1                    |
|        | I hereby certify that the above-described materials are  | not hazardous wastes as defir   | ned by CFR Pa                           | art 261 or           | any applicabl   | e state law.        | have been fully | and        |                        |
| 1      | accurately described, classified and packaged and are in   | n proper condition for transpo  | rtation accor                           | ding to ap           | plicable regu   | lations.            |                 |            |                        |
|        | Printed Name   | Signature "On beha              | If of"                                  |                      |   |                     | Month           | Day        | Year                   |
|        | Btiliporich  | BK                              |   |                      |   |                     | 5               | 1          | 18                     |
| Т      | 17. Transporter 1 Acknowledgement of Receipt of Mat  | rerials                         |   |                      |   |                     |                 | •          |                        |
| R<br>A | Printed Name   | Signature                       | 1/11                                    | 200                  | /   |                     | Month           | Day        | Year                   |
| N<br>S | Lamos Kospy  | X                               | 4000                                    | n                    |   |                     |                 |            | 17                     |
| P      | 18. Transporter 2 Acknowledgement of Receipt of Mat  | terials /                       | 1                                       |                      |   |                     |                 | -          |                        |
| R      | Printed Name   | Signature                       |   |                      |   |                     | Month           | Day        | Year                   |
| E<br>R |  |                                 |   |                      |   |                     |                 |            | THE S                  |
|        | 19. Certificate of Final Treatment/Disposal  |                                 |   |                      |   |                     |                 |            |                        |
| FA     | I certify, on behalf of the above listed treatment facility  | v. that to the best of my know  | ledge, the ab                           | ove-descr            | ibed waste w  | as managed          | l in compliance | with all   |                        |
| C      | applicable laws, regulations, permits and licenses on th   | ne dates listed above.          |   |                      |   |                     |                 |            |                        |
| L      | 20. Facility Owner or Operator: Certification of receip  |                                 | overed by th                            | is manife:           | st.   | at .                |                 |            |                        |
| T      | Printed Name   | Signature                       | In                                      |                      |   |                     | Month           | Day        | Year                   |
| Y      | (4)  |                                 | 110                                     |                      |   |                     | ) /             | / /        | U                      |
| _      | White-TREATMENT, STORAGE, DISPOSAL FACILITY CO   | PY Blue- GENERATOR              | #2 COPY                                 |                      | Ye  | ellow- GENER        | RATOR #1 COP    | Y          |                        |

Pink- FACILITY USE ONLY

Original Ticket# 1249904

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677683

Destination

PO

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In Ø5/01/2018 Ø8:14:51

Out 05/01/2018 08:14:51

Scale

Inbound 1

Operator

RB

RB

Gross Tare

58720 1b 25400 1b

Net

33320 lb 16.66

Tons

Comments

#### WASTE MANAGEMENT

Vehicle# JØ8

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

| Proc | luct  | LD% | Qty   | UOM                                  | Rate   | Tax   | Amount   | Origin   |
|------|---|-----|-------|--------------------------------------|--|---|--|--|
|      | And annual names about about about paster proper much states paster much proper more proper proper paster. As |     |       | n artif (ann yen) blis, ann leas tea | . Sende photo (send) make count are at the desire desire black for | or and place obligations become from the level bring time | when some report to the same were some store state, but it were some | MANA STATE ACTOR CANDE MANA SALES MANY STATE ACTOR SALES AND SALES ACTOR SALES |
| 1    | COAL ASH & COAL CO  | 100 | 16.66 | Tons                                 |  |   |  | PORTW  |



|                  | WASTE MANAGEMENT  |                                    |                            | The second control of      |  | 1000         |   |                      |                        |  |  |
|------------------|---|------------------------------------|----------------------------|----------------------------|--|--------------|---|----------------------|------------------------|--|--|
|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's U                   | S EPA ID No.               | Ma                         | nifest Doc I                                     | No.          | 2. Page 1                               | of                   | 7:30                   |  |  |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER  |                                    | Generator's Site A         | ER PLAN                    |  | ailing):     | 111111111111111111111111111111111111111 | st Number            | 6677683                |  |  |
|                  | 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5   | 06-1365                            | 155 CROSSGAT<br>PORT WENTW |                            | 31407  |              |   | B. State G           | enerator's ID          |  |  |
|                  | 5. Transporter 1 Company Name   | _                                  | 6.                         | US EPA ID                  | C. State Transporter's ID D. Transporter's Phone |              |   |                      |                        |  |  |
|                  | 7. Transporter 2 Company Name   | radina                             | 8.                         | US EPA ID                  | Number   |              | E. State Ti                             | )                    |                        |  |  |
|                  | 9. Designated Facility Name and Site SUPERIOR LANDFILL  | Address                            | 10.                        | US EPA I                   | D Number   |              | G. State F                              |                      | 222.007.000            |  |  |
|                  | 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |                                    |                            |                            |  |              |   | acility Phone        |                        |  |  |
| G                | 11. Description of Waste Materials  |                                    |                            |                            | No.  | Type         | 13. Total<br>Quantity                   | 14. Unit<br>Wt./Vol. | I. Misc. Comments      |  |  |
| E<br>N           | a. COAL ASH& COAL CONTAN  | IINATED WAST                       | <b>E</b>                   |                            | 86   | DT           | 18                                      |                      |                        |  |  |
| E<br>R           |   | # 375200GA                         | (RA                        |                            |  |              |   |                      |                        |  |  |
| A<br>T           | b.  |                                    |                            |                            |  |              |   |                      |                        |  |  |
| 0                | V   | VM Profile #                       |                            |                            |  |              |   | THE SAME             |                        |  |  |
| R                | C.  |                                    |                            |                            |  |              |   |                      |                        |  |  |
|                  |   | VM Profile #                       |                            |                            |  |              |   |                      |                        |  |  |
|                  | d.  V.  J. Additional Descriptions for Mate   | WM Profile #<br>rials Listed Above |                            |                            | K. Dispo   | sal Location | 1370                                    | 179                  | Level 65               |  |  |
|                  | 15. Special Handling Instructions and   | d Additional Inforn                | nation                     |                            |  | 4            | NI                                      | 6) 0                 |                        |  |  |
| ń.               | Purchase Order # GPC107602  | 93                                 | EME                        | RGENCY CO                  | NTACT / PH                                       | IONE NO.:    |   |                      | and a state of         |  |  |
|                  | 16. GENERATOR'S CERTIFICATE:  |                                    |                            | Hara P                     |  |              |   | 1                    | ave been fully and     |  |  |
|                  | I hereby certify that the above-descr<br>accurately described, classified and<br>Printed Name   | ribed materials are i              | n proper condition         | for transpo<br>re "On beha | rtation acc                                      | ording to ap | any applicab<br>plicable regi           | ulations.            | Month Day Year         |  |  |
| T<br>R<br>A<br>N | 17. Transporter 1 Acknowledgemen  | ot of Receipt of Ma                | terials Signatu            | re                         | -  | 26           | ţ-                                      | Th.                  | Month Day Year         |  |  |
| S<br>P<br>O<br>R | 18. Transporter 2 Acknowledgemen  |                                    | terials Signatu            | re                         |  |              |   |                      | Month Day Year         |  |  |
| T<br>E<br>R      |   |                                    |                            |                            | 14   |              | ) Y                                     |                      |                        |  |  |
| FAC              | <ol> <li>Certificate of Final Treatment/D<br/>I certify, on behalf of the above liste<br/>applicable laws, regulations, permit</li> </ol> | d treatment facilit                | y, that to the best o      | of my know                 | ledge, the a                                     | bove-descr   | ibed waste                              | was managed          | in compliance with all |  |  |
| L                | 20. Facility Owner or Operator: Cer   | rtification of receip              | t of non-hazardous         | materials o                | overed by  | this manifes | st.                                     |                      |                        |  |  |
| T<br>Y           | Printed Name  | 43                                 | Signatu                    | ıre                        | 4  | 3            |   |                      | Month Day Year         |  |  |
|                  | White- TREATMENT, STORAGE, DISI<br>Pink- FACILITY USE   |                                    |                            | GENERATOR<br>RANSPORTE     | /  | 1            | Y                                       | ellow- GENER         | ATOR #1 COPY           |  |  |



Original Ticket# 1249908

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677684

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 08:22:27

Out 05/01/2018 08:38:07

Scale

Inbound 1

RB Outbound

RB

Gross

55340 16 24280 lb

Tare Net Tons

31060 lb 15.53

Comments

#### WASTE MANAGEMENT

Operator

Vehicle# JØ2

Container Driver

Billing #

Gen EPA ID NR

0001037

Check#

|   | duct |     |    |      |                       | LD% | Qty   | UOM  | Rate | Tax | Amount   | Origi   | Ti: |
|---|------|-----|----|------|-----------------------|-----|---|------|------|-----|--|---|-----|
|   |      |     |    |      | 71100 Settle Street 6 |     | ter made their test one; they says store to |      |      |     | are made these trades which were noted borne work once where where | place seem have been used being being being being being |     |
| 1 | cool | DCH | R. | chal | CO                    | 100 | 15, 53                                      | Tons |      |     |  | PORTW   | *   |



| WASTE MANAGEMENT   |   |  |                        | The state of                            | STORY STATES                   |  | THE PARTY OF THE P |  |  |  |  |
|--|---|--|------------------------|---|--------------------------------|--|--|--|--|--|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EP N /                                  |  | anifest Doc No         |   | 2. Page 1 c                    | of   | 7:34   |  |  |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                       | GE  | nerator's Site Address (1f<br>ORGIA POWER PLAI |                        | ng):                                    | A. Manifes                     | t Number   | 6677684  |  |  |  |  |
| 241 RALPH MCGILL BLVD NI<br>ATLANTA, GA 30308-3374                     | PO  | 5 CROSSGATE RD.<br>RT WENTWORTH, G             | iA 31407               |   |                                | B. State G                                       | enerator's ID  |  |  |  |  |
| 4. Generator's Phone 404 5. Transporter 1 Company Name                 | -506-1365   | 6. US EPA                                      | D Number               |   |                                |  |  |  |  |  |  |
| (nastal 6  | tradina_  |  |                        | * .                                     |                                | C. State Transporter's ID D. Transporter's Phone |  |  |  |  |  |
| 7. Transporter 2 Company Name  |   | 8. US EPA                                      | ID Number              |   | E. State Tr                    |  |  |  |  |  |  |
| 9. Designated Facility Name and S<br>SUPERIOR LANDFILL                 | ite Address   | 10. US EPA                                     | ID Number              |   | G. State Fa                    |  |  |  |  |  |  |
| 3001 LITTLE NECK ROAD  |   |  |                        |   | H. State Fa                    | acility Phone                                    | 912-927-6113   |  |  |  |  |
| Savannah, GA 31419   |   |  |                        |   |                                |  |  |  |  |  |  |
| G 11. Description of Waste Materia                                     | ls  |  | No.                    | Type                                    | 13. Total<br>Quantity          | 14. Unit<br>Wt./Vol.                             | I. Misc. Comments  |  |  |  |  |
| E a. COAL ASH& COAL CONTA  | MINATED WASTE   |  |                        | 1 :-                                    | 177                            |  |  |  |  |  |  |
| N<br>E<br>R WM Pro   | file# 375200GAKRA   |  | 200                    | D                                       | 18                             |  |  |  |  |  |  |
| A b.   |   |  |                        |   |                                |  |  |  |  |  |  |
| T<br>O<br>R  | WM Profile #  |  |                        |   |                                |  |  |  |  |  |  |
| C.   |   |  |                        |   |                                |  |  |  |  |  |  |
|  | 100 a D El - H  |  |                        | 111111111111111111111111111111111111111 |                                |  |  |  |  |  |  |
| d.   | WM Profile #  |  | S. Alexander (College) | all control (A)                         |                                |  | 7  |  |  |  |  |
| W = 1  |   |  |                        |   | A7-1                           |  |  |  |  |  |  |
| J. Additional Descriptions for M                                       | WM Profile #<br>aterials Listed Above                     |  | K. Disposa             | l Location                              |                                |  | . (-   |  |  |  |  |
|  |   |  | Cell<br>Grid           | 1                                       | 130                            | 127  | Level 6  |  |  |  |  |
| 15. Special Handling Instructions                                      | and Additional Informatio                                 | on   | Gild                   | 6                                       | 211                            | 052  |  |  |  |  |  |
| Purchase Order # GPC1076   | 1293  | EMERGENCY C                                    | ONTACT / PHO           | NE NO.:                                 |                                | 1  |  |  |  |  |  |
| 16. GENERATOR'S CERTIFICATE:   | 3233  | The second second                              |                        |   | 4                              |  |  |  |  |  |  |
| I hereby certify that the above-de accurately described, classified at | scribed materials are not<br>nd packaged and are in pr    | oper condition for transp                      | ortation accor         | rt 261 or<br>ding to ap                 | any applicab<br>oplicable regu | le state law, h<br>ulations.                     | ave been fully and   |  |  |  |  |
| Printed Name B+1/1pov1c  | •   | Signature "On be                               | nalf of"               |   |                                |  | Month Day Year   |  |  |  |  |
| T 17. Transporter 1 Acknowledgen                                       | ent of Receipt of Materia                                 | Signature                                      |                        | 1                                       | 12                             | 2  | Month Day Year   |  |  |  |  |
| Printed Name N N N N N N N N N N N N N N N N N N N                     | ERT Secript of Materia                                    | V San  | nes >                  | Tur                                     | 199/                           | .,3  | 5 1 18   |  |  |  |  |
| Policy 18. Transporter 2 Acknowledgen Printed Name Printed Name        | ient of Receipt of Materia                                | Signature                                      |                        |   |                                |  | Month Day Year   |  |  |  |  |
| 19. Certificate of Final Treatmen                                      | t/Disposal  |  |                        |   |                                |  |  |  |  |  |  |
| I certify, on behalf of the above li                                   | sted treatment facility, th<br>nits and licenses on the d | ates listed above.                             |                        |   |                                | was managed                                      | in compliance with all   |  |  |  |  |
| 20. Facility Owner or Operator:  | Certification of receipt of                               |  | s covered by th        | is manifes                              | st.                            |  | Month / Day / Year   |  |  |  |  |
| Printed Name   | 10  | Signature                                      | 403                    |   | V                              | ollow CENED                                      | ATOR #1 COPY   |  |  |  |  |
| White- TREATMENT, STORAGE, I<br>Pink- FACILITY U                       |   | Blue- GENERATO<br>Gold- TRANSPOR               |                        |   | ¥,                             | enow- GENERA                                     | A1011#1 COI 1  |  |  |  |  |

Original Ticket# 1249911

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Manifest 6677685

Destination

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 08:26:43 Dut 05/01/2018 08:40:26

Scale Inbound 1 Operator

Vehicle# J01

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Outbound

RB RB

Gross Tare

56940 16 23340 lb

Net Tons 33600 16 16.80

Comments

#### WASTE MANAGEMENT

| Proc | duct |     |    |      |    | LD%                              | Qty   | NOM  | Rate | Тах | Amount | Origin   |
|------|------|-----|----|------|----|----------------------------------|-------|------|------|-----|--------|--|
| -    |      |     |    |      |    | MA TOOM MADE THE PERSON NAMED IN |       |      |      |     |        | areas remarkable firster assess assess assess areas region become decree interes preside |
| 1    | COAL | ASH | 8r | COAL | CO | 100                              | 15.80 | Tons |      |     |        | FORTW  |

900 Cre 11



| NON-HAZARDOUS MANIFEST  | 1. Generator's                            | US EPA ID No.   | М  | anifest Doc N             | 0.                          | 2. Page 1  | of                               | 7:3                                     |  |
|---|---|---|--|---------------------------|-----------------------------|--|----------------------------------|---|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-1 |   | Generator's Site A<br>GEORGIA POW<br>155 CROSSGAT<br>PORT WENTW | /ER PLAN<br>ΓΕ RD.                       | NT KRAFT                  | ling):                      | A. Manifest Number WMNA  B. State Generator's ID |                                  |   |  |
| 5. Transporter 1 Company Name   | 500-1303                                  | 6.  | US EPA I                                 | D Number                  |                             |  | ransporter's IC<br>orter's Phone |   |  |
| 7. Transporter 2 Company Name   |   | 8.  | US EPA I                                 | D Number                  |                             | E. State T                                       | ransporter's IE                  | )                                       |  |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                   | e Address                                 | 10.   | US EPA                                   | ID Number                 |                             | G. State F                                       | acility ID<br>acility Phone      | 912-927-6113                            |  |
| 11. Description of Waste Materials  |   |   |  | 12. Con                   |                             | 13. Total  | 14. Unit<br>Wt./Vol.             | I. Misc. Comments                       |  |
| a. COAL ASH& COAL CONTAI  | MINATED WAS                               |   |  | 501                       | Туре                        | Quantity   | VVC./ VOI.                       | 2                                       |  |
| b.  | WM Profile #                              |   |  |                           |                             |  |                                  | *                                       |  |
| d.  | WM Profile #                              |   |  |                           |                             |  |                                  |   |  |
|   | WM Profile #                              |   |  |                           |                             |  |                                  |   |  |
| J. Additional Descriptions for Ma   | erials Listed Abov                        | re  |  | K. Dispos<br>Cell         | 129                         | Level 65   |                                  |   |  |
| 15. Special Handling Instructions a   | nd Additional Info                        | rmation   |  | 1 0.00                    | (                           | 411  | 9) L                             |   |  |
| Purchase Order # GPC10760   | 293                                       | EME   | RGENCY C                                 | CONTACT / PH              | ONE NO.:                    |  |                                  | TE TO BE SEE                            |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name        | cribed materials a                        | e in proper condition   | istes as de<br>n for trans<br>nre "On be | portation acco            | Part 261 or<br>ording to ap | any applicat<br>oplicable reg                    | ole state law, h<br>ulations.    | nave been fully and    Month   Day Year |  |
| 17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name                            | X Carla                                   | Signatu   | ire                                      |                           | med                         | 02   | 11                               | Month Day Year                          |  |
| Printed Name  |   | Signatu   | ure                                      |                           |                             |  |                                  | Month Day Year                          |  |
| 19. Certificate of Final Treatment, I certify, on behalf of the above lis applicable laws, regulations, perm              | ted treatment faci<br>its and licenses on | the dates listed abo  | ove.                                     |                           |                             |  | was managed                      | in compliance with all                  |  |
| 20. Facility Owner or Operator: C   | ertification of rece                      | Signati   | ure                                      | 40                        | nis manife                  | 7  |                                  | Month Day Year                          |  |
| White- TREATMENT, STORAGE, D  | 1   |   |  | OR #2 COPY<br>TER #1 COPY |                             |  | Yellow- GENEF                    | RATOR #1 COPY                           |  |

Pink- FACILITY USE ONLY



Original Ticket# 1249918

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Vehicle# J09 Volume

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677686

Destination

PO

Profile

3752006AKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 08:37:33 Inbound 1 Out 05/01/2018 08:51:18

Scale

Outbound

Operator

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

RB

Gross Tare Net Tons

62720 1b 23540 lb 39180 lb 19.59

Comments

#### WASTE MANAGEMENT

Amount Origin HOU Rate Tax Qty LD% Product PORTW 19.59 Tons 1 COAL ASH & COAL CO 100



|                       | NON-HAZARDOUS MANIFEST 1  | . Generator's US EPA<br>N / /  |  | anifest Doc I      | No.          | 2. Page 1 d                    | of  | 7:43                              |
|-----------------------|---|--|--|--------------------|--------------|--------------------------------|---|-----------------------------------|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-  | GEO<br>1410221 155<br>POR  | erator's Site Address (If of<br>PRGIA POWER PLAN<br>CROSSGATE RD.<br>IT WENTWORTH, G | IT KRAFT           | ailing):     | A. Manifes                     | MNA   | 6677686<br>Generator's ID         |
|                       | 5. Fransporter 1 Company Name  7. Transporter 2 Company Name  | ading  |  | D Number  D Number |              | D. Transpo                     | ransporter's ID<br>orter's Phone<br>ansporter's ID<br>orter's Phone |                                   |
|                       | 9. Designated Facility Name and Site Ad<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | dress  | 10. US EPA   | ID Number          |              | G. State Fa                    |   | 912-927-6113                      |
| G<br>E<br>N<br>E      | 11. Description of Waste Materials a. COAL ASH& COAL CONTAMIN.  |  |  | 12. Co<br>No.      | Type         | 13. Total<br>Quantity          | 14. Unit<br>Wt./Vol.  | I. Misc. Comments                 |
| R<br>A<br>T<br>O<br>R | b.  | 375200GAKRA Profile #  |  |                    |              |                                |   |                                   |
|                       | d.  | Profile # Profile # s Listed Above   |  | K. Dispos          | sal Location | 1375                           | 74  | Level 65                          |
|                       | 15. Special Handling Instructions and Ad  | dditional Information  |  |                    |              | 3/16                           | ,,,   |                                   |
|                       | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described accurately described, classified and pack Printed Name   | aged and are in prop   | er condition for transpo<br>Signature "On beh  | ned by CFR F       | Part 261 or  | any applicabl<br>plicable regu | e state law, ha<br>lations.   | ave been fully and Month Day Year |
| T R A N S P O R T E R | 17. Transporter 1 Acknowledgement of Printed Name  18. Transporter 2 Acknowledgement of Printed Name  | 56   | Signature  | yll                | le.          | 00                             |   | Month Day Year  Month Day Year    |
| F A C I L I T Y       | 19. Certificate of Final Treatment/Dispot I certify, on behalf of the above listed tre applicable laws, regulations, permits and 20. Facility Owner or Operator: Certific Printed Name  White- TREATMENT, STORAGE, DISPOSA Pink- FACILITY USE ONL | eatment facility, that<br>d licenses on the date<br>ation of receipt of no<br>AL FACILITY COPY | es listed above.   | R #2 COPY          |              | t.                             | vas managed i   | Month Day Year                    |



Original Ticket# 1249916

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/01/2018 Payment Type Credit Account

Manual Ticket# Haulino Ticket#

Route

State Waste Code

Manifest 6677687 Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 08:34:43 Inbound 1 Dut 05/01/2018 08:49:04

Scale

Outbound

RB

Operator

Vehicle# JØ6

0001037

Container Driver

Billing #

Gen EPA ID NR

Check#

Gross Tare

Net

Tons

Volume

57680 1b 23020 lb 34660 16 17.33

Comments

Tax Amount Origin Oty MOU Rate LD% Product PORTW 17.33 Tons COAL ASH & COAL CO 100

Jome Shibut



| WASTE MANAGEMENT  |  |   | •   |             |                               |   |                                     |  |
|---|--|---|---|-------------|-------------------------------|---|-------------------------------------|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US  | EPA ID No.  | Manifest Doc No.  |             | 2. Page 1 o                   | of  | 7:47                                |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374            | , BIN#10221 1  | Generator's Site Add<br>GEORGIA POWEF<br>1.55 CROSSGATE<br>PORT WENTWOR | RD.   | ng):        | A. Manifes                    | MNA   | 6677687<br>Generator's ID           |  |
| 4. Generator's Phone 404- 5. Transporter 1 Company Name 7. Transporter 2 Company Name                             | 506-1365   | 2   | S EPA ID Number   |             | D. Transpo                    | ransporter's IE<br>orter's Phone<br>ransporter's IE |                                     |  |
| 9. Designated Facility Name and Si<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419            | te Address   | 10.   | US EPA ID Number  |             | F. Transpo                    | orter's Phone                                       | 912-927-6113                        |  |
| 11. Description of Waste Materials  |  |   | 12. Conta<br>No.  | Type        | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.                                | I. Misc. Comments                   |  |
| a. COAL ASH& COAL CONTA   | MINATED WASTE  |   | 2010  | DT          | 17                            |   |                                     |  |
| b.  | WM Profile #   |   |   |             |                               |   |                                     |  |
| c.  | WM Profile #   |   |   |             |                               |   |                                     |  |
| J. Additional Descriptions for Ma   | WM Profile #<br>terials Listed Above   |   | K. Disposa  | l Location  |                               |   | 15                                  |  |
| 15. Special Handling Instructions a   | and Additional Informa   | ation   | Cell<br>Grid  | 1           | SU                            | 32  | Level                               |  |
| Purchase Order # GPC10760   | 293  | EMERG   | ENCY CONTACT / PHO  | NE NO.:     |                               |   |                                     |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-de- accurately described, classified an Printed Name | scribed materials are n<br>d packaged and are in   | proper condition fo   | s as defined by CFR Pa<br>r transportation accord<br>'On behalf of" | rt 261 or a | any applicab<br>plicable regi | le state law, hulations.                            | mave been fully and  Month Day Year |  |
| 17. Transporter 1 Acknowledgem Printed Name PAMES SA  | UNENT  | Signature   | mes St  | lepe        | ent                           |   | Month Day Year                      |  |
| Printed Name  |  | Signature   |   | H           |                               |   | Month Day Year                      |  |
| 19. Certificate of Final Treatment I certify, on behalf of the above lise applicable laws, regulations, pern      | ted treatment facility,<br>hits and licenses on the  | e dates listed above.   |   |             |                               | was managed   | in compliance with all              |  |
| 20. Facility Owner or Operator: 0   | Certification of receipt   | of non-hazardous m<br>Signature   | aterials covered by th  | ns manifes  | st.                           |   | Month Day Yea                       |  |
| White- TREATMENT, STORAGE, D  | A STATE OF THE PARTY OF THE PAR |   | NERATOR #2 COPY<br>NSPORTER #1 COPY                                 | )           | Υ                             | 'ellow- GENER                                       | AATOR #1 COPY                       |  |

Pink- FACILITY USE ONLY



Original Ticket# 1249921

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Vehicle# C25

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677688

Destination

PO

Profile Generator 375200GAKŔA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/01/2018 08:41:24

Out 05/01/2018 08:41:24

Scale Inbound 1

Operator RB

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Gross Tare

63020 lb 27040 lb 35980 1b

Net Tons

17,99

Comments

#### WASTE MANAGEMENT

| Pro | duct  | LD% | Oty   | NOM       | Rate | Tax | Amount | Origin   |
|-----|---|-----|-------|-----------|------|-----|--------|--|
|     | agent etter tillet seige som sink, som etter, med stelle keine eller hann etter som stelle keine som stelle |     |       | - 101 -01 |      |     |        | Many same about from Marie Price rates owner critic State State While Area |
| 1   | COAL ASH & COAL CO  | 100 | 17.99 | Tons      |      |     |        | PORTW  |

Total Tax Total Ticket

Millfrag



|                  | WASTE MANAGEMENT  |                              |   |                       |            | -  |                                 |                   |           | -        |  |
|------------------|---|------------------------------|---|-----------------------|------------|--|---------------------------------|-------------------|-----------|----------|--|
|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA        |   | anifest Doc No        | 0.         | 2. Page 1 c                                      | of                              | 7                 | 1.2       | 0        |  |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER  | 1000000                      | erator's Site Address (#<br>DRGIA POWER PLAI  |                       | ling):     | A. Manifes                                       | t Number                        | 66776             | 88        |          |  |
|                  | 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5                                       |                              | CROSSGATE RD.<br>RT WENTWORTH, G              | A 31407               |            |  | B. State G                      | enerator's ID     |           |          |  |
| 1                | 5. Transporter 1 Company Name   | Gradina                      | 6. US EPA                                     | ID Number             |            | C. State Transporter's ID D. Transporter's Phone |                                 |                   |           |          |  |
|                  | 7. Transporter 2 Company Name   |                              |   | ID Number             |            |  | ansporter's ID<br>orter's Phone |                   |           |          |  |
|                  | <ol> <li>Designated Facility Name and Site<br/>SUPERIOR LANDFILL</li> <li>3001 LITTLE NECK ROAD</li> </ol>              | Address                      | 10. US EPA                                    | NID Number            |            | G. State Fa                                      | acility ID                      | 912-927-6113      |           |          |  |
|                  | Savannah, GA 31419  |                              |   | 12. Con               | itainers   | 13. Total  | 14. Unit                        | I. Misc. Comments |           |          |  |
| G                | 11. Description of Waste Materials  |                              |   | No.                   | Туре       | Quantity   | Wt./Vol.                        |                   |           | +        |  |
| N<br>E           | a. COAL ASH& COAL CONTAN  | IINATED WASTE  # 375200GAKRA |   | 0-25                  | DT         | 18   |                                 |                   |           | · Annual |  |
| R<br>A<br>T      | b.  | 27 373200GAMMA               |   | 015.23 a turn         |            |  |                                 |                   |           |          |  |
| O<br>R           | с.  | WM Profile #                 |   |                       |            |  |                                 |                   |           |          |  |
|                  |   | NM Profile #                 |   |                       |            |  |                                 |                   |           |          |  |
|                  | <b>d.</b>   | WM Profile #                 |   |                       | 310        |  |                                 |                   |           |          |  |
|                  | J. Additional Descriptions for Mate   |                              |   | K. Dispos  Cell  Grid | l Location | 0/29   | wg                              | Level             | 2t        | 65       |  |
|                  | 15. Special Handling Instructions an  | d Additional Information     | n   |                       |            | 1  |                                 |                   |           |          |  |
| -                | Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:  | 93                           | EMERGENCY (                                   | CONTACT / PHO         | ONE NO.:   |  |                                 | 13-27-42          |           |          |  |
|                  | I hereby certify that the above-desc<br>accurately described, classified and  | ribed materials are not h    | nazardous wastes as de                        | fined by CFR P        | art 261 or | any applicab                                     | le state law, h<br>ulations.    | ave been full     | y and     |          |  |
|                  | Printed Name  | packaged and are in pro      | Signature "On be                              | half of"              |            |  |                                 | Month             | Day       | Year     |  |
| т                | 17. Transporter 1 Acknowledgemen  | nt of Receipt of Material    | S   |                       |            |  |                                 |                   |           |          |  |
| R<br>A<br>N<br>S | Printed Name Michael Conti  |                              | Signature                                     | wfr                   |            | ·  |                                 | Month             | Day       | Year     |  |
| P<br>O<br>R      | 18. Transporter 2 Acknowledgement   |                              | Signature                                     |                       | 0          |  |                                 | Month             | Day       | Year     |  |
| T<br>E<br>R      | Fillited Name   |                              |   |                       |            |  |                                 | 1                 |           |          |  |
| F<br>A<br>C      | 19. Certificate of Final Treatment/I<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit | ed treatment facility, tha   | at to the best of my kno<br>tes listed above. | wledge, the a         | bove-desc  | ribed waste                                      | was managed                     | in complianc      | e with al | j        |  |
| 1                | 20. Facility Owner or Operator: Ce  | rtification of receipt of r  | non-hazardous material                        | s covered by t        | his manife | st.  |                                 |                   | 1         | 1        |  |
| T<br>Y           | Printed Name  | 160                          | Signature                                     | (B)                   | 0          |  |                                 | Month             | Day       | Year     |  |
|                  | White-TREATMENT, STORAGE, DIS   | POSAL FACILITY COPY          | Blue- GENERAT                                 | OR #2 COPY            |            | Y  | ellow- GENER                    | ATOR #1 CO        | γ         | , _      |  |

Pink- FACILITY USE ONLY



Original Ticket# 1249924

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677689

Destination

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 08:45:41

Out 05/01/2018 08:45:41

Scale Inbound 1

Operator

Vehicle# L07

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

RB

RB

Gross

56120 lb 25240 1b

Tare Net Tons

30880 lb

15.44

Comments

#### WASTE MANAGEMENT

| Pro | duct  | L.D%  | Qty   | HOM                          | Rate | Tax | Amount | Origin  |
|-----|---|---|---|------------------------------|------|-----|--------|---|
| -   | water their light that help their bear done place ages some note their president sides for sides to | ng angan, aming takapi ankan annan pamin anta | a paper paints black since around beauty more described | a man anna man anna man 1884 |      |     |        | man arm of the first plan were ruly come date from their bear and |
| 1   | COAL ASH & COAL CO  | 100   | 15.44   | Tons                         |      |     |        | PORTW   |



| WASTE MANAGEMENT  | The second second second   |                                       |                       |                  |  |                        |                       |  |  |
|---|--|---------------------------------------|-----------------------|------------------|--|------------------------|-----------------------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's   | US EPA ID No. N / A                   | No.                   | 2. Page 1        | of   | 785                    |                       |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                          |  | Generator's Site Add                  |                       | ailing);         | The state of the state of                        | est Number             | 6677689               |  |  |
| 241 RALPH MCGILL BLVD NE  | . BIN#10221  | 155 CROSSGATE                         |                       |                  | W  | 0077003                |                       |  |  |
| ATLANTA, GA 30308-3374  | /  | PORT WENTWOR                          |                       |                  | B. State Generator's ID                          |                        |                       |  |  |
| 4. Generator's Phone 404-   | 506-1365   |                                       | , 552.67              |                  |  |                        |                       |  |  |
| 5. Transporter 1 Company Name   | 1  | 6. U                                  | S EPA ID Number       | 11-11            |  |                        |                       |  |  |
| 11 mstall.  | och's  |                                       |                       |                  | C. State Transporter's ID D. Transporter's Phone |                        |                       |  |  |
| 7. Transporter 2 Company Name   | 71 aarm  | 8. U                                  | S EPA ID Number       |                  |  |                        |                       |  |  |
|   | 1  | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | o Li A io i tuilibei  |                  | E. State T                                       | D                      |                       |  |  |
| O Designated Fig. No. 100   |  | 9                                     |                       |                  |  | F. Transporter's Phone |                       |  |  |
| 9. Designated Facility Name and Si<br>SUPERIOR LANDFILL                   | te Address   | 10. t                                 | JS EPA ID Number      |                  |  |                        |                       |  |  |
| 3001 LITTLE NECK ROAD   |  |                                       |                       |                  | G. State Facility ID                             |                        |                       |  |  |
| Savannah, GA 31419  |  |                                       |                       |                  | H. State F                                       | acility Phone          | 912-927-6113          |  |  |
| 33731113  |  |                                       |                       |                  |  |                        |                       |  |  |
| G 11. Description of Waste Materials                                      |  |                                       | 12. Co                | ntainers<br>Type | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.   | I. Misc. Comments     |  |  |
| a. COAL ASH& COAL CONTAI  | MINATED WAST   | E                                     |                       | - 1              | quartity   | 170,7001.              |                       |  |  |
| N<br>E  |  |                                       | 401                   | 01               | 18   |                        |                       |  |  |
| R WM Profil   | e# 375200GA  | KRA                                   |                       |                  | 10   |                        |                       |  |  |
| д <b>b.</b>   |  |                                       |                       |                  |  |                        |                       |  |  |
| O   |  |                                       | All Carlotte          |                  |  |                        |                       |  |  |
| C.  | WM Profile #   |                                       |                       |                  |  |                        |                       |  |  |
|   |  |                                       |                       |                  |  |                        |                       |  |  |
|   | WM Profile #   |                                       |                       |                  |  |                        |                       |  |  |
| d.  |  |                                       |                       |                  |  |                        |                       |  |  |
|   |  |                                       |                       |                  |  |                        |                       |  |  |
|   | WM Profile #   |                                       |                       |                  | Salar<br>Landon                                  |                        |                       |  |  |
| J. Additional Descriptions for Mate                                       | K. Dispos  | K. Disposal Location                  |                       |                  |  |                        |                       |  |  |
|   |  |                                       | Cell A                | 122              |  | 17-1                   | Level                 |  |  |
|   | Total was a second   |                                       | Grid /                | )10              | 179  | W01                    | 1632F/19              |  |  |
| 15. Special Handling Instructions an                                      | d Additional Inform  | nation                                | · ·                   |                  |  |                        | 000                   |  |  |
|   |  |                                       |                       |                  |  |                        |                       |  |  |
| Purchase Order # GPC107602  | 93   | FMERGEN                               | ICY CONTACT / PHO     | ONE NO ·         |  |                        |                       |  |  |
| 16. GENERATOR'S CERTIFICATE:  |  | 5 Webs                                | compet / The          |                  |  |                        |                       |  |  |
| I hereby certify that the above-description                               | ribed materials are  | not hazardous wastes a                | s defined by CFR Pa   | art 261 or a     | ny applicable                                    | e state law. ha        | ave been fully and    |  |  |
| accurately described, classified and                                      | packaged and are in  | n proper condition for t              | ransportation accor   | ding to app      | olicable regu                                    | lations.               |                       |  |  |
| Printed Name. B + Ilipovid  |  | Signature "O                          | n behalf of"          |                  |  |                        | Month Day Year        |  |  |
| 17. Transporter 1 Acknowledgemen  | nt of Receipt of Mat   | erials                                |                       | -                |  |                        | 5118                  |  |  |
| Printed Name  | 1/1  | Signature                             | 11                    | 1                |  |                        | Month Day Year        |  |  |
| W.100   | 2/5  | M                                     | VI. Leo               | 121              | 1  |                        | K 1 8                 |  |  |
| 18. Transporter 2 Acknowledgemen  | it of Receipt of Mat   | erials **                             |                       |                  |  |                        |                       |  |  |
| Printed Name  |  | Signature                             |                       |                  |  |                        | Month Day Year        |  |  |
|   |  |                                       |                       |                  |  |                        |                       |  |  |
| 19. Certificate of Final Treatment/D                                      | THE STATE OF THE S |                                       |                       |                  |  |                        | THE REPORT            |  |  |
| I certify, on behalf of the above liste                                   | d treatment facility   | , that to the best of my              | knowledge, the ab     | ove-describ      | ed waste wa                                      | as managed in          | n compliance with all |  |  |
| applicable laws, regulations, permits 20. Facility Owner or Operator: Cer |  |                                       | oriale covered by the | la manife :      |  |                        |                       |  |  |
| Printed Name  | emcadon of receipt   | Signature                             | enals covered by th   | is manifest      |  |                        | Month Day Year        |  |  |
| X   | )  | Signature                             | 10)                   |                  |  |                        | Month Day Year        |  |  |
| White-TREATMENT, STORAGE, DISE  | OSAL FACILITY COF  | Y Blue- GENFF                         | RATOR #2 COPY         |                  | Yel  | low- GENERA            | TOR #1-COPY           |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 18

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677690

Destination

PO

Profile Generator Vehicle# 31 Container Driver Check# Billing #

0001037 Gen-EPA ID NR

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFI

Time 05/01/2018 09:01:06 Out 05/01/2018 09:14:42

Scale Inbound 1 Outbound

Operator RB

Grass Tare Net Tons

58080 1b 23500 16 34580 lb 17.29

Comments

Product LD% Qty LIGH Rate Tax Amount Origin COAL ASH & COAL CO 100 17.29 Tons PORTW

Taxion



| -                                    | NON-HAZARDOUS MANIFEST  1. Generator's US E  | PA ID No.  | Manifest Doc                    | No.          | 2. Page 1  | of                          |                           | 1122         |     |  |
|--------------------------------------|--|--|---------------------------------|--------------|--|-----------------------------|---------------------------|--------------|-----|--|
|                                      | 3. Generator's Mailing Address: GEORGIA POWER GILL BLVD NE, BIN#10221  | Generator's Site Address (If different than mailing): GEORGIA POWER PLANT KRAFT 155 CROSSGATE RD. PORT WENTWORTH, GA 31407  6. US EPA ID Number  8. US EPA ID Number   |                                 |              | TO CONSTRUCTION  | est Number /MNA B. State (  | 6677690<br>Generator's ID |              |     |  |
|                                      | 5. Transporter 1 Company Name  7. Transporter 2 Company Name   |  |                                 |              | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID F. Transporter's Phone  G. State Facility ID H. State Facility Phone  912-927-6113 |                             |                           |              |     |  |
|                                      | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10. US EP/   |                                 |              |  |                             |                           |              |     |  |
| G                                    | 11. Description of Waste Materials   | - Louis Allenia de la companya del companya de la companya del companya de la com | 12. Cor                         | ntainers     | 13. Total  | 14. Unit                    | I. Mi                     | sc. Comments |     |  |
| E<br>N<br>E                          | a. COAL ASH& COAL CONTAMINATED WASTE   |  | Basi                            | Туре         | Quantity   | Wt./Vol.                    |                           |              |     |  |
| R<br>A<br>T<br>O<br>R                | b. WM Profile # 375200GAKRA  WM Profile #  c.  |  |                                 |              |  |                             |                           |              |     |  |
|                                      | d.  WM Profile #   |  |                                 |              |  |                             |                           |              |     |  |
|                                      | J. Additional Descriptions for Materials Listed Above  |  | K. Disposa  Cell  Grid          | al Location  | 1370   | 174                         | Level /                   | ,T           |     |  |
|                                      | . Special Handling Instructions and Additional Information While 32  |  |                                 |              |  |                             |                           |              |     |  |
|                                      | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not laccurately described, classified and packaged and are in proprinted Name | EMERGENCY Co   | ned by CFR Pa<br>ortation accor | ert 261 or a | ny applicabl   | e state law, ha<br>lations. | ve been full              |              | ear |  |
| T<br>R<br>A                          | 17. Transporter 1 Acknowledgement of Receipt of Material.  Printed Name  | BK   |                                 |              |  |                             | 5                         | 1 15         | 7   |  |
| N<br>S<br>P<br>O<br>R<br>T<br>E<br>R | 18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name   | 1 yarrer   | Sem                             | · x4         |  |                             | Month                     | 1 1          | ear |  |
| F<br>A<br>C                          | 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, tha applicable laws, regulations, permits and licenses on the dat                       | tes listed above.  |                                 |              |  | as managed in               | compliance                | with all     |     |  |
| TY                                   | 20. Facility Owner or Operator: Certification of receipt of no<br>Printed Name   | on-hazardous materials o<br>Signature  | overed by thi                   | s manifest.  |  |                             | Month                     | Day ye       | Ł   |  |
|                                      | White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   | Blue- GENERATOR  | #2 COPY                         |              | Yel  | low- GENERAT                | OR #1 COPY                |              | 2   |  |

Pink- FACILITY USE ONLY

Original Ticket# 1249926

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677691

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFI

Time

In 05/01/2018 08:48:44 Out 05/01/2018 09:04:03

Scale Inbound 1 RB

Outbound

Operator

Vehicle# JØ4

Container Driver

Billing #

Gen EPA ID NR

0001037

Check#

RB

Gross Tare

61040 lb 23860 15

Net 37180 lb 18.59 Tons

Comments

#### Waste Management

| Pro         | duct         |         | LD% | Qty   | UOM  | Rate | Tax  | Amount  | Origin  |
|-------------|--------------|---------|-----|-------|------|------|--|---|---|
| 100.00 MINT |              |         |     |       |      |      | is pain time when time ones were tools were were | man time sales than your stan most place when there same twee | THE CHES STEE STOP STOP STOP STOP STOP STOP STOP STOP |
| 1           | COAL ASH & ( | COAL CO | 100 | 18.59 | Tons |      |  |   | PORTW   |



| NON-HAZARDOUS MANIFEST                      | 1. Generator's US EF   | PA ID No.                | Manifest Doc No.             | 2             | . Page 1                                 | of                  |                    | T. A.E.  |                 |
|---|--|--------------------------|------------------------------|---------------|--|---------------------|--------------------|--|-----------------|
| NON-HAZARDOUS MANIFES I                     | N /  | Α                        |                              |               |  |                     |                    | DV3  | 2               |
| 3. Generator's Mailing Address:             | Ger  | nerator's Site Address ( | If different then mailing    |               | V NA=10163                               | A. Kironer Property | -                  | 0.0  | )               |
| GEORGIA POWER                               |  | ORGIA POWER PLA          |                              | g): P         |  | st Number           | 6677               | 7691   |                 |
| 241 RALPH MCGILL BLVD NE,                   | PARTICIPATE OF THE PARTICIPATE O | 5 CROSSGATE RD.          | WILKWALI                     |               | W  | MNA                 | 007                | 031  |                 |
| ATLANTA, GA 30308-3374                      | The state of the s |                          | CA 24.407                    |               | 150                                      | B. State C          | Generator's        | i ID   |                 |
|   |  | RT WENTWORTH,            | GA 31407                     |               |  |                     |                    |  |                 |
| 5. Transporter 1 Company Name               | 06-1365  |                          |                              |               | W. W |                     | 4                  |  |                 |
| 3. Transporter 1 Company Name               | 1  | 6. US EPA                | ID Number                    |               | 16                                       |                     |                    |  | -10             |
| MOSTALL                                     | redino   |                          |                              |               | 1  | ransporter's IE     | )                  |  |                 |
| 7. Transporter 2 Company Name               | 71901119   | 8. US EPA                | ID Number                    | D             | ). Transp                                | orter's Phone       |                    |  |                 |
|   | 1  | 0. U3 EFF                | ib Number                    | -             | Ctoto T                                  | ransporter's ID     |                    |  |                 |
|   | N  |                          |                              |               | Transaction and the                      | orter's Phone       |                    |  |                 |
| 9. Designated Facility Name and Site        | Address  | 10. US EP                | A ID Number                  |               |  | Jitter 5 y Horice   |                    |  |                 |
| SUPERIOR LANDFILL                           |  |                          |                              | G             | . State F                                | acility ID          |                    | MINISTER STREET, STREE | TREE CONTRACTOR |
| 3001 LITTLE NECK ROAD                       |  | No. of the last          |                              | 19            |  |                     | 012.0              | 27 (112  |                 |
| Savannah, GA 31419                          |  |                          |                              | 13            | . State r                                | acility Phone       | 912-5              | 927-6113   |                 |
|   |  |                          |                              |               |  |                     |                    |  |                 |
| 3 11. Description of Waste Materials        |  |                          | 12. Contain                  | ners 1        | 3. Total                                 | 14. Unit            |                    |  |                 |
|   |  |                          | No.                          |               | Quantity                                 | Wt./Vol.            | I. M               | lisc. Comments   |                 |
| a. COAL ASH& COAL CONTAM                    | INATED WASTE   |                          | - +                          | 11            | 7  |                     |                    |  |                 |
|   |  |                          | TAUL                         | )             | 8  |                     | 244                |  |                 |
| WM Profile                                  | # 375200GAKRA  |                          | 471                          |               |  |                     |                    |  |                 |
| 4 b.  |  |                          |                              |               |  |                     |                    |  |                 |
|   |  |                          |                              | V 110         |  |                     |                    |  |                 |
| w   | M Profile #  |                          |                              |               |  |                     |                    |  |                 |
| C.  |  |                          | E00340 DESTRUCTION OF STREET |               | SSHILLIER BE                             |                     |                    |  |                 |
|   |  |                          |                              |               |  |                     |                    |  |                 |
| w   | M Profile #  |                          |                              |               |  |                     |                    |  |                 |
| d.  |  |                          |                              |               | CHARLES STATES                           |                     |                    |  |                 |
|   |  |                          | A V A                        | 4             |  |                     |                    |  |                 |
| W   | M Profile #  |                          |                              |               | NW .                                     |                     | anne de la company |  |                 |
| J. Additional Descriptions for Materi       |  |                          | K. Disposal Le               | ocation       |  |                     |                    |  | 10.00           |
|   | Allegan Mark Constraints   |                          | K. Disposar Li               | ocation       | 271                                      | 174                 |                    | 11   | -               |
|   |  |                          | Cell                         | NU            | 100                                      | 16/                 | Level              | (0)  |                 |
|   |  |                          | Grid                         | 1             |  | 27                  |                    |  |                 |
| 15. Special Handling Instructions and       | Additional Information   |                          |                              | 111           | nu                                       | 0)                  |                    |  |                 |
| - N   |  |                          |                              |               | ) /                                      |                     |                    |  |                 |
| 4-1-34                                      |  |                          |                              |               |  |                     |                    |  |                 |
| Purchase Order # GPC1076029                 | 3  | EMERGENCY C              | ONTACT / PHONE               | NO.:          |  |                     |                    |  |                 |
| 16. GENERATOR'S CERTIFICATE:                |  |                          |                              |               |  | X-1-1               |                    |  | -               |
| I hereby certify that the above-describ     | ed materials are not h   | azardous wastes as def   | ned by CER Part              | 261 or any a  | pplicable                                | stato law ke        | o hoor ful         | الد ممط  |                 |
| accurately described, classified and pa     | ckaged and are in prop   | per condition for transp | ortation accordin            | g to applical | ole regula                               | ations.             | re been ful        | iy anu   |                 |
| Printed Name                                |  | Signature "On beh        | alf of"                      |               |  |                     | Month              | Day '  | Year            |
| B. Filipoulch                               | 2 2 - 1  | BY                       |                              |               |  |                     | 5                  | 1 1  | X               |
| 17. Transporter 1 Acknowledgement           | of Receipt of Materials  |                          |                              |               | 1,31                                     |                     |                    | ' '  | V               |
| Printed Name                                | 1100   | Signature                | -1                           | 11            |  |                     | Month              | Day  | Year            |
| A KING 101                                  | 1114   | V                        | uh                           | May           | MAG                                      |                     | 5                  | 1 1  | X               |
| 18. Transporter 2 Acknowledgement           | of Receipt of Materials  | 1                        |                              | 1             | 1  |                     |                    | 1 1  | 7               |
| Printed Name                                | J  | Signature                |                              | 11            | 1  |                     | Month              | Day  | Year            |
|   |  |                          |                              | 4             |  |                     | ALESS (1971)       |  | 10 miles        |
| 10 6-16-1 6-1                               |  |                          | ž                            |               |  |                     |                    |  |                 |
| 19. Certificate of Final Treatment/Disp     |  |                          |                              |               |  |                     |                    |  |                 |
| I certify, on behalf of the above listed to | treatment facility, that   | to the best of my know   | ledge, the above             | -described w  | vaste wa                                 | is managed in       | compliance         | e with all   |                 |
| applicable laws, regulations, permits a     |  |                          | Λ                            |               |  |                     |                    |  | h.              |
| 20. Facility Owner or Operator: Certif      | ication of receipt of no   |                          | covered by this m            | anifest.      |  |                     |                    | 1,   | 1               |
| Printed Name                                | X  | Signature                | 11/                          |               |  |                     | Month              | / Day/   | Year            |
| T   | 1)   |                          | 73                           |               |  |                     | )/                 | 10   |                 |
| White-TREATMENT, STORAGE, DISPOS            | SAL FACILITY COPY  | Blue- GENERATOR          | R #2 COPY                    |               | Yell                                     | ow- GENERAT         | OR #1 COP          | Ý  |                 |

Pink- FACILITY USE ONLY



Original Ticket# 1249927

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677692

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

/ Time

05/01/2018 08:50:57

Out 05/01/2018 09:06:53

Comments

Scale

Inbound 1 Outbound

Operator

Vehicle# JØ7

Gen EPA ID NR

Container

Billing #

Driver

Check#

RB

Gross Tare Net

FLORES TRUCKING LLC

0001037

57600 1b 21940 15 35660 1b

Tons 17.83

Product LD% Qty UOM Rate Tax Amount Origin

COAL ASH & COAL CO 100

17.83 Tons

PORTW



# WANDOUS MANIFEST

| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  c.  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  EVERT Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GREERATOR'S CERTIFICATE:  Hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature on behalf of Pinal Treatment/Disposal  Level:  Mosth Day Year  Printed Name  Signature  Signature  Mosth Day Year  19. Certificate of Final Treatment/Disposal  Level:  Mosth Day Year  19. Certificate of Final Treatment/Disposal  Level:  Mosth Day Year  Signature  Signature  Mosth Day Year  Signature  Mosth Day Year  Signature  Mosth Day Year  Signature  Mosth Day Year  Signature  Signature  Mosth Day Year  Signature  Mosth Day Year  Signature  Signature  Mosth Day Year  Signature  Mosth Day / Year  Signature  Signature  Mosth Day / Year  Signature  Signature  Mosth Day / Year  Signature  Signature  Signature  Signature  Mosth Day / Year  Signature  Signatu | NON-HAZA                        | RDOUS MANIFEST  | 1. Generator's US E  | EPA ID No. I              | Manifest Doc I | No.         | 2. Page 1               | of                     | 7.09                                    |      |  |
|--|---------------------------------|---|--|---------------------------|----------------|-------------|-------------------------|------------------------|---|------|--|
| ACIDATIA, GA 30308-3374  4. Generator's Phone  4. Generator's Phone  5. Pensporter I Company Name  6. US EPA ID Number  C. State Transporter's ID  F. Transporter's Phone  9. Designated Facility Name and Site Address  SUPERIOR LANDFILL  3001 LITTLE NECK ROAD  SAVANDA, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  6. US EPA ID Number  F. State Transporter's ID  F. Transporter's Phone  912-927-6113  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  6. US EPA ID Number  US EPA ID Number  F. State Transporter's ID  F. Transporter's Phone  912-927-6113  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  6. WM Profile #  6. WM Profile #  15. Special Handling Instructions and Additional Information  Fundamental Phone  15. Special Handling Instructions and Additional Information  Fundamental Phone  Find Instructions and Additional Information  Fundamental Phone  16. GRIF Ret 25 to any applicable state law, have been fully and accuracity decorpoint, dissolition and packaged and are in proper condition for transportation according to applicable regulations.  Financy Instruction Phone  Financy Name  17. Transporter 2 Acknowledgement of Receipt of Materials  Financy Name  18. Description of the above lised treatment facility, that to the best of my knowledge, the above described waste was managed in compliance with all applicable lives, regulations, permits and flications on the dates sized above.  19. Caraficate of Final Treatment/Disposal territy, on behalf of the above lised treatment facility, that to the best of my knowledge, the above described waste was managed in compliance with all applicate lives, regulations, permits and flicates sized above.  Printed Name  Financy or Completed Final Treatment/Disposal territy, on behalf of the above ideas treatment facility, that to the best of my knowledge, the above described waste was managed in compliance with all applicate lives, regulations, permit | GEORGIA P                       | OWER  | G  | EORGIA POWER PLA          |                | ailing):    | 1 1 1 1 1 1 1 1 1 1 1 1 |                        | 6677692                                 |      |  |
| 2. Transporter's Company Name  8. US EPAID Number  E. State Transporter's ID F. Transporter's Indexedual Information Fried Name Fried | ATLANTA, O                      | GA 30308-3374   | P  |                           | GA 31407       |             |                         | B. State G             | Generator's ID                          |      |  |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA b.  WM Profile # 375200GAKRA b.  WM Profile # 1. Additional Descriptions for Materials Listed Above  Cell Grid Grid Grid Grid  15. Special Handling Instructions and Additional Information  EMERGENCY CONTACT / PHONE NO:  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO:  Fine Community described, classified and packaged and are in proper condition for transportation according to applicable regulations. Printed Name  Printed Name  Signature  Month Only Year  North Only Year  North Only Year  Printed Name  Signature  Month Only Year  North Only Year  North Only Year  Printed Name  Signature  Month Only Year  North Only Year  Printed Name  Signature  Month Only Year  North Only Year  Printed Name  Signature  Signatu | 1/20                            | Stal 6  | pradina  |                           |                |             | D. Transpo              | D. Transporter's Phone |   |      |  |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile # 375200GAKRA  b.  WM Profile # 375200GAKRA  d.  WM Profile # 375200GAKRA  b.  WM Profile # 375200GAKRA  d.  WM Profile # 375200GAKRA  b.  WM Profile # 375200GAKRA  D.  WM Profile # 375200GAKRA  D. | SUPERIOR L                      | r's Mailing Address: POWER H MCGILL BLVD NE, BIN#10221 GA 30308-3374 r's Phone 404-506-1365 er 1 Company Name er 2 Company Name er 2 Company Name of Facility Name and Site Address LANDFILL LE NECK ROAD n, GA 31419 ion of Waste Materials SH& COAL CONTAMINATED WASTE  WM Profile #  WM Profile #  WM Profile #  al Descriptions for Materials Listed Above  Handling Instructions and Additional Information  der # GPC10760293 |  | 10. US EP                 | A ID Number    |             | F. Transpo              | orter's Phone          |   |      |  |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GREREATORS CERTRICATE:  I hereby certify that the above described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Princed Name  Princed Name  Signature  Nouth Day Year  19. Certificate of Final Treatment/Disposal  Lereity, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable law, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this mahifest.  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal  Lereity, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable law, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this mahifest.  | G 11. Descriptio                | n of Waste Materials  |  |                           | A 200 PM       | 1 222       |                         |                        | I. Misc. Comments                       |      |  |
| b.  WM Profile #  d.  WM Profile #  1. Additional Descriptions for Materials Listed Above  Evel Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: 11 hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Printed Name  Signature On behalf of Month Day Year  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal 1 certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receip? of non-hazardous magerials covered by this manifest.  Printed Name  Signature  Finited Name  Signature  Month Day Year  | a. COAL AS                      |   |  |                           | 707            | DI          | 17                      | Weyron.                |   |      |  |
| WM Profile #   J. Additional Descriptions for Materials Listed Above   K. Disposal Location   Cell   Level   Grid      | T<br>O<br>R                     |   |  | A                         |                |             |                         |                        |   |      |  |
| WM Profile #  J. Additional Descriptions for Materials Listed Above    Cell  |                                 | v   | VM Profile #   |                           | a madisana     |             |                         | Later a superior for   |   |      |  |
| J. Additional Descriptions for Materials Listed Above    Cell  | a.                              |   | and the same of th |                           |                |             |                         |                        |   |      |  |
| Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature "On behalf off" Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Signature  | J. Additional                   |   |  |                           | Cell           | al Location | 30                      | 174                    | Level (4)                               |      |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature "On behalf of"  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Nonth Day Year  | 15. Special Ha                  | andling Instructions and  | d Additional Informati   | ion                       | Tunu           | (           | M                       | 636                    |   | #-   |  |
| I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature "On behalf of"  Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Nonth Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Nonth Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Nonth Day Year  Nonth Day Year  | Purchase Orde                   | er # GPC1076029   | 93   | EMERGENCY (               | CONTACT / PH   | ONE NO.:    |                         |                        |   |      |  |
| 17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  | I hereby certif                 | y that the above-descr<br>scribed, classified and p   |  | roper condition for trans | portation acco |             |                         |                        |   | Year |  |
| Printed Name  Signature  Nonth Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  Month Day Year   | B.+.                            | lipovich  | t of Receipt of Materi   | 38                        | 7 6            | ).          |                         |                        | I S I I                                 | 8    |  |
| Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year   | N ELZ                           | JAH GKB   | HAM  | X EUGH                    | 3              | Ise         | V                       |                        | 100000000000000000000000000000000000000 | Year |  |
| I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  |                                 |   | t of Receipt of Materi   |                           |                | 100         |                         |                        | Month Day Y                             | Year |  |
| Printed Name  Signature  Day / Year  | I certify, on be applicable law | ehalf of the above listed<br>vs, regulations, permits   | d treatment facility, the and licenses on the d  | dates listed above.       |                | _           |                         | vas managed ii         | n compliance with all                   |      |  |
|  |                                 |   | inication of receipt of  |                           | covered by t   | nis manifes |                         |                        | 5/14                                    | Year |  |

Pink- FACILITY USE ONLY



Original Ticket# 1249937

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677693

Destination

PA

Profile

Generator

375200GAKRA (CDAL ASH & CDAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/01/2018 09:03:49 Dut 05/01/2018 09:21:37

Scale

Operator

Vehicle# j10

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Inbound 1 Outbound RB RB

Gross Tare

57140 lb 20800 1b

Net Tons 36340 lb

18.17

Comments

### WASTE MANAGEMENT

| Pro | duct               | LD% | Qty   | UOM  | Rate   | Tax  | Amount   | Origin |
|-----|--------------------|-----|-------|------|--|--|--|--------|
| 1   | COAL ASH & COAL CO | 100 | 18.17 | Tons | The same and man and the same a | in your about your type him Jack wise while been | James under haven deline proper matter, delay maken avail, matter haven avail, men | PORTW  |
|     | 2 11               |     |       |      |  | -  | - 4  |        |
|     | Garle With         |     |       |      |  |  |  |        |
|     |                    |     |       |      |  |  | Total Tax  |        |



| NON-HAZARDOUS MANIFEST 1. Ge   | nerator's US EPA ID No. N / A  | Manifest Doc I         | No.          | 2, Page 1     | of   | ,                 | 7'1~         |      |
|--|--|------------------------|--------------|---------------|--|-------------------|--------------|------|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-136   | Generator's Site Address GEORGIA POWER PI 0221 155 CROSSGATE RD PORT WENTWORTH | ANT KRAFT              | ailing):     |               | est Number /MNA  B. State                                      | 667<br>Generator' | 7693         |      |
| 7. Transporter 2 Company Name  | lina   | PA ID Number           |              | D. Transp     | ransporter's lorter's Phone<br>ransporter's I<br>orter's Phone | D                 |              |      |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10. US E   | PA ID Number           |              | G. State F    |  |                   | 927-611      | 3    |
| 11. Description of Waste Materials   |  |                        | ntainers     | 13. Total     | 14. Unit   |                   | Aisc. Commer | nte  |
| a. COAL ASH& COAL CONTAMINATE  |  | No.                    | Type DT      | Quantity      | Wt./Vol.   |                   |              |      |
| WM Profile # 375   | 5200GAKRA<br>ile#  |                        |              |               |  |                   |              |      |
| d. WM Profi  | le#  |                        |              |               |  |                   |              |      |
| WM Profi<br>J. Additional Descriptions for Materials Listo   | ed Above   | K. Disposa  Cell  Grid | al Location  | 320           | 179  | Level             | 6            | 5    |
| 15. Special Handling Instructions and Addition Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described mat accurately described, classified and packaged  | EMERGENCY erials are not hazardous wastes as de                                | CONTACT / PHC          | ert 261 or a | ny applicable | e state law, ha  | ave been fu       | lly and      |      |
| Printed Name  3 + 1 + 2 + 2 + 2 + 2 + 2 + 2 + 2 + 2 + 2  | Signature "On be   |                        | n and to app | nicable regu  | iations.   | Month             | Day          | Year |
| Printed Name Print | Signature  | 4.7/                   | Cup          | 2             |  | Month 5           | Day          | Year |
| Printed Name   | Signature  | 190                    |              |               |  | Month             | Day          | Year |
| 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatme applicable laws, regulations, permits and licen 20. Facility Owner or Operator: Certification Printed Name  | ses on the dates listed above.   |                        |              |               | as managed ir  | n compliand       | ce with all  | year |
| White- TREATMENT, STORAGE, DISPOSAL FAC  | CILITY COPY Blue- GENERATO   | OR #2 COPY             |              | Yel           | low- GENERA  | TOR #1 COL        | DY DY        |      |

Pink- FACILITY USE ONLY



Original Ticket# 1249939

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL Vehicle# 1

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677694

Destination

Ph

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 09:06:18 Inbound 1

Dut 05/01/2018 09:06:18

Scale

Operator RB

RB

Gross

Tare

Net

Tons

66000 lb 29480 1b 36520 lb

18.26

Comments

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Origin Amount Qty UOM Rate Tax LD% Product RICEBORO 1 COAL ASH & COAL CO 100 18.26 Tons



| WASTE MANAGEMENT  | 1. Generator's US EPA I                                   | D No. M                       | anifest Doc No.             | 2. Page 1 c        | of              |                | 7          |            |
|---|---|-------------------------------|-----------------------------|--------------------|-----------------|----------------|------------|------------|
| NON-HAZARDOUS MANIFEST  | N / A   | *                             |                             |                    |                 | 8              |            | 7          |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | GEOF  | ator's Site Address (If o     |                             | A. Manifes         | MNA             | 66776          |            |            |
| 241 RALPH MCGILL BLVD NE, E<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-50                              |   | CROSSGATE RD.<br>WENTWORTH, G | A 31407                     |                    | B. State (      | Generator's II | )          |            |
| 5. Transporter 1 Company Name   | 2 redine  | 6. US EPA I                   | D Number                    |                    | ransporter's II | D<br>D         |            |            |
| 7. Transporter 2 Company Name   | 1,001.9   | 8. US EPA I                   | D Number                    | E. State Tr        | ransporter's I  | D              |            |            |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL  | Address   | 10. US EPA                    | ID Number                   | G. State Fa        | acility ID      | 912-93         | 27-6113    |            |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |   |                               | 12. Containers              |                    | 14. Unit        |                |            |            |
| G 11. Description of Waste Materials  |   |                               | No. Ty                      |                    | Wt./Vol.        | I. Mis         | c. Comment | 5          |
| a. COAL ASH& COAL CONTAM  |   |                               | LMFID                       | 118                |                 |                | pumpinga   |            |
| R WM Profile  | # 375200GAKRA   |                               | EAUTH                       |                    |                 |                |            |            |
| T   | VM Profile #  |                               |                             |                    |                 |                |            |            |
| c.  | NM Profile #  |                               |                             |                    |                 |                |            |            |
| d.  |   |                               |                             |                    |                 |                |            |            |
| J. Additional Descriptions for Mate   | WM Profile #<br>erials Listed Above                       |                               | K. Disposal Loc  Cell  Grid | ation 37           | 20129           | Level          | 61         | , <b>X</b> |
| 15. Special Handling Instructions an  | d Additional Information                                  |                               | Jone                        | ( 8) /·            | 6)              |                | 7          |            |
| Purchase Order # GPC107602  | 93  | EMERGENCY O                   | CONTACT / PHONE I           | NO.:               |                 |                |            |            |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descraceurately described, classified and            | ribed materials are not ha                                | azardous wastes as de         | fined by CFR Part 20        | 61 or any applicab | ole state law,  | have been fu   | lly and    |            |
| Printed Name D + 1/1 Povid  |   | Signature On be               | half of"                    | app                |                 | Month 5        | Day        | Year       |
| 17. Transporter 1 Acknowledgement Printed Name  | nt of Receipt of Materials                                | Signature                     | M                           |                    |                 | Month          | Day        | Year       |
| 18. Transporter 2 Acknowledgement Printed Name  | nt of Receipt of Materials                                | Signature                     |                             |                    |                 | Month          | Day        | Year       |
| 19. Certificate of Final Treatment/E I certify, on behalf of the above liste applicable laws, regulations, permit | ed treatment facility, that<br>is and licenses on the dat | es listed above.              |                             |                    | was manage      | d in complian  | ce with al | 1          |
| 20. Facility Owner or Operator: Ce  | rtification of receipt of no                              | on-hazardous material         | ls covered by this m        | anifest.           |                 | Menth          | Day        | Year       |
| Printed Name  | VD  | Signature                     | 705                         |                    | Yellow- GENE    |                | /          | 18         |

Pink- FACILITY USE ONLY



Original Ticket# 1249941

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Manifest 6677695 Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 09:09:02 Out 05/01/2018 09:09:02

Scale Inbound 1

RB

Operator

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Gross Tare

59620 lb 27500 lb

Net Tons

Vehicle# 5306 Volume

32120 lb 16.06

Comments

LD% Qty UOM Rate Origin Product Tax Amount 1 COAL ASH & COAL CO 100 16.06 Tons PORTW



| NON-HAZARDOUS MANIFEST  | 1. Generator's US EP   |   | Manifest Doc No.      | 2. Page 1 o         | of              | 8.00   |  |
|---|--|---|-----------------------|---------------------|-----------------|--|--|
|   | N /  |   | 0 1                   |                     |                 | 6:20   |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                        | GE   | nerator's Site Address<br>ORGIA POWER PL    | ANT KRAFT             | A. Manifes          | t Number  WNA   | 6677695  |  |
| 241 RALPH MCGILL BLVD NE,   |  | 5 CROSSGATE RD.                             |                       |                     | B. State (      | Generator's ID   |  |
| ATLANTA, GA 30308-3374  |  | ORT WENTWORTH                               | , GA 31407            | M-VI                |                 |  |  |
|   | 06-1365  | 6. US EP                                    | A ID Number           |                     |                 |  |  |
| 5. Transporter 1 Company Name   | 1  | 6. US EP                                    | A ID Number           | C. State Ti         | ansporter's II  | D  | A CONTRACTOR AND A CONT |
| 10054616  | radina   |   |                       | D. Transpo          | orter's Phone   |  |  |
| 7. Transporter 2 Company Name   | 1.00.10  | 8. US EP                                    | A ID Number           | F Chatalan          | ansporter's II  |  |  |
|   |  |   |                       | C                   | orter's Phone   |  |  |
| 9. Designated Facility Name and Site                                    | e Address  | 10. US E                                    | PA ID Number          |                     |                 |  |  |
| SUPERIOR LANDFILL   |  |   |                       | G. State F          | acility ID      |  |  |
| 3001 LITTLE NECK ROAD   |  | 4   |                       | H. State F          | acility Phone   | 912-927-611  | L3   |
| Savannah, GA 31419  |  |   |                       |                     |                 |  |  |
|   |  |   | 12. Container         | s 13. Total         | 14. Unit        | William Market and the control of th |  |
| 11. Description of Waste Materials                                      |  | A Charles                                   |                       | ype Quantity        | Wt./Vol.        | I. Misc. Comme   | ents   |
| a. COAL ASH& COAL CONTAN  | INATED WASTE   |   | 120/00                | 1 17                |                 |  |  |
| N<br>=  |  |   | 53001                 | )     (             |                 |  |  |
| WM Profile  | # 375200GAKRA  | <del>\</del>                                |                       |                     |                 |  |  |
| \ b.  |  |   |                       |                     |                 |  |  |
|   |  |   |                       |                     |                 |  |  |
| C.  | WM Profile #   |   | DANGER TRANSPORT      |                     |                 |  |  |
|   |  |   |                       |                     |                 |  |  |
|   | WM Profile #   |   |                       |                     |                 |  |  |
| d.  |  |   |                       |                     |                 |  |  |
|   |  |   |                       |                     |                 |  |  |
|   | WM Profile #   |   |                       |                     |                 |  |  |
| J. Additional Descriptions for Mate                                     | erials Listed Above  |   | K. Disposal Lo        | cation              | 1175            | , 1  | 7  |
|   |  |   | Cell                  | NOU                 | 110             | Level (0)  | 1  |
|   |  |   | Grid                  | 1 20)               | 103L            |  |  |
| 15. Special Handling Instructions an                                    | nd Additional Informati  | on  |                       | 0911                | 0               |  |  |
|   | S  |   |                       |                     | 4               |  |  |
|   | 202  | EMEDGENG                                    | Y CONTACT / PHONE     | NO :                |                 |  |  |
| Purchase Order # GPC107602  | 293  | EMERGENC                                    | r contract / t none   |                     |                 |  |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-desc      | rihed materials are not  | t hazardous wastes as                       | defined by CFR Part.2 | 61 or any applicab  | le state law, l | have been fully and  |  |
| accurately described, classified and                                    | packaged and are in p  | roper condition for tra                     | nsportation according | g to applicable reg | ulations.       |  |  |
| Printed Name  |  | Signature "On                               | behalf of             |                     |                 | Month Day  | Year   |
| 13 Filipovich   | - CO Lat - Chilatani   | 1   |                       |                     |                 | 1011   | 110  |
| 17. Transporter 1 Acknowledgemen  | nt of Receipt of Materi  | Signature                                   | 1                     |                     |                 | Month Day  | Year   |
| Printed Name  | und  | / Walling and Wall                          | rice                  | Tarne               |                 | 51   | 18   |
| P /19 Transporter 2 Acknowledgeme                                       |  | als   |                       |                     |                 |  |  |
| R Printed Name  |  | Signature                                   | ) \ /                 |                     |                 | Month Day  | Year   |
| T Trinted Name  |  | -11   |                       |                     |                 |  |  |
| 19. Certificate of Final Treatment/I                                    | Disposal   |   |                       |                     |                 |  |  |
| I certify, on behalf of the above list                                  | p  |   | 1 1 1 1 - 1           | -described waste    | was managed     | in compliance with   | all  |
| A I certify, on behalf of the above list.                               | ed treatment facility, the   | hat to the best of my k                     | nowledge, the above   | acsembed muste      |                 | TALL THE PARTY OF  |  |
| c applicable laws, regulations, permit                                  | ed treatment facility, the country of the country o | dates listed above.                         |                       | 1                   | was manage      |  |  |
| applicable laws, regulations, permit 20. Facility Owner or Operator: Ce | ed treatment facility, the country of the country o | dates listed above.<br>f non-hazardous mate |                       | 1                   |                 |  | Terror a   |
| c applicable laws, regulations, permit                                  | ed treatment facility, the country of the country o | dates listed above.                         |                       | 1                   |                 | Month Day  | Year   |

Pink- FACILITY USE ONLY



Original Ticket# 1249954

Customer Name GEORGIAPOWE3752006AKRA GEORGI Carrier NUMBERS INTERPRISE Vehicle# 5307 Volume

Ticket Date 05/01/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677696

Destination

PO

Profile 375200GAKRA (CDAL ASH & CDAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 09:24:43 Inbound 1

Out 05/01/2018 09:24:43

Scale

Operator RB

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Gross Tare

56700 1b 24080 lb 32620 1b

16.31

Net Tons

Comments

### WASTE WANAGEMENT

Origin Rate Tax Amount Qty MOU LD% Product PORTW 1 COAL ASH & COAL CO 100 16.31 Tons



|  |  |  |   |                          |                                |                         |                         | -10-       |
|--|--|--|---|--------------------------|--------------------------------|-------------------------|-------------------------|------------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US管PA<br>N /  |  | ifest Doc N                                 | 0.                       | 2. Page 1 o                    | f.                      | 8                       | 24         |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | 16075.73   | erator's Site Address (If diff<br>DRGIA POWER PLANT  |   | ling):                   | A. Manifes                     | t Number<br><b>VINA</b> | 667769                  | 96         |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | POF  | CROSSGATE RD.<br>RT WENTWORTH, GA  | 31407                                       |                          |                                | B. State C              | Generator's ID          |            |
|  | 506-1365   | 6. US EPA ID   | 61  |                          |                                |                         |                         |            |
| 5. Transporter 1 Company Name  | 1  | 6. US EPA ID   | Number                                      |                          | C. State Tr                    | ansporter's II          | )                       |            |
| ('Dastal t   | Signa  |  |   |                          | D. Transpo                     | rter's Phone            |                         |            |
| 7. Transporter 2 Company Name  | 1  | 8. US EPA ID   | Number                                      |                          | E State Tr                     | ansporter's II          |                         |            |
|  | V  |  |   |                          | - Hardy Color Manual Color     | rter's Phone            |                         |            |
| 9. Designated Facility Name and Sit  | e Address  | 10. US EPA II  | Number 1                                    |                          |                                |                         |                         |            |
| SUPERIOR LANDFILL  |  |  |   |                          | G. State Fa                    |                         | 012.02                  | . 6112     |
| 3001 LITTLE NECK ROAD  | 1  |  |   |                          | H. State Fa                    | acility Phone           | 912-927                 | 7-6113     |
| Savannah, GA 31419   |  |  |   |                          |                                |                         |                         |            |
| 11. Description of Waste Materials   |  |  | 12. Cor<br>No.                              | tainers<br>Type          | 13. Total<br>Quantity          | 14. Unit<br>Wt./Vol.    | I. Misc.                | Comments   |
| a. COAL ASH& COAL CONTAIN  | MINATED WASTE  |  | _ ~_  | ~-                       | 177                            |                         |                         |            |
|  |  | E  | 301   | U                        | 16                             |                         |                         |            |
|  | e# 375200GAKRA   |  |   |                          |                                |                         |                         |            |
| b.   |  |  |   |                          |                                |                         |                         |            |
|  | WM Profile #   |  |   |                          |                                |                         |                         |            |
| c.   | WWW.F.Tomic w  |  |   |                          |                                |                         |                         |            |
| (5/6)  |  |  |   |                          |                                |                         |                         |            |
|  | WM Profile #   |  |   | nesien                   |                                | 15.                     |                         |            |
| d.   |  |  |   | -                        |                                |                         |                         |            |
|  | waa o - et- #  |  |   |                          |                                |                         |                         |            |
| 0  | WIVI PROTILE #   |  | K. Dispos                                   | al Location              | 117                            | 1.71                    |                         |            |
| J. Additional Descriptions for Mat   | WM Profile #<br>erials Listed Above  |  |   |                          |                                |                         |                         | A 8 700    |
|  | The second secon |  | Cell  |                          | 1136                           | N167                    | Level                   | 61         |
|  | The second secon |  | Cell<br>Grid                                |                          | VSC                            | 163                     | Level                   | 6)         |
|  | erials Listed Above  | n  |   | 1                        | A                              | 163                     | Level                   | 6)         |
| J. Additional Descriptions for Mat   | erials Listed Above  | n  |   | (                        | N3C                            | 163                     | Level                   | 6)         |
| J. Additional Descriptions for Mat   | erials Listed Above<br>nd Additional Informatio  | n<br>EMERGENCY CO  | Grid  | ONE NO.:                 | N S C                          | 163                     | Level                   | 6)         |
| J. Additional Descriptions for Mat  15. Special Handling Instructions an  Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:   | nd Additional Information  | EMERGENCY CO   | Grid<br>NTACT / PH                          |                          | W Constant                     | 163                     | 2                       | 6)         |
| J. Additional Descriptions for Mat.  15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: Legeby certify that the above-description of the properties  | nd Additional Information  293   | EMERGENCY CO   | Grid  NTACT / PH  ed by CFR F               | Part 261 or              | any applicab                   | / b 3                   | 2                       | (and       |
| J. Additional Descriptions for Material Section 15. Special Handling Instructions at Purchase Order # GPC107602 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description of the property of th | nd Additional Information  293   | EMERGENCY CO<br>hazardous wastes as defin<br>oper condition for transpo  | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or              | any applicab                   | le state law, l         | 2                       | and Day Ye |
| J. Additional Descriptions for Material Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description described, classified and Printed Name  | nd Additional Information  293  cribed materials are not I packaged and are in pro   | emergency co<br>hazardous wastes as defin<br>oper condition for transpo<br>Signature On beha   | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or              | any applicab                   | le state law, I         | nave been fully         |            |
| J. Additional Descriptions for Material Section 15. Special Handling Instructions and Purchase Order # GPC107602 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description of the printed Name Printed Name   | nd Additional Information  293  cribed materials are not I packaged and are in pro   | hazardous wastes as definoper condition for transpo  | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or              | any applicab                   | /b3                     | nave been fully         | Day Ye     |
| J. Additional Descriptions for Material Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described described, classified and Printed Name  | nd Additional Information  293  cribed materials are not I packaged and are in pro   | emergency co<br>hazardous wastes as defin<br>oper condition for transpo<br>Signature On beha   | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or              | any applicab                   | /b3                     | nave been fully         |            |
| J. Additional Descriptions for Material Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described accurately described, classified and Printed Name  17. Transporter 1 Acknowledgemee Printed Name  | nd Additional Information 293 cribed materials are not I   | EMERGENCY CO hazardous wastes as defin oper condition for transpo Signature "On beha ls Signature  | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or              | any applicab                   | le state law, I         | nave been fully         | Day Ye     |
| J. Additional Descriptions for Material Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement  | nd Additional Information 293 cribed materials are not I   | EMERGENCY CO hazardous wastes as defin oper condition for transpo Signature "On beha ls Signature  | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or              | any applicab                   | le state law, I         | nave been fully         | Day Ye     |
| J. Additional Descriptions for Mat  15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement   | nd Additional Information 293 cribed materials are not I   | hazardous wastes as definoper condition for transpo<br>Signature "On beha  | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or              | any applicab<br>pplicable regu | le state law, I         | Month Month             | Day Ye     |
| J. Additional Descriptions for Material Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name   | nd Additional Information 293 cribed materials are not less and are in proceed and are in | hazardous wastes as definoper condition for transpo Signature On behalts Signature Signature Signature   | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or ording to ap | pplicable regu                 | alations.               | Month Month Month Month | Day Ye     |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/ I certify, on behalf of the above list   | nd Additional Information 293  cribed materials are not I packaged and are in proceed and are in proceed and are in proceed are of Receipt of Material and of Receipt of Material (Disposal ted treatment facility, the  | EMERGENCY CO  hazardous wastes as defin oper condition for transpo  Signature "On beha  Is  Signature  Signature  at to the best of my know                    | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or ording to ap | pplicable regu                 | alations.               | Month Month Month Month | Day Ye     |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/ I certify, on behalf of the above list applicable laws, regulations, perminted Name printed Name   | nd Additional Information 293  cribed materials are not I packaged and are in proceed and are in proceed and are in proceed are of Receipt of Material and Icent of Receipt of Material and Icented treatment facility, the its and licenses on the dates.   | EMERGENCY CO  hazardous wastes as defin oper condition for transpo  Signature "On beha  Is  Signature  Signature  at to the best of my know otes listed above. | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or ording to ap | ibed waste                     | alations.               | Month Month Month Month | Day Ye     |
| J. Additional Descriptions for Mate 15. Special Handling Instructions at Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/ Legrify, on behalf of the above list   | nd Additional Information 293  cribed materials are not I packaged and are in proceed and are in proceed and are in proceed are of Receipt of Material and Icent of Receipt of Material and Icented treatment facility, the its and licenses on the dates.   | EMERGENCY CO  hazardous wastes as defin oper condition for transpo  Signature "On beha  Is  Signature  Signature  at to the best of my know otes listed above. | Grid  NTACT / PH  ed by CFR F  rtation acco | Part 261 or ording to ap | ibed waste                     | alations.               | Month Month Month Month | Day Ye     |

Pink- FACILITY USE ONLY

Original Ticket# 1249948

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Vehicle# C26

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Manifest 6677697

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

In 05/01/2018 09:16:31 Out 05/01/2018 09:16:31

Scale Inbound 1

Operator RB

RB

Gross Tare Net

Volume

62520 lb 2598Ø 1b 36540 lb

Tons

18.27

Comments

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

| Pri      | oduct              | LD% | Qty   | LIOM | Rate | Tax | Amount   | Origin |
|----------|--------------------|-----|-------|------|------|-----|--|--------|
| 2000.000 |                    |     |       |      |      |     | were their street terms thank street extent which states them below when |        |
| 1        | COAL ASH & COAL CO | 100 | 18.27 | Tons |      |     |  | FORTW  |



| WASTE MANAGEMENT   | 1. Generator's US EP                                 | 'A ID No. Ma   | nifest Doc No.         | 2. Page 1 c                            | of                                     | Commission    | 110        | 1      |
|--|--|--|------------------------|--|--|---------------|------------|--------|
| NON-HAZARDOUS MANIFEST   | N /  | A  |                        |  | No. of                                 | 8             | 13         | 0      |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,                                  | GE<br>BIN#10221 15                                   | nerator's Site Address (If dif<br>ORGIA POWER PLAN<br>5 CROSSGATE RD.<br>ORT WENTWORTH, GA | Γ KRAFT                | A. Manifes                             | MNA                                    | 66776         |            |        |
| ATLANTA, GA 30308-3374  4. Generator's Phone 404-5   | 06-1365  | IKI WENIWOKIH, GA  | 31407                  |  |  |               |            |        |
| 5. Transporter 1 Company Name  | 00-1303  | 6. US EPA ID   | Number                 |  | ansporter's IC                         |               |            |        |
| 7. Transporter 2 Company Name  | Tours  | 8. US EPA ID   | Number                 |  | ansporter's ID<br>orter's Phone        |               |            |        |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD                                   | e Address  | 10. US EPA I   | D Number               | G. State F                             | acility ID                             | 912-92        | 27-6113    |        |
| Savannah, GA 31419   |  |  |                        |  |  |               |            |        |
| 11. Description of Waste Materials   |  |  | 12. Containers No. Typ | e 13. Total<br>Quantity                | 14. Unit<br>Wt./Vol.                   | I. Mis        | c. Comment | ts     |
| a. COAL ASH& COAL CONTAN   | INATED WASTE  # 375200GAKRA                          | (  | 26 P                   | 117                                    |  |               |            |        |
| b. Wiki Profile  | =# 3732000711(10                                     |  |                        |  | III III III III III III III III III II |               |            |        |
|  | WM Profile #   |  |                        |  |  |               |            |        |
| C  | WM Profile#  |  |                        |  |  |               |            |        |
| d.  J. Additional Descriptions for Mat   | WM Profile #<br>erials Listed Above                  |  | K. Disposal Loca       | ation                                  | 16                                     |               |            |        |
|  | 1.4.11   |  | Cell<br>Grid           | NSU                                    | 137                                    | Level •       | 7          | 1      |
| 15. Special Handling Instructions at   | id Additional Informati                              | on   |                        | 111                                    |  |               |            |        |
| Purchase Order # GPC107602   | 293  | EMERGENCY CO   | NTACT / PHONE N        | 0.:                                    |  |               |            |        |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and          | ribed materials are no                               | t hazardous wastes as defi   | ned by CFR Part 26     | 1 or any applicab<br>to applicable reg | le state law, h<br>ulations.           | nave been ful | ly and     |        |
| Printed Name B. Fili Dovich  |  | Signature "On beha   | alf of"                |  |  | Month         | Day        | Year   |
| T 17. Transporter 1 Acknowledgeme  | Edy  | Signature  | Edy                    |  |  | Month 5       | Day        | Year   |
| Printed Name   | nt of Receipt of Materi                              | Signature  |                        |  |  | Month         | Day        | Year   |
| 19. Certificate of Final Treatment/ I certify, on behalf of the above list applicable laws, regulations, permi | ed treatment facility, t<br>ts and licenses on the o | dates listed above.  |                        |  | was managed                            | in complian   | ce with a  | II     |
| 20. Facility Owner or Operator: Co   | ertification of receipt o                            | f non-hazardous materials<br>Signature   | covered by this ma     | inifest.                               |  | Month         | Day        | Year.  |
| White- TREATMENT, STORAGE, DI  | 1  | Blue- GENERATO<br>Gold- TRANSPORT  |                        | Y                                      | 'ellow- GENER                          | ATOR #1 CO    | PY /       | -1 - V |

Pink- FACILITY USE ONLY



Original Ticket# 1249997

| /<br>160 lb<br>1040 lb |
|------------------------|
| 1                      |
|                        |
|                        |
|                        |
|                        |
|                        |
|                        |
|                        |

Total Tax Total Ticket

Millfryn



| WASTE MANAGEMENT   |                        |             |                                 |  |              |               |                |                |                   |  |
|--|------------------------|-------------|---------------------------------|--|--------------|---------------|----------------|----------------|-------------------|--|
| NON-HAZARDOUS MANIFEST  1. Generator                           | 's US EPA II<br>N / A  | D No.       | Ma                              | nifest Doc N   | 0.           | 2. Page 1 c   |                | 9              | :4                | 6  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER               | 100 March 1970 Control |             | e Address (If di<br>OWER PLAN   |  | lling):      | A. Manifes    | t Number       | 66776          | 598               |  |
| 241 RALPH MCGILL BLVD NE, BIN#10221<br>ATLANTA, GA 30308-3374  |                        |             | ATE RD.<br>WORTH, GA            | A 31407  |              |               | B. State (     | Generator's II | )                 |  |
| 4. Generator's Phone 404-506-1365                              |                        | 6.          | US EPA ID                       | Number   |              |               |                |                | 1100              |  |
| 5. Transporter 1 Company Name                                  | 00                     | 0.          | U3 EFA IL                       | Number   |              |               | ansporter's II | )              | MO. 7 10 4 1 10 1 | PROTECTION OF THE PROTECTION O |
| [W319] D10011  | 101                    | 8.          | US EPA ID                       | Number   |              | D. Transpo    | orter's Phone  |                |                   |  |
| 7. Transporter 2 Company Name                                  | 1                      | ٥.          | US EPA IL                       | , Mullibei   |              |               | ansporter's II | )              |                   |  |
|  |                        | 10          | LIC EDA                         | ID Number  |              | F. Transpo    | orter's Phone  |                |                   |  |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL |                        | 10.         | US EPA                          | ID Number  |              | G. State F    | acility ID     |                |                   |  |
| 3001 LITTLE NECK ROAD  |                        |             |                                 |  |              |               | acility Phone  | 912-92         | 27-6113           | 3  |
| Savannah, GA 31419   |                        |             |                                 |  |              |               |                |                |                   |  |
|  |                        |             |                                 | 12. Cor  | ntainers     | 13. Total     | 14, Unit       | L DAG          | sc. Commen        | <u> </u>   |
| 11. Description of Waste Materials                             | - WASHING              |             |                                 | No.  | Туре         | Quantity      | Wt./Vol.       | 1, 10113       | sc. Commen        |  |
| a. COAL ASH& COAL CONTAMINATED WA                              | ASTE                   |             | (                               | 102  | TYT          | 17            |                | 1              |                   |  |
| WM Profile # 3752000   | GAKRA                  |             | (                               |  | 171          | 1             |                |                |                   |  |
| b.   |                        |             |                                 |  |              |               |                |                |                   |  |
|  |                        |             |                                 |  |              |               |                |                |                   |  |
| WM Profile #   |                        |             |                                 |  |              |               |                |                |                   |  |
| c.   |                        |             |                                 |  |              |               |                |                |                   |  |
| WM Profile #   |                        |             |                                 |  |              |               |                |                |                   |  |
| d.   |                        |             | P T T T                         |  |              |               |                |                |                   |  |
|  |                        |             |                                 | The state of the s |              |               |                |                |                   |  |
| WM Profile #   |                        |             |                                 | K Disease  | sal Location |               |                |                |                   |  |
| J. Additional Descriptions for Materials Listed Ab             | ove                    |             |                                 | K. Dispos  | sai Locatio  | 1             |                |                |                   |  |
|  |                        |             |                                 | Cell Grid  | 37           | A1) 9         | WAI            | Level          | 26                | 1  |
| 15. Special Handling Instructions and Additional In            | formation              |             |                                 | Grid   | 20           | 012 1         | 7              |                |                   |  |
|  |                        |             |                                 |  |              |               |                |                |                   |  |
| Purchase Order # GPC10760293                                   |                        | E           | MERGENCY CO                     | ONTACT / PH  | ONE NO.:     | 4             |                |                |                   |  |
| 16. GENERATOR'S CERTIFICATE:                                   |                        | W-          | 7000000                         |  |              |               |                |                | 4                 |  |
| I haraby certify that the above-described materials            | s are not ha           | zardous     | wastes as defi                  | ned by CFR I   | Part 261 or  | any applicab  | le state law,  | have been fu   | lly and           |  |
| accurately described, classified and packaged and              | are in prop            | er condit   | ion for transp<br>ature "On beh | ortation acco  | ording to a  | pplicable reg | ulations.      | Month          | Day               | Year   |
| Printed Name 13 Filipovich                                     |                        | 3           | , File                          |  |              |               |                | 5              | 1                 | 18   |
| 17. Transporter 1 Acknowledgement of Receipt of                | f Materials            |             |                                 |  |              |               |                | F              |                   | 11   |
| Printed Name   |                        | Sign        | ature -                         | 100  |              |               |                | Month          | Day               | Year   |
| V Michael frazier  | f Matarials            | - IX        | IVINC                           | Mfr  | 0            |               |                | - 0            | 116               | 10   |
| 18. Transporter 2 Acknowledgement of Receipt of Printed Name   | i Wateriais            | Sign        | ature                           |  |              |               |                | Month          | Day               | Year   |
| THIRD NAME   |                        |             |                                 |  |              |               |                |                | 14                | 1  |
| 19. Certificate of Final Treatment/Disposal                    |                        |             |                                 |  |              |               |                |                |                   | 1  |
| Legrify, on behalf of the above listed treatment for           | acility, that          | to the b    | est of my know                  | vledge, the a  | bove-desc    | cribed waste  | was managed    | d in complian  | ce with a         | H  |
| applicable laws, regulations, permits and licenses             | on the date            | es listed a | above.                          |  |              |               |                |                |                   |  |
| 20. Facility Owner or Operator: Certification of re            | eceipt of no           |             | nature                          | covered by   | uns manne    |               |                | Month          | Day               | Year   |
| Printed Name   |                        | Jigi        | 1/2                             |  |              |               |                | ()             | /                 | 10   |
| White-TREATMENT, STORAGE, DISPOSAL FACILIT                     | V COPY                 | Bli         | e- GENERATO                     | R #2 COPY  |              | 1             | ellow- GENE    | RATOR #1 CC    | PY                | 1  |

Pink- FACILITY USE ONLY



Original Ticket# 1250009

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/01/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6677699

Destination

PO Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/01/2018 10:48:34

Dut 05/01/2018 10:48:34

Scale Inbound 1

LD% Qty

LBEJARAN LBEJARAN

Operator

WASTE MANAGEMENT

MOU

Rate

Vehicle# LØ7

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net Tons

Amount

Tax

53880 lb 25240 lb 28640 lb 14.32

Origin

Comments

Product

1 COAL ASH & COAL CO 100 14.32 Tons

PORTW



## WWW. NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | ifest Doc N   | lo.  | 2. Page 1 c    | f                        | 9'               | 57                            |                                 |                         |              |      |
|--|---|--|----------------|--------------------------|------------------|-------------------------------|---------------------------------|-------------------------|--------------|------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, E<br>ATLANTA, GA 30308-3374              | GEC<br>BIN#10221 155                                  | erator's Site Ad<br>DRGIA POWE<br>CROSSGATE<br>RT WENTWO   | R PLANT<br>RD. | KRAFT                    | iling):          | A. Manifes                    | MNA                             | 66776<br>Generator's ID | ZI           |      |
| 4. Generator's Phone 404-50  Transporter 1 Company Name  | radina  |  | US EPA ID      |                          |                  |                               | ansporter's II<br>orter's Phone |                         |              |      |
| 7. Transporter 2 Company Name  |   |  | US EPA ID      |                          |                  | )                             | ansporter's II<br>orter's Phone |                         |              |      |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419               | Address   | 10.  | US EPA II      | ) Number                 |                  | G. State F                    | acility ID<br>acility Phone     | 912-92                  | 7-6113       |      |
| 11. Description of Waste Materials   |   | Little Control   |                | 12. Co<br>No.            | ntainers<br>Type | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.            | I. Mis                  | c. Comment   | cs   |
| a. COAL ASH& COAL CONTAM   | IINATED WASTE # 375200GAKRA                           |  | L.             | 07                       | DT               | 18                            |                                 |                         |              | - o. |
| b.   |   |  |                |                          |                  |                               |                                 |                         |              |      |
|  | VM Profile#   |  |                |                          |                  |                               |                                 |                         |              |      |
| c.<br>V  | WM Profile#   |  |                | la sa la                 |                  |                               |                                 |                         |              |      |
| J. Additional Descriptions for Mate  |   |  |                | K. Dispo                 | osal Location    | VSle                          | 179                             | Level                   | 65           | 7    |
| 15. Special Handling Instructions an   | d Additional Informatio                               | on   |                |                          |                  | 0011                          | W) -                            |                         |              |      |
| Purchase Order # GPC107602   | 93  | EMER   | RGENCY CO      | NTACT / PI               | HONE NO.:        | V 1                           |                                 | Maria                   |              |      |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name    | ribed materials are not<br>packaged and are in pro    | hazardous was<br>oper condition<br>Signatur  | tes as defin   | ed by CFR<br>rtation acc | Part 261 or      | any applicab<br>pplicable reg | ole state law,<br>ulations.     | have been fu            | lly and  Day | 1 ×  |
| 17. Transporter 1 Acknowledgement  | oks   | Signatur   | e M            | , les                    | 2/3              | Z                             |                                 | Month 5                 | Day          | TY.  |
| 18. Transporter 2 Acknowledgement<br>Printed Name  | nt of Receipt of Materia                              | Signatu  | re             |                          |                  |                               |                                 | Month                   | Day          | Y    |
| 19. Certificate of Final Treatment/I<br>I certify, on behalf of the above list<br>applicable laws, regulations, permit | ed treatment facility, th<br>ts and licenses on the d | ates listed abov   | e.             |                          |                  |                               | was manage                      | d in complian           | ce with a    | 11   |
| 20. Facility Owner or Operator: Ce   |   | SCHOOL STORY IN CONTRACTOR AND ADDRESS OF THE PARTY OF TH |                | the second second second | this manite      | est.                          |                                 |                         |              | 1    |



Original Ticket# 1250011

Volume

Customer Name BEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# 31 Ticket Date 05/01/2018 Container

Dayment Type Credit Account Manual Ticket# Hauling Ticket#

Route

State Waste Code Manifest 6677700

Destination

PU

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/01/2018 10:54:01 Dut 05/01/2018 10:54:01

Scale Inbound 1

Operator LBEJARAN LBEJARAN

59180 lb Gross 23500 lb Tare 35680 lb Net Tons

17.84

Comments

### WASTE MANAGEMENT

Driver

Check#

Billing # 0001037

Gen EPA ID NR

Amount Origin LD% Oty LOM Rate Tax Product PORTW 1 COAL ASH & COAL CO 100 17.84 Tons

> Total Tax Total Ticket

Jarran



|                                 | NON-HAZARDOUS MANIFEST  1. Generator's   |                 | No.  | Mani        | fest Doc N                | lo.          | 2. Page 1 c           | of   | 10                      | · nc       | -          |
|---------------------------------|--|-----------------|--|-------------|---------------------------|--------------|-----------------------|--|-------------------------|------------|------------|
|                                 | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365   | GEORG<br>155 CR | or's Site Addre<br>GIA POWER<br>ROSSGATE R<br>WENTWORT | PLANT<br>D. | KRAFT                     | iling):      | A. Manifes            | MNA  | 66777<br>Generator's ID | 1          | 2          |
|                                 | 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | 0 8             |  | EPA ID I    |                           |              | D. Transpo            | ransporter's IE<br>orter's Phone<br>ransporter's IE<br>orter's Phone |                         |            |            |
|                                 | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 1               | lo. U  | S EPA ID    | Number                    |              | G. State F            |  | 912-92                  | 27-6113    |            |
| E<br>N                          | 11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WAS   | STE             | -  | B           | 12. Cor<br>No.            | Type         | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.   | I. Mis                  | c. Comment | Š          |
| E<br>R<br>A<br>T<br>O<br>R      | b. WM Profile # 375200G  | GAKRA           | e0.~   |             |                           |              |                       |  |                         |            |            |
| <u>.</u>                        | WM Profile #   |                 |  |             |                           |              |                       |  |                         |            |            |
|                                 | J. Additional Descriptions for Materials Listed Abo  | ove             |  |             | K. Dispos<br>Cell<br>Grid | sal Location |                       | 2 OFW  | Level                   | 37         | +1         |
|                                 | 15. Special Handling Instructions and Additional Info  | ormation        |  |             |                           |              | 7 / 2                 |  |                         | , ,        |            |
|                                 | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials accurately described, classified and packaged and a   | are not haza    | ardous wastes  | as define   | ed by CFR I               | Part 261 or  | any applicab          | le state law, h  | nave been ful           | ly and     |            |
| т                               | Printed Name  17. Transporter 1 Acknowledgement of Receipt of I  | Ŧ               | Signature "C   | n behal     | f of"                     |              |                       |  | Month 5                 | Day        | Year       |
| R<br>A<br>N<br>S<br>P<br>O<br>R | Printed Name  18 Transporter 2 Acknowledgement of Receipt of I   | Materials       | Signature Signature                                    | 'are        | Zerzy                     |              |                       |  | Month                   | Day        | Year       |
| T E R F A C I L I T Y           | Printed Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment face applicable laws, regulations, permits and licenses of the second secon | n the dates     | o the best of m<br>listed above.                       |             |                           |              | st.                   |  | Month 5                 | Day        | l<br>/Year |
| T<br>Y                          |  |                 |  | 1/2         | 3)                        | and mainte   |                       | ellow- GENER   | 5'                      | /<br>PY    | 1          |

Pink- FACILITY USE ONLY



Original Ticket# 1250013

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677701

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 10:57:26 Out 05/01/2018 10:57:26

Scale Inbound 1

Operator LBEJARAN

LBEJARAN

Vehicle# C26

Billing # 0001037 Gen EPA ID NR

Container

Driver Check#

> Gross Tare Net Tons

63020 16 25980 lb 37040 lb 18.52

Comments

| Pro | duct   | LD% | Qty   | UDM  | Rate | Tax | Amount | Origin |
|-----|--|-----|-------|------|------|-----|--------|--------|
|     | as data, made also seen some some some anne some men some some some some some some some some |     |       |      |      |     |        |        |
| 1   | COAL ASH & COAL CO   | 100 | 18.52 | Tons |      |     |        | PORTW  |



|                            | NON-HAZARDOUS MANIFEST  1. Generator's  | s US EPA II                | O No. Mai   | nifest Doc No.                                 | 2. Page 1          | of   | IA               | 1/10       | 9    |
|----------------------------|---|----------------------------|---|--|--------------------|--|------------------|------------|------|
|                            | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365  | Genera<br>GEOR<br>155 C    | ator's Site Address (If dif<br>GIA POWER PLANT<br>ROSSGATE RD.<br>WENTWORTH, GA | NT KRAFT WMNA 6677701  B. State Generator's ID |                    |  |                  |            | 1    |
|                            | 5. Transporter 1 Company Name  7. Transporter 2 Company Name  | 9                          | 6. US EPA ID  8. US EPA ID  |  | D. Transp          | ransporter's II<br>orter's Phone<br>ransporter's II<br>orter's Phone |                  |            |      |
|                            | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419   |                            | 10. US EPA I  | D Number                                       | G. State F         | acility ID<br>acility Phone  | 912-9            | 27-611     | 3    |
| G E N E B                  | 11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WAS  WM Profile # 375200G  |                            | C   | 12. Containers No. Type                        | 13. Total Quantity | 14. Unit<br>Wt./Vol.   | I. Mi            | sc. Commer | its. |
| R A T O R                  | b.  |                            |   |  |                    |  |                  |            |      |
|                            | WM Profile #  |                            |   |  |                    |  |                  |            | *    |
|                            | J. Additional Descriptions for Materials Listed Abo   | ove                        |   | K. Disposal Loca  Cell  Grid                   | tion 129           | W81  | Level 1          | 32         |      |
|                            | 15. Special Handling Instructions and Additional Info   | ormation                   |   |  |                    |  | (                | £65        | 11   |
| Y                          | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials accurately described, classified and packaged and all Printed Name | are not haz<br>re in prope | zardous wastes as defin   | rtation according t                            | or any applicab    | le state law, hulations.   | nave been fu     | lly and    | Year |
| T R A N S                  | 17. Transporter 1 Acknowledgement of Receipt of I   |                            | Signature   | d  |                    |  | Month B          | Day        | Year |
| P<br>O<br>R<br>T<br>E<br>R | Printed Name  | Materials                  | Signature   | <i>V</i>                                       |                    |  | Month            | Day        | Year |
| F<br>A<br>C<br>I<br>L      | I certify, on behalf of the above listed treatment fac<br>applicable laws, regulations, permits and licenses o<br>20. Facility Owner or Operator: Certification of rec            | n the date:                | s listed above.   |  |                    | was managed  | in complian      | ce with a  |      |
| T<br>Y                     | Printed Name  White-TREATMENT, STORAGE, DISPOSAL FACILITY   |                            | Signature<br>Blue-GENERATOR   | 2  |                    | ellow- GENER   | Month ATOR-#1 CO | PY         | Year |

Pink- FACILITY USE ONLY



Original Ticket# 1250015

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Vehicle排 5306

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Manifest 6677702

05/01/2018 10:59:55

Out 05/01/2018 10:59:55

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale Inbound 1

Operator LBEJARAN

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Gross Tare Net

58440 1b 27500 lb 30940 1b

Tons

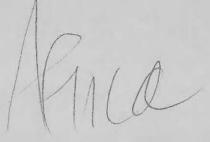
15.47

Comments

### MANAGEMENT

Amount Origin Product LD% Oty MOU Rate Tax PORTW COAL ASH & COAL CO 100 15.47 Tons









|                 | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                               |  | nifest Doc No.        | 2. Page          | 1 of  | 10.                         | 1          |
|-----------------|--|---|--|-----------------------|------------------|---|-----------------------------|------------|
| -               | 3. Generator's Mailing Address:<br>GEORGIA POWER   |   | A<br>erator's Site Address (If dif<br>DRGIA POWER PLAN |                       | 2017/12/11       | ifest Number  | 667770                      | 2          |
|                 | 241 RALPH MCGILL BLVD NE, E<br>ATLANTA, GA 30308-3374  | BIN#10221 155                                       | S CROSSGATE RD.<br>RT WENTWORTH, GA                    |                       |                  | WMNA<br>B. State                                    | Generator's ID              |            |
|                 | 5. Transporter 1 Company Name  | icalia a  | 6. US EPA ID   | Number                |                  | Transporter's                                       | State                       |            |
|                 | 7. Transporter 2 Company Name  | 901119  | 8. US EPA ID   | Number                | E. State         | sporter's Phone<br>Transporter's<br>sporter's Phone | indirection (1939-29)<br>ID | and Call   |
|                 | 9. Designated Facility Name and Site SUPERIOR LANDFILL   | Address   | 10. US EPA I   | D Number              | G. Stat          | e Facility ID                                       |                             |            |
|                 | 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |   |  |                       | H. Stati         | e Facility Phone                                    | 912-927-                    | 6113       |
| G               | 11. Description of Waste Materials   |   |  | 12. Containers No. Ty | pe 13. Total     | 2000 CONTRACTOR                                     | I. Misc. Co                 | omments    |
| E<br>N<br>E     | a. COAL ASH& COAL CONTAM   |   | , H  | 306 D                 | 1 18             |   |                             |            |
| R               | b. WM Profile  | # 375200GAKRA                                       |  | neralengine seran     |                  |   |                             |            |
| T<br>O<br>R     |  | /M Profile #  |  |                       |                  |   |                             |            |
|                 | C.   | /M Profile #  |  |                       |                  |   |                             |            |
|                 | d.   | Wirione #   |  |                       |                  |   |                             |            |
|                 | <b>W</b>   | /M Profile #  |  | Section 1             |                  |   |                             | 141        |
|                 | J. Additional Descriptions for Mater   | ials Listed Above                                   |  | K. Disposal Loc       | ation 129        | W811  | Level)                      | ISFI       |
|                 | 15. Special Handling Instructions and  | Additional Information                              | n  | 101                   |                  | *   |                             | *          |
|                 | Purchase Order # GPC1076029  | )3  | EMERGENCY COI  | NTACT / PHONE N       | 10.:             |   |                             |            |
|                 | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descriaccurately described, classified and p   | bed materials are not h                             | nazardous wastes as defin                              | ed by CFR Part 26     | 51 or any applic | able state law,                                     | have been fully a           | nd         |
|                 | Printed Name 13. Tilipovich  |   | Signature "On beha                                     |                       | )                | -guiations.   | Month I                     | Day Year   |
| T R A N S P O R | 18. Transporter 2 Acknowledgement  | yne (   | Signature  | H                     | ay I             |   | 1511                        | Day Year   |
| T<br>E<br>R     | Printed Name   |   | Jag Hattile  | V                     |                  |   |                             |            |
| FACI            | <ol> <li>Certificate of Final Treatment/Distriction</li> <li>certify, on behalf of the above listed applicable laws, regulations, permits</li> </ol> | I treatment facility, tha<br>and licenses on the da | tes listed above.                                      |                       |                  | e was managed                                       | d in compliance w           | ith all    |
| 1               | 20. Facility Owner or Operator: Cert   | ification of receipt of r                           |  | overed by this ma     | anifest.         |   | NAS-14                      | day   Noor |
| Y               | Printed Name  White-TREATMENT, STORAGE, DISPO  | OSAL FACILITY COPY                                  | Signature Blue- GENERATOR                              | #2 COPY               | 11               | Yellow- GENE  | Month RATOR #1 COPY         | pay /Year  |

Pink- FACILITY USE ONLY



Original Ticket# 1250023

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677703

Destination PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Generator

Time

05/01/2018 11:11:48 In Out 05/01/2018 11:11:48

Comments

Scale

Imbound 1

Operator

LBEJARAN LBEJARAN

Vehicle# 1

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

Gross Tare Net

Tons

65420 1b 2948Ø 1b 35940 1b\* 17.97

Origin Amount Qty Tax UOM Rate LD% Product PORTW

1 COAL ASH & COAL CO 100

17.97 Tons



| WASTE MANAGEMENT  | 1. Generator's US EPA                               | ID No. Man  | ifest Doc No.           |                          | 2. Page 1 c                   | of                              |                        |   |                      |
|---|---|---|-------------------------|--------------------------|-------------------------------|---------------------------------|------------------------|---|----------------------|
| NON-HAZARDOUS MANIFEST  | N / /   | Α   |                         |                          |                               |                                 | 10'                    | 760                                     |                      |
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, E   | GEC<br>BIN#10221 155                                | erator's Site Address (If diffi<br>PRGIA POWER PLANT<br>CROSSGATE RD.           | KRAFT                   | g):                      | A. Manifes                    | MNA                             | 66777<br>enerator's II |   |                      |
| ATLANTA, GA 30308-3374  4. Generator's Phone 404-50   | )6-1365   | T WENTWORTH, GA   | 31407                   |                          |                               |                                 |                        |   |                      |
| 5. Fransporter 1 Company Name  7. Transporter 2 Company Name  | rading  | 6. US EPA ID  |                         |                          | D. Transpo                    | ansporter's ID<br>orter's Phone | Messali                |   |                      |
|   |   |   |                         |                          |                               | ansporter's ID<br>orter's Phone |                        |   |                      |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | Address   | 10. US EPA IC   | Number                  |                          | G. State Fa                   | acility ID<br>acility Phone     | 912-92                 | 7-6113                                  |                      |
| G 11. Description of Waste Materials  |   |   | 12. Contai              | iners<br>Type            | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.            | I. Mis                 | . Comments                              | THE REAL PROPERTY.   |
| a. COAL ASH& COAL CONTAM  |   | Lr  | FIT                     | )                        | 18                            |                                 |                        |   |                      |
| R WM Profile  | # 375200GAKRA                                       |   |                         |                          |                               |                                 |                        |   |                      |
| T   | /M Profile #  |   |                         |                          |                               |                                 |                        |   | RUNCER               |
|   |   |   |                         |                          |                               |                                 |                        | *************************************** |                      |
|   | /M Profile #  |   |                         |                          |                               |                                 |                        | 6                                       |                      |
|   | /M Profile #  |   |                         |                          |                               | epelie en illi                  |                        |   | OHIOLOGI<br>OHIOLOGI |
| J. Additional Descriptions for Mater  | rials Listed Above                                  |   | K. Disposal  Cell  Grid | Location                 | X 29                          | TLOS !                          | Level .                | 22                                      |                      |
| 15. Special Handling Instructions and   | l Additional Information                            | 1   |                         |                          |                               | *                               | (E)                    | 356                                     | 1                    |
| Purchase Order # GPC1076029   | 93  | EMERGENCY CON   | ITACT / PHON            | NE NO.:                  |                               |                                 |                        |   | 4                    |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descr accurately described, classified and p  | bed materials are not hackaged and are in pro       | nazardous wastes as define<br>per condition for transpor<br>Signature "Op behal | tation accord           | t 261 or a<br>ling to ap | any applicab<br>plicable regu | le state law, h<br>ulations.    | ave been ful           | y and                                   | Year                 |
| BFILIDOVICE   |   | 15%   | ,                       |                          |                               |                                 | 151                    | 1 1                                     | X                    |
| T R A Printed Name Printed Name   | Flores  | Signature   | 2h                      |                          |                               |                                 | Month                  | Day                                     | Year                 |
| 7 Printed Name  | t of Receipt of Material                            | Signature   |                         |                          |                               |                                 | Month                  | Day                                     | Year                 |
| 19. Certificate of Final Treatment/D I certify, on behalf of the above liste applicable laws, regulations, permits 20. Facility Owner or Operator: Cert | d treatment facility, tha<br>and licenses on the da | tes listed above.   |                         |                          |                               | was managed                     | in compliance          | e with all                              | Year                 |
| White- TREATMENT, STORAGE, DISF   | OSAL FACILITY COPY                                  | Blue- GENERATOR   | #2 COPY                 |                          | Υ                             | ellow- GENER                    | ATOR #1 CO             | γ                                       | V                    |

Pink- FACILITY USE ONLY



Original Ticket# 1250037

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677704

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHOT GEORGIA FOR

Time

In 05/01/2018 11:25:56 Out 05/01/2018 11:25:56

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Vehicle# 5307

Gen EPA ID NR

0001037

Container

Billing #

Driver Check#

> Gross Tare Net

58700 1b 24080 1b 34620 1b

17.31

Tons

Comments

Amount Origin Tax Qty MOU Rate LD% Product PORTW 17.31 Tons 1 COAL ASH & COAL CO 100



| WASTE MANAGEMENT   | 1 6  | DA ID No.   | aifast Das N             | de.              | 2 Page 1   | of                               |                       |            |                       |
|--|--|---|--------------------------|------------------|--|----------------------------------|-----------------------|------------|-----------------------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EF N /   |   | nifest Doc N             | vo.              | 2. Page 1 o  | OT .                             | 10:3                  | 36         |                       |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GE   | nerator's Site Address (If di<br>ORGIA POWER PLAN |                          | ailing):         | TE TELL  | st Number<br>MNA                 | 66777                 | ′04        |                       |
| 241 RALPH MCGILL BLVD N<br>ATLANTA, GA 30308-3374  | the state of the s | 5 CROSSGATE RD.<br>PRT WENTWORTH, GA              | 31407                    |                  |  | B. State C                       | ienerator's II        | )          |                       |
| The state of the s | -506-1365  | Notice S Construction and                         |                          |                  |  |                                  |                       |            | A STREET AND A STREET |
| 5. Transporter 1 Company Name  | Fradina  | 6. US EPA ID                                      | Number                   |                  |  | ransporter's ID<br>orter's Phone |                       |            |                       |
| 7. Transporter 2 Company Name  | 1. 19119   | 8. US EPA ID                                      | Number                   |                  | I The second sec | ransporter's IE                  |                       |            |                       |
| 9. Designated Facility Name and S  | Site Address   | 10. US EPA I                                      | D Number                 |                  | F. Transpo   | orter's Phone                    |                       |            |                       |
| SUPERIOR LANDFILL  |  |   |                          |                  | G. State F   | acility ID                       | ATTENNESS SOCIETATION | mananas    |                       |
| 3001 LITTLE NECK ROAD  |  |   |                          |                  | H. State F   | acility Phone                    | 912-92                | 7-6113     |                       |
| Savannah, GA 31419   |  |   |                          |                  |  |                                  |                       |            |                       |
| G 11. Description of Waste Materia   | ls   |   | 12. Co<br>No.            | ntainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.             | I. Mise               | c. Comment | 's                    |
| a. COAL ASH& COAL CONTA  | AMINATED WASTE   | 53  | 07                       | PT               | 17   |                                  |                       |            |                       |
| R WM Pro   | file# 375200GAKRA  |   |                          |                  |  |                                  |                       | A SECOND   |                       |
| A b.   |  |   |                          | , 9 m            | 1  |                                  |                       |            |                       |
| T<br>O   |  |   |                          |                  |  |                                  |                       |            |                       |
| R  | WM Profile #   |   |                          |                  |  |                                  |                       |            |                       |
| C.   |  |   |                          |                  |  |                                  |                       |            | -17                   |
|  | WM Profile #   |   |                          |                  |  |                                  |                       |            | THE PROPERTY OF       |
| d.   |  |   |                          |                  |  |                                  |                       |            | N                     |
|  |  |   |                          |                  | 1 x  |                                  |                       | -          |                       |
|  | WM Profile #   |   | Stationial               |                  |  | Hi.                              |                       |            |                       |
| J. Additional Descriptions for M   | aterials Listed Above  |   | K. Dispos                | sal Location     |  |                                  |                       |            |                       |
|  |  |   | Cell                     | 177              | 010  | 01)                              | Devel/ /              | 7)         | 1                     |
|  |  |   | Grid                     | 11               | 012  | au                               | 0116                  | ) (        | 1-1                   |
| 15. Special Handling Instructions  | and Additional Information   | on  | F                        |                  |  |                                  | E                     | 25.        | H                     |
| Purchase Order # GPC1076   | 0293   | EMERGENCY CO                                      | NTACT / PH               | IONE NO.:        |  |                                  |                       |            |                       |
| 16. GENERATOR'S CERTIFICATE:   |  | * *   | *                        |                  |  |                                  |                       |            |                       |
| I hereby certify that the above-de   | scribed materials are not  | hazardous wastes as defin                         | ed by CFR I              | Part 261 or a    | any applicab   | le state law, h                  | ave been full         | y and      |                       |
| accurately described, classified an<br>Printed Name  | na packagea and are in pr  | Signature "On beha                                | If of"                   | orume to ap      | pileable regi  | aldtioris.                       | Month                 | Day        | Year                  |
| B. Filipovich  |  | 38  |                          |                  |  |                                  | 5                     |            | 18                    |
| 17. Transporter 1 Acknowledgen   | nent of Receipt of Materia   | nls \   |                          | 11               |  |                                  |                       |            |                       |
| Printed Name   | Roma   | Signature   | 1                        | N                | 1  |                                  | Month                 | Day        | Year                  |
| 2 / 21001CA  | On Materia   |   |                          |                  | 1  |                                  | 9                     | 1          | 10                    |
| 18. Transporter 2 Acknowledgen Printed Name  | ient of Receipt of Materia   | Signature   |                          |                  | 7 7 7 5  |                                  | Month                 | Day        | Year                  |
| E  |  | 0'''  |                          |                  | ~  |                                  |                       |            |                       |
| R #  | +/D:1  |   |                          |                  |  | 10000                            |                       |            |                       |
| 19. Certificate of Final Treatmen  | t/Disposal<br>sted treatment facility th   | iat to the best of my know                        | edge, the a              | bove-descri      | bed waste \  | was managed                      | in complianc          | e with all |                       |
| applicable laws, regulations, perr   | nits and licenses on the d   | ates listed above.                                | cu <sub>B</sub> c, the a |                  |  |                                  | and area Farancia     |            |                       |
| 20. Facility Owner or Operator:  |  |   | overed by t              | this manifes     | t,   |                                  |                       | ,          | 11                    |
| Printed Name   | NK   | Signature   | M                        |                  |  |                                  | Month                 | bay        | Year                  |
|  | VI   |   | 1                        | 1-1-             |  |                                  |                       | 1          | 10                    |
| White- TREATMENT, STORAGE, I   | DISPOSAL FACILITY COPY   | Blue- GENERATOR                                   | #2 COPY                  |                  | Y  | ellow- GENER                     | ATOR #1 COP           | Y          |                       |

Pink- FACILITY USE ONLY



Original Ticket# 1250064

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677705

Destination

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 12:22:27 Dut 05/01/2018 12:22:27

Scale

Inbound 1 rb

Operator

Vehicle# C25

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

rb

Gross Tare

Volume

27040 1b 38480 1b Net 19.24 Tons

65520 1b

Comments

Amount Origin Tax Rate MOU LD% Qty Product SAVANNAH 1 COAL ASH & COAL CO 100 19.24 Tons

> Total Tax fotal flekot

Michael try



# WATA NON-HAZARDOUS MANIFEST

| 1. Generator's US EPA ID No. Manifest Doc No. N / A  3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  10. US EPA ID Number  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  12. Generator's Udifferent than mailing): GEORGIA POWER PLANT KRAFT WMNA  B. State G  WM Profile #  C. State Transporter's UD. Transporter's ID. D. Transporter's ID. D. Transporter's ID. F. Transporter's Phone  13. Total WK. Profile #  C. WM Profile #  M. Disposal Location  K. Disposal Location  Cell. D. 2. (Cell. D. 2.) (Cell. D.  |                        |
|--|------------------------|
| GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  d.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  GEORGIA POWER PLANT KRAFT 155 CROSSGATE RD. PORT WENTWORTH, GA 31407  B. US EPA ID Number  C. State Transporter's ID D. Transporter's Dn. F. State Transporter's ID D. Transporter's Phone  13. Total Ww. Vol. We. Vol. We. Vol. WM Profile #  M. Disposal Location  | 912-927-6113           |
| ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365 5. Transporter 1 Company Name 6. US EPA ID Number 7. Transporter 2 Company Name 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419 11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE WM Profile # 375200GAKRA b. WM Profile # C. WM Profile #  C. WM Profile #  M.   | 912-927-6113           |
| 5. Transporter 1 Company Name  7. Transporter 2 Company Name  8. US EPA ID Number  E. State Transporter's ID D. Transporter's ID F. Transporter's  | 912-927-6113           |
| E. State Transporter's ID F. Transporter's Phone  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE WM Profile # 375200GAKRA b. WM Profile # d.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  E. State Transporter's ID F. Transporter's Phone  G. State Facility ID H. State Facility Phone  13. Total Wt. /vol. Wt. /vol. Wt. /vol. Wt. /vol. WM Profile #  G. State Facility Phone  13. Total Wt. /vol. Wt | 912-927-6113           |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  C.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  G. State Facility ID H. State Facility ID H. State Facility ID H. State Facility Phone  13. Total No. Type Quantity Wt./Vol.  44. Unit Wt./Vol.  45. Type Quantity WM Profile #  C.  WM Profile #  M.  K. Disposal Location  |                        |
| 11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  13. Total 14. Unit Wt./vol.  WW./vol.  14. Unit Wt./vol.  WM Profile #  VM Profile #  K. Disposal Location  | I. Misc. Comments      |
| 11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.   WM Profile #  c.   WM Profile #  d.   WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location   | 1. Misc. Comments      |
| WM Profile # 375200GAKRA  b.  WM Profile #  c.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  |                        |
| b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  | -                      |
| WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  |                        |
| c.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  |                        |
| d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  |                        |
| d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  |                        |
| J. Additional Descriptions for Materials Listed Above  K. Disposal Location  |                        |
| J. Additional Descriptions for Materials Listed Above  K. Disposal Location  |                        |
| Cell. 12 2 20 ( 1( )) (  |                        |
| Grid 1101 24 23/1  | Levels > E (C)         |
| 15. Special Handling Instructions and Additional Information   | 16 76 - 91             |
| Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  |                        |
| 16. GENERATOR'S CERTIFICATE:  Liberaby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, h   | nave been fully and    |
| accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature "On behalf of"   | Month Day Year         |
| B. Filipovich Brice  | 151118                 |
| T 17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature   | Month Day Year         |
| S V Michael Frazier V Michaeltry   | 5118                   |
| 18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature  | Month Day Year         |
| Printed Name Signature   |                        |
| 19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed  |                        |
| applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.   | in compliance with all |
| Printed Name Signature   | in compliance with all |
| White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue- GENERATOR #2 COPY  Yellow- GENERATOR #2 COPY   | in compliance with all |

Pink- FACILITY USE ONLY



Original Ticket# 1250077

Volume

Customer Name GEORGIAPOWE37520@GAKRA GEORGI Carrier B AND N Ticket Date 05/01/2018 Payment Type Credit Account Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677706 Destination

PO Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPUNCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/01/2018 12:42:52

Dut 05/01/2018 12:42:52

Scale Inbound 1

Operator nb

Gross Tare Net

35580 lb Tons 17.79

59080 1b

23500 1b

Comments

Vehicle# 31 Container

Billing #

Gen EPA ID NR

0001037

Driver

Checks

Origin MOB Rate Tax Amount Oty LD% Product PORTW

COAL ASH & COAL CO 100

17.79 Tons

Total Tax Total floket

101/1091

403WM



| WASTE MANAGEMEN   | VT.                             |                     |                 |   |                |                |                        |                                |              |             |  |  |  |
|---|---------------------------------|---------------------|-----------------|---|----------------|----------------|------------------------|--------------------------------|--------------|-------------|--|--|--|
| NON-HAZARDOUS MANIFEST  1. Generator's US EPA ID No. Manifes  N / A |                                 |                     |                 |   |                | No.            | 2. Page 1 o            | of                             | 11           | :5          | 0                                      |  |  |
| 3. Generator's Mailin<br>GEORGIA POWER<br>241 RALPH MCGI            | LL BLVD NE, B                   | IN#10221            | GEORG<br>155 CR | or's Site Address (I<br>IA POWER PLA<br>OSSGATE RD. | NT KRAFT       | ailing):       | The second second      | st Number<br>MNA<br>B. State G | 6677         |             |  |  |  |
| ATLANTA, GA 303   |                                 | C 1265              | PORTV           | VENTWORTH,  | 3A 31407       |                |                        |                                |              |             |  |  |  |
| 4. Generator's Phone 5. Transporter 1 Com                           |                                 | 6-1365              | 6.              | . US EPA  | ID Number      |                |                        |                                |              |             |  |  |  |
|   | ( ) -                           | 1                   |                 |   |                |                | C. State T             | ransporter's ID                | )            |             |  |  |  |
| casto   | 100                             | adina               |                 |   |                |                | D. Transporter's Phone |                                |              |             |  |  |  |
| 7. Transporter 2 Com  | pahy Name                       |                     | 8               | . US EPA  | ID Number      |                | E. State T             | ransporter's ID                |              |             |  |  |  |
|   |                                 |                     |                 |   | 4              |                | F. Transpo             | orter's Phone                  | 1812         |             |  |  |  |
| 9. Designated Facility  | Name and Site                   | Address             | 1               | O. US EP  | A ID Number    |                |                        |                                |              |             |  |  |  |
| SUPERIOR LANDE  |                                 |                     |                 |   |                |                | G. State F             |                                | 012.0        | 27 (112     |  |  |  |
| 3001 LITTLE NECI  |                                 |                     |                 |   |                | #*****         | H. State F             | acility Phone                  | 912-9.       | 27-6113     |  |  |  |
| Savannah, GA 3  | 1419                            |                     |                 |   |                |                |                        |                                |              |             |  |  |  |
| 11. Description of W  | aste Materiale                  |                     | NAME:           |   |                | ontainers      | 13. Total              | 14. Unit                       | I. Mi        | sc. Comment | is                                     |  |  |
| E a. COAL ASH& CO   | TALESTA WALLS IN                | NATED WAST          | re              |   | No.            | Type           | Quantity               | Wt./Vol.                       |              |             |  |  |  |
| N   | DAL CONTAIVII                   | NATED WAS           | L               |   | RUZI           | DT             | 118                    |                                |              |             |  |  |  |
| E   | WM Profile                      | # 375200GA          | KRA             |   |                |                |                        |                                |              |             |  |  |  |
| R<br>A <b>b</b> .   |                                 |                     |                 |   |                |                |                        |                                |              |             |  |  |  |
| T   |                                 |                     |                 |   |                |                |                        |                                |              |             |  |  |  |
| O R   | w                               | M Profile #         |                 |   |                |                |                        |                                |              |             |  |  |  |
| " c.  |                                 |                     |                 |   |                |                |                        |                                | 1905         |             |  |  |  |
|   | 100                             | M Profile #         |                 |   |                | 1              |                        |                                |              |             |  |  |  |
| d.  | VV                              | Wi Profile #        |                 |   |                |                |                        |                                |              |             | M1100000000000000000000000000000000000 |  |  |
|   |                                 |                     |                 |   |                |                |                        | 4                              |              |             |  |  |  |
|   | w                               | /M Profile #        |                 |   |                |                |                        |                                |              |             |  |  |  |
| J. Additional Descri  | ptions for Mater                | ials Listed Above   | е               |   | K. Dispo       | sal Locatio    | n                      |                                |              |             |  |  |  |
|   |                                 |                     |                 |   | Cell A         | 157/           | 200                    | 1 1/1/4                        | Level        | 1-          | 10                                     |  |  |
|   |                                 |                     |                 |   | Grid /         | 152            | 1171                   | WALL                           | 826          | 6           | JUST.                                  |  |  |
| 15. Special Handling  | Instructions and                | Additional Infor    | mation          |   | (              |                |                        | *                              |              |             |  |  |  |
|   |                                 |                     |                 |   |                |                |                        |                                |              |             |  |  |  |
|   |                                 |                     |                 | EMERGENCY   | CONTACT / DI   | HONE NO .      |                        |                                |              |             |  |  |  |
| Purchase Order #  | GPC1076029                      | 93                  | 14              | EMERGENCY   | CONTACT / PI   | HONE NO        |                        | -                              |              | CV Ty       |  |  |  |
| 16. GENERATOR'S C   | ERTIFICATE:<br>the above descri | had matarials ar    | e not haza      | irdous wastes as d                                  | efined by CFR  | Part 261 o     | r any applicat         | ole state law, h               | nave been fu | lly and     |  |  |  |
| accurately described  | l, classified and p             | ackaged and are     | in proper       | condition for tran                                  | sportation acc | cording to a   | applicable reg         | ulations.                      |              | _           | 1                                      |  |  |
| Printed Name  |                                 | 7917                |                 | Signature "On b                                     | ehalf of"      |                |                        |                                | Month        | Day         | Year                                   |  |  |
| B. Filip  |                                 | - C D   C D A       | atorials        | D have  | -              |                |                        |                                | 10           | 1           | 10                                     |  |  |
| 17. Transporter 1 A   | cknowledgement                  | t or Receipt or ivi | ateriais        | Signature   |                |                |                        |                                | Month        | Day         | Year                                   |  |  |
| NV  | n                               |                     |                 | V Yo  | Me             | 7              | 44                     |                                | 5            |             | 16                                     |  |  |
| s<br>P<br>0 18. Transporter 2 A                                     |                                 | t of Receipt of M   | aterials        | N   |                | 1              |                        |                                |              |             |  |  |  |
| R Printed Name  |                                 |                     |                 | Signature   |                |                |                        |                                | Month        | Day         | Year                                   |  |  |
| E<br>R  |                                 |                     |                 |   |                | - Alfred       |                        |                                |              |             |  |  |  |
| 19. Certificate of Fi   | nal Treatment/Di                | isposal             |                 |   | THE RESIDENCE  |                |                        |                                |              |             |  |  |  |
| I certify, on behalf o  | of the above lister             | d treatment facil   | ity, that to    | the best of my kn                                   | owledge, the   | above-desc     | cribed waste           | was managed                    | in complian  | ce with al  | l                                      |  |  |
| c applicable laws, reg  | ulations, permits               | and licenses on     | the dates       | listed above.                                       | 1-1-9550       | area .         |                        |                                | 1911         | 11-11       |  |  |  |
| 20. Facility Owner  | or Operator: Cer                | tification of rece  | ipt of non-     | hazardous materia                                   | is covered by  | tilio tiidiili | CJU                    |                                | Month        | Day         | / Year                                 |  |  |
| Printed Name  | 1/                              | 15                  |                 | Signature   | 13)            |                |                        |                                | 1            | 1           | 6                                      |  |  |
| White-TREATMEN  | STORAGE DISP                    | OSAL FACILITY C     | OPY             | Blue- GENERA  | OR #2 COPY     |                |                        | Yellow- GENER                  | ATOR #1 CC   | PY          |  |  |  |

Pink- FACILITY USE ONLY



去人 一种

Original Ticket# 1250073

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677707

Destination

00

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 12:37:47 Out 05/01/2018 12:37:47

Scale

Inbound 1

Operator mb

Vehicle# C26

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare

63800 lb 25980 lb

Net Tons 37820 15

18.91

Comments

Origin Rate Amount UOM Tax LD% Qty Product PORTW 18.91 Tons COAL ASH & COAL CO 100

> Total Tax fotal flishet



| WASTE MANAGEMENT  |  |  |   |                                      |                       |             | 1                                |   |                         |               | 1                                       |
|---|--|--|---|--------------------------------------|-----------------------|-------------|----------------------------------|---|-------------------------|---------------|---|
| NON-HAZARDOUS MANIFEST  | NON-HAZARDOUS MANIFEST N / A   |  |   |                                      |                       | 0.          | 2. Page 1 c                      | ot  | 13                      | 10            | 9                                       |
| B. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,   | BIN#10221  | GEORG<br>155 CI                              | tor's Site Address (<br>GIA POWER PLA<br>ROSSGATE RD.<br>WENTWORTH,           | ANT KR                               | AFT                   | iling):     | A. Manifes                       | MNA   | 66777<br>Generator's ID | 35.10         |   |
| ATLANTA, GA 30308-3374  | TOC 1265   | PURI   | WENTWORTH,  | GA 31                                | 407                   |             |                                  |   |                         |               |   |
| 1. Generator's Phone 404-5<br>2. Transporter 1 Company Name   | 506-1365   | 4  | 6. US EPA   | A ID Nun                             | nber                  |             |                                  |   |                         |               |   |
| lansporter I company in the   | -11 -  | -  |   |                                      |                       |             |                                  | ansporter's II                              | )                       |               | 2-1                                     |
| 10019/1018  | 10109  | 4  | 8. US EPA   | A ID Nur                             | nhor                  |             | D. Transpo                       | orter's Phone                               |                         |               |   |
| 7. Transporter 2 Company Name   |  |  | 8. USEF   | A ID INUI                            | iibei                 |             | E. State Tr                      | ansporter's II                              | )                       |               |   |
|   | $\sim$   |  |   |                                      | 100 Maria             |             | F. Transpo                       | orter's Phone                               |                         |               |   |
| 9. Designated Facility Name and Sit   | te Address   |  | 10. US EF   | PA ID Nu                             | ımber                 |             | G. State F                       | acility ID                                  | 3104 (61) L. 255        |               |   |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  |  |  |   |                                      |                       |             |                                  | acility Phone                               | 912-92                  | 27-6113       |   |
| Savannah, GA 31419  |  |  |   |                                      | 100                   |             |                                  | po lineros                                  |                         |               |   |
| Savarman, Grioritz  |  |  |   |                                      | 100.000               |             |                                  |   |                         |               |   |
| 11. Description of Waste Materials  |  |  |   | -                                    | No.                   | Type        | 13. Total<br>Quantity            | 14. Unit<br>Wt./Vol.                        | I. Mis                  | c. Comments   |   |
| a. COAL ASH& COAL CONTAI  | MINATED WAS  | STE  | 1987  | 0 -                                  | ,                     | N           | 151                              |   | V V                     |               |   |
|   |  |  |   |                                      | 10                    | PL          | 118                              |   |                         |               |   |
|   | le# 375200G  | AKRA   |   |                                      |                       |             |                                  |   |                         | in the second |   |
| b.  |  |  |   | 1                                    |                       | M           |                                  | *   |                         |               |   |
|   | WM Profile #   |  |   |                                      |                       |             |                                  |   |                         |               |   |
| <b>C.</b>   | WIVI FIOIIIE #   |  |   |                                      |                       |             |                                  |   |                         | X. The        |   |
| A214  |  |  |   | 14                                   |                       |             |                                  |   |                         |               |   |
|   |  |  |   |                                      |                       |             |                                  |   |                         |               |   |
|   | WM Profile #   |  |   | win.                                 |                       |             |                                  |   |                         |               |   |
| d.  | WM Profile #   |  |   | 11141                                | 70 Topics.            |             |                                  |   | A (1624) - AUG          |               |   |
| d.  |  | ((   |   |                                      |                       |             |                                  |   |                         |               |   |
|   | WM Profile #   | ove  |   | K                                    | (. Dispos             | sal Locatio | n                                |   |                         |               |   |
| d.  J. Additional Descriptions for Ma   | WM Profile #   | ve   |   |                                      |                       | sal Locatio | n                                |   | / Level 7               | . 1           |   |
|   | WM Profile #   | ove  |   | C                                    | Cell                  | sal Locatio | 1290                             | J 811                                       | Level 7                 | + bs          | =f                                      |
|   | WM Profile #<br>terials Listed Abo   |  |   | C                                    | cell )                | sal Locatio | 1290                             | با کار                                      | Level 7                 | t 63          | ======================================= |
| J. Additional Descriptions for Ma   | WM Profile #<br>terials Listed Abo   |  |   | 0                                    | ce <b>l</b> l<br>grid | 20          | 1290                             | با کار                                      | Level 7                 | <i>U</i> 69   | ===                                     |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760  | WM Profile #<br>terials Listed Abo<br>and Additional Info  |  | EMERGENCY   | 0                                    | ce <b>l</b> l<br>grid | 20          | 1290                             | J 811                                       | Level 7                 | 6 bs          | ;=f                                     |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760  | WM Profile # terials Listed Abo and Additional Info  | ormation                                     |   | Y CONTA                              | Cell<br>Gyld          | HONE NO.:   | 1290                             | a) P) (1)                                   | ,                       | U b S         | ======================================= |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:  | WM Profile # terials Listed About and Additional Info  | ormation                                     | zardous wastes as o   | Y CONTA                              | CENT / PH             | HONE NO.:   | r any applicab                   | ole state law, ulations.                    | have been fu            |               | ======================================= |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name   | WM Profile # terials Listed About and Additional Info  | ormation                                     | zardous wastes as (   | Y CONTA                              | CENT / PH             | HONE NO.:   | r any applicab                   | ole state law, ulations.                    | ,                       | Ily and       | Year                                    |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name   | wm Profile # terials Listed Abor and Additional Info<br>1293 scribed materials a d packaged and a  | ormation  / are not ha re in prope           | zardous wastes as o   | Y CONTA                              | CENT / PH             | HONE NO.:   | r any applicab                   | ole state law, rulations.                   | have been fu            |               | Year                                    |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name   | wm Profile # terials Listed Abor and Additional Info<br>1293 scribed materials a d packaged and a  | ormation  / are not ha re in prope           | zardous wastes as der condition for trai<br>Signature "On l                   | Y CONTA                              | CENT / PH             | HONE NO.:   | r any applicab                   | ole state law, ulations.                    | have been fu            |               | 18                                      |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name   | wm Profile # terials Listed Above and Additional Info  | are not ha<br>re in prope                    | zardous wastes as o   | Y CONTA                              | CENT / PH             | HONE NO.:   | r any applicab                   | ole state law, ulations.                    | have been fu            | Day           | 18                                      |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name   | wm Profile # terials Listed Above and Additional Info  | are not ha<br>re in prope                    | zardous wastes as or<br>er condition for trai<br>Signature "On I<br>Signature | Y CONTA                              | CENT / PH             | HONE NO.:   | r any applicab                   | الراد الله الله الله الله الله الله الله ال | have been fu            | Day           | Year                                    |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name   | wm Profile # terials Listed Above and Additional Info  | are not ha<br>re in prope                    | zardous wastes as der condition for trai<br>Signature "On l                   | Y CONTA                              | CENT / PH             | HONE NO.:   | r any applicab                   | ole state law, ulations.                    | have been fu            | Day           | Year                                    |
| J. Additional Descriptions for Marian Special Handling Instructions at Purchase Order # GPC10760  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgem Printed Name  18. Transporter 2 Acknowledgem Printed Name   | wm Profile # terials Listed Above and Additional Info 293 scribed materials a d packaged and an ent of Receipt of I                      | are not ha<br>re in prope<br>Materials       | zardous wastes as der condition for train Signature "On l                     | Y CONTA<br>defined<br>insportate     | by CFR ion accor      | HONE NO.:   | r any applicat                   | URBOTIS.                                    | have been fu            | Day Day Day   | Year                                    |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name  17. Transporter 1 Acknowledgems  Printed Name  Printed Name  18. Transporter 2 Acknowledgems  Printed Name  19. Certificate of Final Treatment  Licertify, on behalf of the above list                     | wm Profile # terials Listed Above and Additional Info 293 scribed materials a d packaged and an ent of Receipt of I                      | are not ha re in prope  Materials  Materials | zardous wastes as der condition for train Signature On I                      | Y CONTA<br>defined<br>insportate     | by CFR ion accor      | HONE NO.:   | r any applicat                   | URBOTIS.                                    | have been fu            | Day Day Day   | Year                                    |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name  17. Transporter 1 Acknowledgems  Printed Name  18. Transporter 2 Acknowledgems  Printed Name  19. Certificate of Final Treatment I certify, on behalf of the above list applicable laws, regulations, perm | wm Profile # terials Listed Above and Additional Info 2293 scribed materials a d packaged and an ent of Receipt of N ent of Receipt of I | are not ha re in prope  Materials  Materials | zardous wastes as der condition for train Signature On I                      | y CONTA defined insportate behalf of | by CFR ion accor      | HONE NO.:   | r any applicat<br>applicable reg | URBOTIS.                                    | have been fu            | Day Day Day   | Year                                    |
| J. Additional Descriptions for Mar<br>15. Special Handling Instructions a<br>Purchase Order # GPC10760<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-des<br>accurately described, classified and<br>Printed Name  17. Transporter 1 Acknowledgems  Printed Name  Printed Name  18. Transporter 2 Acknowledgems  Printed Name  19. Certificate of Final Treatment  Licertify, on behalf of the above list                     | wm Profile # terials Listed Above and Additional Info 2293 scribed materials a d packaged and an ent of Receipt of N ent of Receipt of I | are not ha re in prope  Materials  Materials | zardous wastes as der condition for train Signature On I                      | y CONTA defined insportate behalf of | by CFR ion accor      | HONE NO.:   | r any applicat<br>applicable reg | URBOTIS.                                    | have been fu            | Day Day Day   | Year<br>Year<br>Year                    |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1250083

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/01/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677708

Destination PN

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGÍA POWER - PLANT KRAFT

Time

In 05/01/2018 12:54:50 Out 05/01/2018 12:54:50

Scale

rb Inbound 1

Operator

Vehicle# L07

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

rb

Volume

54980 Tb Gross 25240 1b Tare 29740 lb Net 14.87 Tons

Comments

### WASTE MANAGEMENT

|     |  | LD%    | Qtv  | UOM                                  | Rate | Tax | Amount | nuibin   |
|-----|--|--------|--|--------------------------------------|------|-----|--------|--|
| Pro | oduct  | L1/n   | m v y  | Supplied t                           |      |     |        | these where defendables shore better every devel devel desir device more where |
|     | title court from these party court from many place many access areas court place about scient from event |        | when the state take the state to be made the | W \$100 man 2000 2000 1000 1000 1000 |      |     |        | PORTW  |
| 4   | COOL ASH & COAL  | CO 100 | 14.87  | Tons                                 |      |     |        | E WEEK I TA  |

Total Tax Inbat finket



| NON-HAZARDOUS MANIFEST   | 1. Generator's US EF   |  | nifest Doc No.   | 2. Page 1 o  | f                               | 12:0                            | )5                   |
|--|--|--|--|--|---------------------------------|---------------------------------|----------------------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | 79208  | nerator's Site Address (If dif<br>EORGIA POWER PLANT   |  | A. Manifes   | t Number<br><b>MNA</b>          | 6677708                         |                      |
| 241 RALPH MCGILL BLVD NI<br>ATLANTA, GA 30308-3374   | PC   | 55 CROSSGATE RD.<br>DRT WENTWORTH, GA  | 31407  | -/4-   | B. State G                      | ienerator's ID                  |                      |
| 4. Generator's Phone 404 5. Transporter 1 Company Name   | -506-1365  | 6. US EPA ID   | Number   |  |                                 |                                 |                      |
| Coastal (-   | Tradina  |  |  |  | ansporter's ID<br>orter's Phone | )                               |                      |
| 7. Transporter 2 Company Name  | 1  | 8. US EPA ID   | Number   |  | ansporter's ID                  |                                 |                      |
| 9. Designated Facility Name and S  | Site Address   | 10. US EPA I   | D Number   | r, Halispo   | Itel 3 Filone                   |                                 |                      |
| SUPERIOR LANDFILL  | Site Addition  |  |  | G. State Fa  | acility ID                      |                                 |                      |
| 3001 LITTLE NECK ROAD  |  |  |  | H. State Fa  | acility Phone                   | 912-927-61                      | 13                   |
| Savannah, GA 31419   |  |  |  |  |                                 |                                 |                      |
|  |  |  | 12. Containers   | 13. Total  | 14, Unit                        | I. Misc. Comm                   | ents                 |
| 11. Description of Waste Materia   | A  |  | No. Type   | Quantity   | Wt./Vol.                        |                                 |                      |
| a. COAL ASH& COAL CONTA  |  | . Z  | POTDT  | 18   |                                 |                                 |                      |
|  | file # 375200GAKR  | Α Ο  |  |  |                                 |                                 |                      |
| b.   |  |  |  |  |                                 |                                 | *                    |
|  | WM Profile #   |  |  |  |                                 |                                 |                      |
| C.   | WW. Frome #  |  |  |  |                                 |                                 |                      |
|  |  |  |  |  |                                 |                                 |                      |
|  | WM Profile #   |  |  |  |                                 |                                 |                      |
| d.   |  |  |  |  |                                 |                                 |                      |
|  | WM Profile #   |  |  |  |                                 |                                 |                      |
| J. Additional Descriptions for M   | The Mark Control of the Control of t |  | K. Disposal Location   | n  |                                 |                                 |                      |
|  |  |  | Cell / / > 5   | 1  | · · ·                           | Level _                         | 10                   |
|  | 1  |  | Grid /   | 0/29   | WO                              | 11632 F                         | 6                    |
| 1 2 2 3 2 3 1 3 1 3 1 2 3 1 3 2 3 2 3 2  | and Additional Informat  | ion  | 1  | 101  | 1                               | 1500                            |                      |
| 1 15 Special Handling Instructions   |  |  |  |  |                                 |                                 |                      |
| 15. Special Handling Instructions  |  |  |  |  |                                 |                                 |                      |
|  |  |  | NITACT / BLICNE NO .   |  |                                 |                                 |                      |
| Purchase Order # GPC1076   |  | EMERGENCY CC   | ONTACT / PHONE NO.:  |  |                                 |                                 |                      |
| Purchase Order # GPC1076   |  |  |  | r any applicab   | le state law, l                 | nave been fully and             |                      |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE:   | escribed materials are no  | ot hazardous wastes as defin<br>proper condition for transpo   | ned by CFR Part 261 or<br>ortation according to a            | r any applicab<br>pplicable regu   | le state law, h                 |                                 |                      |
| Purchase Order # GPC1076   | escribed materials are no  | ot hazardous wastes as defi  | ned by CFR Part 261 or<br>ortation according to a            | r any applicab<br>applicable regi  | le state law, hulations.        | nave been fully and             | Year                 |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name   | escribed materials are no<br>and packaged and are in p   | ot hazardous wastes as defi<br>proper condition for transpo<br>Signature "On beh   | ned by CFR Part 261 or<br>ortation according to a            | r any applicab   | le state law, h<br>ulations.    |                                 |                      |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledger   | escribed materials are no<br>and packaged and are in p   | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>rials  | ned by CFR Part 261 or<br>ortation according to a            | r any applicab   | le state law, h<br>ulations.    |                                 | Year                 |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledged Printed Name  | escribed materials are no<br>and packaged and are in p   | ot hazardous wastes as defi<br>proper condition for transpo<br>Signature "On beh   | ned by CFR Part 261 or<br>ortation according to a            | r any applicab<br>applicable reg   | le state law, h                 | Month Day                       | Year                 |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledged Printed Name  | escribed materials are no<br>and packaged and are in p<br>ment of Receipt of Mater   | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>rials  | ned by CFR Part 261 or<br>ortation according to a            | r any applicab   | le state law, l                 | Month Day                       | Year                 |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledged Printed Name  | escribed materials are no<br>and packaged and are in p<br>ment of Receipt of Mater   | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>rials  | ned by CFR Part 261 or<br>ortation according to a            | r any applicab<br>pplicable regu   | le state law, h                 | Month Day                       | Year                 |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledged Printed Name  18. Transporter 2 Acknowledged Printed Name   | escribed materials are no<br>and packaged and are in p<br>ment of Receipt of Mater   | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha-<br>rials<br>Signature  | ned by CFR Part 261 or<br>ortation according to a            | r any applicab<br>applicable regi  | le state law, h                 | Month Day                       | Year                 |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  18. Transporter 2 Acknowledge Printed Name  | escribed materials are no<br>and packaged and are in p<br>ment of Receipt of Mater<br>ment of Receipt of Mater<br>ment of Receipt of Mater   | ot hazardous wastes as definition for transport condition for transport signature. On behaviorals  Signature  Signature  Signature  Signature  | ned by CFR Part 261 or<br>ortation according to a<br>alf of" | A Company of the comp | aladions.                       | Month Day  Month Day  Month Day | Year<br>Year<br>Year |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledge Printed Name  18. Transporter 2 Acknowledge Printed Name  19. Certificate of Final Treatment I certify, on behalf of the above applicable laws, regulations, per | escribed materials are no and packaged and are in packaged and are into a packaged and are in pack | ot hazardous wastes as definition for transport condition for transport signature. On behavior is a signature signature. Signature signature that to the best of my know dates listed above.   | ned by CFR Part 261 or<br>ortation according to a<br>alf of" | cribed waste   | aladions.                       | Month Day  Month Day  Month Day | Year<br>Year<br>Year |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  18. Transporter 2 Acknowledge Printed Name  | escribed materials are no and packaged and are in packaged and are into a packaged and are in pack | ot hazardous wastes as define the condition for transport of the condition for transport of the condition for the conditio | ned by CFR Part 261 or<br>ortation according to a<br>alf of" | cribed waste   | aladions.                       | Month Day  Month Day  Month Day | Year Year a all      |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d accurately described, classified a Printed Name  17. Transporter 1 Acknowledge Printed Name  18. Transporter 2 Acknowledge Printed Name  19. Certificate of Final Treatment I certify, on behalf of the above applicable laws, regulations, per | escribed materials are no and packaged and are in packaged and are into a packaged and are in pack | ot hazardous wastes as definition for transport condition for transport signature. On behavior is a signature signature. Signature signature that to the best of my know dates listed above.   | ned by CFR Part 261 or<br>ortation according to a<br>alf of" | cribed waste   | aladions.                       | Month Day  Month Day  Month Day | Year Year a all      |

Pink- FACILITY USE ONLY



Original Ticket# 1250087

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL Vehicle# 1

Ticket Date 05/01/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677709 Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/01/2018 13:01:30

Dut 05/01/2018 13:01:30

Scale Inbound 1

Operator rb rb

7 pt. 1 5

Gross Tare Net

66380 lb 29480 1b 36900 lb 18,45

Tons

Comments

### WASTE MANAGEMENT

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

| Proc                  | luct               | LD% | Qty   | LIOM | Rate | Тах | Amount | Origin |
|-----------------------|--------------------|-----|-------|------|------|-----|--------|--------|
| \$100 PERSON BRIDE IN |                    |     |       |      |      |     |        |        |
| 1                     | COAL ASH & COAL CO | 100 | 18.45 | Tons |      |     |        | PORTW  |



## WATER NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  1. Generator's   | THE LUCK HAND  |                            | ) Page I of                                   |  |
|--|--|----------------------------|---|--|
|  | N / A  | Manifest Doc No.           | 2. Page 1 of                                  | 12:08  |
| Generator's Mailing Address:<br>GEORGIA POWER<br>41 RALPH MCGILL BLVD NE, BIN#10221<br>GTLANTA, GA 30308-3374  | Generator's Site Address<br>GEORGIA POWER PI<br>155 CROSSGATE RD<br>PORT WENTWORTH | ANT KRAFT                  | A. Manifest Numb WMNA B. 9                    | 6677709<br>State Generator's ID  |
| . Generator's Phone 404-506-1365   |  |                            |   |  |
| Transporter 1 Company Name   | 6. US E  | PA ID Number               | C. State Transpor                             |  |
| - 000 tal (21000 JO  | 8. US E  | PA ID Number               | D. Transporter 3 i                            |  |
| . Transporter 2 Company Name   | )  |                            | E. State Transpor<br>F. Transporter's F       | CONTRACTOR OF THE CONTRACTOR O |
| Designated Facility Name and Site Address  | 10. US   | EPA ID Number              | G. State Facility I                           | n  |
| SUPERIOR LANDFILL  |  |                            | H. State Facility F                           | 042 027 6442   |
| 3001 LITTLE NECK ROAD  |  |                            | H. State Facility F                           | Holle 312 327 8118   |
| Savannah, GA 31419   |  |                            |   |  |
| 11. Description of Waste Materials   |  | 12. Containers             |   | Unit I. Misc. Comments   |
| PRODUCTION OF THE PRODUCT OF THE PRO | CTE  | No. Type                   | Quantity                                      |  |
| a. COAL ASH& COAL CONTAMINATED WA  | SIE  | IMFILIT                    | 18  |  |
| WM Profile # 375200G   | ΕΔΚΒΔ  |                            |   |  |
| b.   | , tto  |                            |   |  |
|  |  | -11                        |   |  |
| WM Profile #   |  |                            |   |  |
| C.   |  |                            |   |  |
|  |  |                            | 12  |  |
| WM Profile #   |  |                            | 27  |  |
| d.   |  |                            |   |  |
|  |  | BETTERNING TO THE STREET   |   |  |
| WM Profile #  J. Additional Descriptions for Materials Listed About  | ove  | K. Disposal Locati         | on and a                                      | 7  |
| J. Additional Descriptions for Materials Listed Abo  | JAC .  |                            | NISCHI  | 9  |
|  |  | Cell                       | 100   | 2 Level 4  |
| (S)  |  | Grid                       | Molle   |  |
| 15. Special Handling Instructions and Additional Inf   | cormation  |                            |   |  |
| Purchase Order # GPC10760293   | EMERGEN  | CY CONTACT / PHONE NO      | <b>:</b>                                      |  |
| 16. GENERATOR'S CERTIFICATE:   |  |                            | Probleman                                     | - law have been fully and  |
| Thereby certify that the above-described materials   | are not hazardous wastes a   | s defined by CFR Part 261  | or any applicable state applicable regulation | S.   |
| accurately described, classified and packaged and a  | Signature "O   | n behalf of"               | 1 11  | Month Day  |
| Printed Name<br>B + 1 Povice   | 78   |                            | 0   | 12111  |
| 17. Transporter 1 Acknowledgement of Receipt of  | Materials  |                            |   | Marie Sau  |
| Printed Name   | Signature  | 11 M                       |   | Month Day  |
| Leo Flor   | 7)   | 11/11                      |   | 211  |
| 18. Transporter 2 Acknowledgement of Receipt of  |  |                            |   | Month Day  |
| Printed Name   | Signature  |                            |   |  |
|  |  |                            |   |  |
|  |  |                            |   | anaged in compliance with all  |
| 19. Certificate of Final Treatment/Disposal  | acility, that to the best of my  | knowledge, the above-de    | escribed waste was m                          | anageu in compnance with an  |
| Logitify on hehalf of the above listed treatment fa  | on the dates listed above.   |                            |   |  |
| I certify, on behalf of the above listed treatment for   | saint of non hazardous mat   | erials covered by this man | mest.   | AT AMERICA   |
| I certify, on behalf of the above listed treatment for<br>applicable laws, regulations, permits and licenses<br>20. Facility Owner or Operator: Certification of re-   | eceipt of non-hazardous mat  | erials covered by this man | mest.   | Month Day  |
| I certify, on behalf of the above listed treatment for   | eceipt of non-hazardous material Signature   | erials covered by this man | ×-  | Month Day  GENERATOR #1 COPY   |



Original Ticket# 1250090

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 05/01/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677710 Destination

po

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/01/2018 13:05:31 Inbound 1

Out 05/01/2018 13:05:31

Scale

Operator rb rb

59420 1b Gross 27500 lb Tare 31920 lb Net 15.96 Tons

Comments

#### WASTE MANAGEMENT

Vehicle# 5306

Billing # 0001037

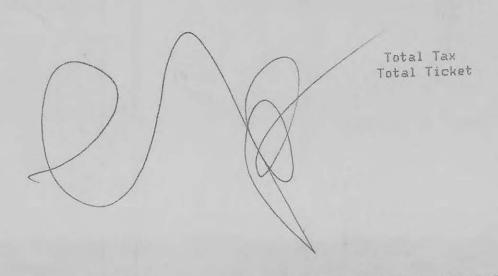
Gen EPA ID NR

Container

Driver

Check#

Origin Qty UOM Rate Amount Tax LD% 1 COAL ASH & COAL CO 100 15.96 Tons PORTW





# NON-HAZARDOUS MANIFEST

|                                       | 1. Generator's l   | US EPA ID   | No.   | Mai  | nifest Doc N   | lo.   | 2. Page 1 o   | of   | , ~  | 11/2  |  |  |
|---------------------------------------|--|---|---|--|--|---|---|--|--|---|--|--|
| NON-HAZARDOUS MANIFEST                |  | N/A   |   | NIS  |  |   | WAL TO  |  | 10   | 10  | _  |  |
| GEORGIA POWER                         |  | GEOR  | GIA POWE  | R PLAN   |  | ailing):  |   | MNA  | W 5445 W 5   | 10  |  |  |
| ATLANTA, GA 30308-3374                |  | The second second   |   |  | 31407  |   |   | B. State G   | ienerator's ID   |   |  |  |
|                                       | 06-1365  |   | 6.  | JS EPA ID  | Number   | 1   | -   |  |  |   |  |  |
| . Transporter 2 Company Name          | as.ng  |   | 8.  | US EPA ID  | Number   |   | E. State Tr   | ransporter's II  |  |   |  |  |
|                                       | ator's Mailing Address:  IA POWER LPH MCGILL BLVD NE, BIN#10221 TA, GA 30308-3374 ator's Phone 404-506-1365 Forter 1 Company Name Forter 2 Company Name Forter 2 Company Name Forter 3 Table 1 Table 1 Table 1 Table 2 Table 3 Table 3 Table 2 Table 2 Table 3 Table 2 Table 2 Table 2 Table 3 Table 2 Table 2 Table 3 Table 2 Table 2 Table 2 Table 3 Table 2 Table 2 Table 3 Table 3 Table 2 Table 2 Table 3 |   | 10.   | US EPA   | D Number   |   |   |  |  |   |  |  |
|                                       |  |   |   |  |  |   | H. State F  | acility Phone  | 912-92   | 7-6113  |  |  |
| 11. Description of Waste Materials    |  |   |   |  | 12. Cc<br>No.  | ontainers<br>Type   | 13. Total<br>Quantity   | 14. Unit<br>Wt./Vol.   | I. Mis   | . Comments  |  |  |
| a. COAL ASH& COAL CONTAN              | MINATED WAS  | STE   |   | 5  | 306  | DT  | 18  |  |  |   |  |  |
|                                       | # 375200G/   | AKRA  |   |  |  |   |   |  |  |   |  |  |
|                                       | WM Profile #   |   |   |  |  |   |   |  |  |   |  |  |
| c.                                    |  |   |   |  |  |   |   |  |  |   |  |  |
|                                       | WM Profile #   |   |   | 11   |  |   |   |  |  |   |  |  |
| <b>d.</b>                             |  |   |   |  |  |   |   |  |  |   |  |  |
|                                       |  | ve  |   |  | N CONTRACTOR   | osal Locatio  | on A  | 121  |  | 61  |  |  |
|                                       |  |   | Mark Control  |  | Cell<br>Grid   |   | 100   | 1, )   | Level  |   |  |  |
| 15. Special Handling Instructions at  | nd Additional Info   | ormation  |   |  |  |   | ~11   | 163  |  |   |  |  |
| (A) (图象) 一名 (A)                       | 293  |   | EMER  | GENCY C  | ONTACT / P   | HONE NO.:   |   |  |  |   |  |  |
|                                       | cribed materials a<br>I packaged and ar  | are not ha<br>re in prop  | er condition  | ioi transh   | or tation ac   | Part 261 c  | or any applical<br>applicable reg   | ble state law,<br>gulations.   |  |   | Year   |  |
| Printed Name B + 11 Poulch            |  |   | Signatur  | On bel   | ialf of"   | 1   |   | )  | 5  | 1   | π  |  |
| Printed Name                          | dine   |   | Signatur  | e  | Sud  | u   | 100   | 2  | Month 5  | Day   | Year   |  |
| Printed Name                          |  |   | Signatu   | é  |  |   |   |  | Month  | Day   | Year   |  |
| I certify, on behalf of the above lis | ted treatment fac<br>its and licenses o  | on the dat  | es listed abov  | ie.  |  |   |   | was manage   | d in complian  | ce with all   |  |  |
| 20. Facility Owner or Operator: C     | ertification of rec  | ceipt of no   | on-hazardous  | material   | s covered b  | y this mani   | test.   |  | Month  | Day   | Year   |  |
| Printed Name                          |  |   | Signatu   |  |  |   |   |  |  |   |  |  |
|                                       | Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 Generator's Phone 404-5 Generator's Callity Name and Sites Generator Standard Name 404-5 Generator Standard Name 404-5 Generator's Certificate: Generator's Company Name  The Standard Name  15. Special Handling Instructions and Generator Name  Purchase Order # GPC10760: Generator's Certificate: Generator's Phone 404-5 Generat | Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374  Generator's Phone 404-506-1365  Transporter 1 Company Name  D. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WAS  WM Profile # 375200G  b.  WM Profile #  C.  WM Profile #  J. Additional Descriptions for Materials Listed About  15. Special Handling Instructions and Additional Inf  Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials accurately described, classified and packaged and a Printed Name  17. Transporter 1 Acknowledgement of Receipt of Printed Name  18. Transporter 2 Acknowledgement of Receipt of Printed Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment fa applicable laws regulations, permits and licenses of applicable laws regulations. | Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 155 CL 241 RALPH MCGILL BLVD NE, BIN#10221 16. Generator's Phone 404-506-1365 16. Transporter 1 Company Name 17. Transporter 2 Company Name 18. Designated Facility Name and Site Address SUPERIOR LANDFILL 18. GOOL LITTLE NECK ROAD 19. Designated Facility Name and Site Address SUPERIOR LANDFILL 19. Description of Waste Materials 19. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  19. WM Profile #  19. Additional Descriptions for Materials Listed Above  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: 1 hereby certify that the above-described materials are not ha accurately described, classified and packaged and are in proper Printed Name  17. Transporter 1 Acknowledgement of Receipt of Materials Printed Name  18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name  19. Certificate of Final Treatment/Disposal 1 Leertify, on behalf of the above listed treatment facility, that appolications, permits and licenses on the date applications, permits and licenses on the date applications, permits and licenses on the date applications, permits and licenses on the date applications. Permits and licenses on the date applications. | Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374  1. Generator's Phone 404-506-1365  5. Transporter 1 Company Name 6. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  C.  WM Profile #  C.  WM Profile #  C.  WM Profile #  J. Additional Descriptions for Materials Listed Above  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMER  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wast accurately described, classified and packaged and are in proper condition in printed Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  19. Certificate of Final Treatment/Disposal Lecrtify, on behavir of the above pirist sand licenses on the dates listed above applicable leaver regulations, permits and licenses on the dates listed above applicable leaver regulations, permits and licenses on the dates listed above specified and licenses on | Generator's Mailing Address: SEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 1. Generator's Phone 404-506-1365 S. Transporter 1 Company Name 6  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  d.  WM Profile #  d.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CO 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as def accurately described, classified and packaged and are in proper condition for transpering Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  18. VS EPA ID  GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as def accurately described, classified and packaged and are in proper condition for transpering Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  18. VS EPA ID  GEORGIA POWER PLANT  15. SC ROSSGATE RD.  PORT WENTWORTH, GA  B. US EPA ID  U | Generator's Mailing Address: SEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 L Generator's Phone 404-506-1365 5. Transporter I Company Name 6. US EPA ID Number 7. Transporter I Company Name 7. Transporter I Company Name 8. US EPA ID Number 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419 11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE WM Profile # 375200GAKRA b. WM Profile # 6.  WM Profile # 6.  WM Profile # 6.  WM Profile # 6.  WM Profile # 7. Additional Descriptions for Materials Usted Above 8. Cell Grid 15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / Printed Name 7. Signature 7. Dehalf of Printed Name 8. Signature 8. Signature 8. Signature 9. Signature 9. Signature 9. Signature 9. Signature 9. Printed Name 9. Signature 9. | Separator's Mailing Address: SEORGIA POWER  241 RALPH MCGILL BLVD NE, BIN#10221 ACAILANTA, GA 30308-3374 A. Generator's Phone 404-506-1365 STRANTA, GA 30308-3374 C. Generator's Phone 404-506-1365 C. Transporter 1 Company Name  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  C. WM Profile #  1. Additional Descriptions for Materials Listed Above  WM Profile #  1. Additional Descriptions for Materials Listed Above  Cell Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.  16. GENERATOR'S CERTIFICATE:  Ihereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 of Caucily described, classified and packaged and are in proper condition for transportation according to Signature On behalf of Printed Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  19. Certificate of Final Treatment/Disposal  10. Signature  19. Certificate of Final Treatment/Disposal  Licertify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above descentive described by cermits and licenses on the dates listed above. | Generator's Malling Address: Generator's Malling Address: Generator's Site Address (if different than mailing): GEORGIA POWER 4/1 RAIPH MCGILL BLVD NE, BIN#10221 ATIANTA, GA 30308-3374 B. Generator's Phone 404-506-1365 B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name B. US EPA ID Number C. State In Driver 2 Company Name C. State In Drive | Generator's Mailing Address: Generator's Mailing Address: GEORGIA POWER 41. RALPH MCGILL BLVD NE, BIN#10221 15.5 CROSSGATE RD. PORT WENTWORTH, GA 31407  B. State Tansporter's MMNA  B. State Of Washington Company Name  GEORGIA POWER PLANT KRAFT 15.5 CROSSGATE RD. PORT WENTWORTH, GA 31407  B. State Tansporter's Department of Company Name  GEORGIA POWER PLANT KRAFT 15.5 CROSSGATE RD. PORT WENTWORTH, GA 31407  B. State Tansporter's III. Description of Washington Company Name  G. State Facility III. F. Transporter's III. F. Transporter's Phone  8. US EPAID Number  G. State Transporter's III. F. Transporter's Phone  10. US EPAID Number  G. State Facility III. H. State Facility III. J. Additional Descriptions of Waste Materials  WM Profile #  G. State Facility III. H. State Facil | Generator's Mailing Address:  GEORGIA POWER  GEORGIA POWER  GEORGIA POWER PLANT KRAFT  STS CROSGASTE RD.  PORT WENTWORTH, GA 31407  B. State Generator's ID  D. Transporter Company Name  404-506-1365  GEORGIA POWER PLANT KRAFT  STS CROSGASTE RD.  PORT WENTWORTH, GA 31407  B. State Generator's ID  D. Transporter's Phone  404-506-1365  GEORGIA POWER PLANT KRAFT  B. State Generator's ID  D. Transporter's Phone  404-506-1365  G. US EPA ID Number  G. State Facility Name and site Address  SUPERIOR LANDFILL  300 LITTLE ROCK ROAD  Savannah, GA 31419  11. Description of Waste Moterials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  G. GENERATOR'S CERTIFICATE.  Hereby certify that the above described materials are not hazardous wastes as defined by CER Part 250 or any applicable state law, have been full formation in the control of the | Generator's Mailing Address: GEORGIA POWER GEORGIA |  |

Pink- FACILITY USE ONLY

Original Ticket# 1250117

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677711

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 13:34:11 Dut 05/01/2018 13:34:11 Scale

Inbound 1

Operator

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

mb rb

Vehicle# 5307 Volume

Gross Tare Net

55860 15 24080 1b 31780 lb

15.89 Tons

Product

Comments

LD%

Qty

UOM

WASTE MANAGEMENT Rate

Tax

Amount

Origin

COAL ASH & COAL CD 100 15.89 Tons

PORTW

Total Tax Inhal ficket



## WAY NON-HAZARDOUS MANIFEST

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|--|--|--|--|------------------------------------|---------------------------------|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US E  | EPA ID No. M<br>/ A  | anifest Doc No.  | 2. Page 1 d                        | )T                              | 12:51  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | G  | enerator's Site Address (If o  |  | A. Manifes                         | MNA                             | 6677711  |
| 241 RALPH MCGILL BLVD NE, E<br>ATLANTA, GA 30308-3374  | Po   | 55 CROSSGATE RD.<br>ORT WENTWORTH, G   | iA 31407   |                                    | B. State (                      | Generator's ID   |
|  | 06-1365  | 6. US EPA I  | D Number   |                                    |                                 |  |
| 5. Transporter 1 Company Name  | 1  | d. OSEFA.  | D Number   | C. State T                         | ansporter's II                  | )  |
| 120016 1 100   | adina  |  |  | D. Transp                          | orter's Phone                   |  |
| 7. Transporter 2 Company Name  |  | 8. US EPA  | ID Number  |                                    |                                 |  |
|  |  |  |  |                                    | ansporter's II<br>orter's Phone |  |
| O. D. January J. Carillan, Name and Site   | Address  | 10. US EPA   | A ID Number  | T, Halispe                         | office 31 mone                  |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL  | : Address  | 10. 05 L.  |  | G. State F                         | acility ID                      | THE RESERVE OF THE PARTY OF THE |
| 3001 LITTLE NECK ROAD  |  |  |  | H. State F                         | acility Phone                   | 912-927-6113   |
| Savannah, GA 31419   |  |  |  |                                    |                                 |  |
| Savarinari, GA 51419   |  | All Chinas   |  |                                    |                                 |  |
| 11. Description of Waste Materials   |  |  | 12. Containers No. Type  | 13. Total<br>Quantity              | 14. Unit<br>Wt./Vol.            | I. Misc. Comments  |
| a. COAL ASH& COAL CONTAM   | MINIATED WASTE   |  | турс   |                                    |                                 |  |
| a. COAL ASHA COAL CONTAIN  | IIIVATED WASTE   |  | 6317 D   | TIF6                               |                                 |  |
| WM Profile   | # 375200GAKR   | RA .   | 1  |                                    |                                 |  |
| b.   |  |  |  |                                    |                                 |  |
|  |  |  |  |                                    |                                 |  |
| *  | WM Profile #   |  |  |                                    |                                 |  |
| C.   |  |  |  |                                    | 41.0                            | 7  |
|  |  |  |  |                                    |                                 |  |
|  | WM Profile #   |  |  |                                    |                                 |  |
| d.   |  |  |  |                                    |                                 |  |
|  |  |  |  |                                    |                                 |  |
|  | WM Profile #   |  | K. Disposal Loca   | tion                               |                                 |  |
| J. Additional Descriptions for Mate  | ariais Listed Above  |  |  | 1107                               | 2170                            | 1 //   |
|  |  |  | Cell   | INDE                               | 110                             | Level (0)  |
|  |  |  | Grid   | The                                | 1630                            | /  |
|  | nd Additional Informa  | ition  |  | 0 0                                |                                 |  |
| 15. Special Handling Instructions an   |  |  |  |                                    |                                 |  |
| 15. Special Handling Instructions an Purchase Order # GPC107602  | 1000   | EMERGENCY (  | CONTACT / PHONE NO   | O.:                                |                                 |  |
| Purchase Order # GPC107602   | 293  |  |  |                                    |                                 |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:   | 293  | not hazardous wastes as de   | efined by CFR Part 26  | L or any applical                  | ole state law,                  | have been fully and  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and   | 293  | not hazardous wastes as de<br>proper condition for trans   | efined by CFR Part 263<br>portation according t                                | L or any applical                  | ole state law,<br>rulations.    |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  | 293  | not hazardous wastes as de   | efined by CFR Part 263<br>portation according t                                | L or any applical                  | ole state law,<br>ulations.     |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  | 293<br>cribed materials are n<br>packaged and are in   | not hazardous wastes as de<br>proper condition for trans<br>Signature "On be   | efined by CFR Part 263<br>portation according t                                | L or any applical                  | ole state law,<br>rulations.    | Month Day Ye   |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  | 293<br>cribed materials are n<br>packaged and are in   | not hazardous wastes as de<br>proper condition for trans<br>Signature "On be   | efined by CFR Part 263<br>portation according t                                | L or any applical                  | ole state law,<br>ulations.     | Month Day Y  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  | cribed materials are n packaged and are in ant of Receipt of Mate  | not hazardous wastes as de<br>proper condition for trans<br>Signature "On be<br>erials   | efined by CFR Part 263<br>portation according t                                | L or any applical                  | ole state law,<br>ulations.     | Month Day Y  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement   | cribed materials are n packaged and are in ant of Receipt of Mate  | not hazardous wastes as de<br>proper condition for trans<br>Signature "On be<br>erials   | efined by CFR Part 263<br>portation according t                                | L or any applical                  | ole state law,<br>rulations.    | Month Day Ye   |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement   | cribed materials are n packaged and are in ant of Receipt of Mate  | not hazardous wastes as de<br>proper condition for trans<br>Signature "On be<br>erials<br>Signature  | efined by CFR Part 263<br>portation according t                                | L or any applical                  | ole state law,<br>ulations.     | Month Day Ye   |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  Printed Name  18. Transporter 2 Acknowledgement Printed Name  | cribed materials are n packaged and are in ent of Receipt of Materials are n Materials are n packaged and are in ent of Receipt of Materials are not of Receipt of Rec | not hazardous wastes as de proper condition for trans Signature "On be erials Signature Signature Signature  | efined by CFR Part 26:<br>sportation according to<br>shalf of"                 | L or any applical o applicable reg | uddions.                        | Month Day Y  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/Legrify, on behalf of the above list   | cribed materials are n packaged and are in the of Receipt of Material of Receipt of Receipt of Material of Receipt | not hazardous wastes as de proper condition for trans Signature "On be erials Signature Signature erials Signature   | efined by CFR Part 26:<br>sportation according to<br>shalf of"                 | L or any applical o applicable reg | uddions.                        | Month Day Y  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  Printed Name  18. Transporter 2 Acknowledgement Name  19. Certificate of Final Treatment/I certify, on behalf of the above list applicable laws, regulations, permi | cribed materials are n packaged and are in the of Receipt of Materials are not of Receipt of Materials are not of Receipt of Materials and licenses on the critical and licenses on the critic | oot hazardous wastes as de proper condition for trans Signature "On be erials Signature  Signature  orials Signature  that to the best of my know e dates listed above.                  | efined by CFR Part 26: portation according to ehalf of"  owledge, the above-de | L or any applical o applicable reg | uddions.                        | Month Day Y  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/Light Certify on behalf of the above list  | cribed materials are n packaged and are in the of Receipt of Materials are not of Receipt of Materials are not of Receipt of Materials and licenses on the critical and licenses on the critic | oot hazardous wastes as de proper condition for trans Signature "On be erials  erials Signature  stignature  that to the best of my know a dates listed above.  of non-hazardous materia | efined by CFR Part 26: portation according to ehalf of"  owledge, the above-de | L or any applical o applicable reg | uddions.                        | Month Day Ye   |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/I I certify, on behalf of the above list applicable laws, regulations, permi     | cribed materials are n packaged and are in the of Receipt of Materials are not of Receipt of Materials are not of Receipt of Materials and licenses on the critical and licenses on the critic | oot hazardous wastes as de proper condition for trans Signature "On be erials Signature  Signature  orials Signature  that to the best of my know e dates listed above.                  | efined by CFR Part 26: portation according to ehalf of"  owledge, the above-de | L or any applical o applicable reg | uddions.                        | Month Day Ye   |

Pink- FACILITY USE ONLY

Original Ticket# 1250137

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 05/01/2018 Vehicle# C25 Volume Payment Type Credit Account Container Manual Ticket# Driver Check# Route Billing # 0001037 Gen EPA ID NR

Manifest 6677712 Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

61560 lb Gross Scale Operator Time 27040 1b Tare lbejaran Inbound 1 05/01/2018 14:04:54 In 34520 1b Net lbejaran 05/01/2018 14:04:54 Out 17.26 Tons

Comments

#### WASTE MANAGEMENT

| Clare   | duct               | LD%                             | Qty   | HOM  | Rate | Tax | Amount   | Origin   |
|---------|--------------------|---------------------------------|-------|------|------|-----|--|--|
| P 1 134 |                    | or over the man take and take a |       |      |      |     | THE PARTY AND PARTY ADDRESS AND ADDRESS AN | man term with most print way a new soles what have place from some |
| 1       | CUOL OZH & CUOL CO | 100                             | 17.26 | Tons |      |     |  | PORTW  |

Total Tax

mich from



#### WWW. NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  1. Generat  | 2. Page 1 o          | f                                      | 123           |                  |  |                                 |                |            |     |
|---|----------------------|--|---------------|------------------|--|---------------------------------|----------------|------------|-----|
| Generator's Mailing Address: EORGIA POWER   |                      | s Site Address (If dif<br>, POWER PLAN |               | iling):          | A. Manifes   | t Number<br><b>VINA</b>         | 66777          | 12         |     |
| 41 RALPH MCGILL BLVD NE, BIN#1022<br>TLANTA, GA 30308-3374  |                      | SSGATE RD.<br>ENTWORTH, GA             | 31407         |                  |  | B. State G                      | ienerator's ID |            |     |
| Generator's Phone 404-506-1365 Transporter 1 Company Name   | 6.                   | US EPA ID                              | Number        |                  | C State Tr   | ansporter's IC                  |                |            |     |
| Transporter 2 Company Name  | 109 8.               | US EPA ID                              | Number        |                  | D. Transpo   | orter's Phone                   |                |            |     |
|   | 0                    |  |               | 1                | The state of the s | ansporter's II<br>orter's Phone |                |            |     |
| . Designated Facility Name and Site Address UPERIOR LANDFILL  | 10.                  | US EPA I                               | D Number      | 1                | G. State F   | acility ID                      |                |            |     |
| 001 LITTLE NECK ROAD<br>Savannah, GA 31419  | Trains               |  |               |                  | H. State F   | acility Phone                   | 912-92         | 7-6113     | 3   |
| 1. Description of Waste Materials   |                      |  | 12. Co<br>No. | ntainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.            | I. Mis-        | c. Commen  | ts  |
| . COAL ASH& COAL CONTAMINATED \   | WASTE                | 1                                      | 25            | 77               | 18   |                                 |                |            |     |
|   | OOGAKRA              |  |               |                  |  |                                 |                |            |     |
|   |                      |  |               |                  |  |                                 |                |            |     |
| WM Profile  | <b>H</b>             |  |               |                  |  |                                 |                |            |     |
| :.<br>WM Profile  |                      |  |               |                  |  |                                 |                |            |     |
| d.  |                      |  |               |                  |  |                                 |                |            |     |
| WM Profile  | #                    |  |               |                  |  |                                 |                |            | 1   |
| I. Additional Descriptions for Materials Listed   | 20/                  |  | K. Dispo      | sal Locati       | on / / / /   | 1.76                            |                | 111        | -   |
|   | 1                    |  | Cell          |                  | NOU  | 0101                            | Level          | 0          | )   |
| 15. Special Handling Instructions and Additiona   | I Information        |  | Grid          | (                | N  | 1656                            |                |            |     |
|   |                      |  |               | HONE NO          |  |                                 |                |            |     |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE:  | Jo a                 | EMERGENCY CO                           |               |                  |  |                                 |                |            |     |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   | rials are not hazard | dous wastes as def                     | ined by CFR   | Part 261         | or any applical  | ole state law,                  | have been fu   | lly and    |     |
| accurately described, classified and packaged a   | nd are in proper co  | Signature ("On beh                     | Of tation acc | Jording to       | аррисаріс гед  | guiutions                       | Month          | Day        | -   |
| Printed Name  D + 1/100vich   |                      | BFU                                    | -             |                  |  |                                 | 15             | 1          |     |
| 17. Transporter 1 Acknowledgement of Receip   | t of Materials       |  |               |                  |  |                                 | Month          | Day        |     |
| V Printed Name Michael Frazir   | -                    | Signature Mac                          | hofi          | gi               | 1  |                                 | B              | T          | R   |
| 18. Transporter 2 Acknowledgement of Receip   | nt of Materials      | <b>N</b>                               |               |                  |  |                                 |                | 1 2        |     |
| Printed Name  |                      | Signature                              |               |                  |  |                                 | Month          | Day        |     |
| 19. Certificate of Final Treatment/Disposal   |                      |  | ododas ibs    | abova da         | scribed waste  | was manage                      | d in complian  | ice with a | all |
| <ol> <li>Certificate of Final Treatment/Disposal</li> <li>I certify, on behalf of the above listed treatme<br/>applicable laws, regulations, permits and licen</li> </ol> | ses on the dates II  | sted above.                            |               |                  |  | wasmanage                       | a in compilar  |            |     |
| 20. Facility Owner or Operator: Certification   | of receipt of non-h  | azardous materials                     | covered by    | this man         | itest.   |                                 | Month          | Day        | /   |
|   |                      | Signature                              |               |                  |  |                                 |                |            | -   |

Pink- FACILITY USE ONLY



Original Ticket# 1250161

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier D N Container

Ticket Date 05/01/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677713

Destination

PO Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Generator

Time 05/01/2018 14:49:25 Dut 05/01/2018 14:49:25

Scale Inbound 1

Operator 1bejaran 1bejaran

Drive

Gen EPA ID NR

Billing # 0001037

Check#

57120 lb Gross 23500 lb Tare 33620 lb Net 16.81 Tons

Comments

WASTE MANAGEMENT

3 Origin Amount Tax Rate UOM LD% Qty Product PORTW 16.81 Tons 1 COAL ASH & COAL CO 100

> Total Tax Potal Flokut

7ar/m



#### **NON-HAZARDOUS MANIFEST**

| Y MINERAL MANAGEMENT OF THE STREET                           | Generator's US EPA   | ID No.                      | · · · · ·  | T             | 322             |                     |             |                  |
|--|--|-----------------------------|--|---------------|-----------------|---------------------|-------------|------------------|
| NON-HAZARDOUS MANIFEST                                       | N / A  |                             | inifest Doc No.  | 2. Page 1     | of              | 01                  | - 11        |                  |
| 3. Generator's Mailing Address:                              |  |                             |  |               |                 | 2                   | 74          |                  |
| GEORGIA POWER  |  | rator's Site Address (If di |  | A. Manife     | est Number      | 6677                | 7712        |                  |
| 241 RALPH MCGILL BLVD NE, BIN                                |  | RGIA POWER PLAN             | I KKAFI  | W             | MNA             | 0077                | 112         |                  |
| ATLANTA, GA 30308-3374                                       | and the second second  | CROSSGATE RD.               | . 24.407   |               | B. State 0      | Generator's         | ID          |                  |
|  |  | T WENTWORTH, GA             | 4 3140/  |               |                 |                     |             |                  |
| 4. Generator's Phone 404-506- 5. Transporter 1 Company Name  | 1365   | C NOTES IN                  |  |               |                 | militaria (disense) |             |                  |
| Silvini Porter I company Name                                | 1  | 6. US EPA ID                | Number   | C State T     | ransporter's IE |                     |             |                  |
| Lasta -  | rodina   |                             |  |               | orter's Phone   | ,                   |             |                  |
| 7. Transporter 2 Company Name                                | 1 50,  | 8. US EPA ID                | Number   |               | orter 37 mone   |                     |             |                  |
|  |  |                             |  | E. State T    | ransporter's ID | )                   |             |                  |
| 9. Designated Facility Name and Site Add                     | lmans  | 10 110 504                  | B.1.   | F. Transp     | orter's Phone   |                     |             |                  |
| SUPERIOR LANDFILL  | iress  | 10. US EPA I                | D Number   |               |                 | Ulifa III (III)     |             |                  |
| 3001 LITTLE NECK ROAD  |  |                             |  | G. State F    |                 |                     | 424         |                  |
| Savannah, GA 31419   |  |                             |  | H. State F    | acility Phone   | 912-9               | 27-611      | 3                |
| Savarman, GA 51415   |  |                             |  |               |                 |                     |             |                  |
| 11. Description of Waste Materials                           |  |                             | 12. Containers   | 13. Total     | 14. Unit        |                     |             |                  |
|  | TED WASTE  |                             | No. Type   | Quantity      | Wt./Vol.        | I. M                | lisc. Comme | nts              |
| a. COAL ASH& COAL CONTAMINA                                  | TED WASTE  | D                           | MINT   | 17            |                 |                     |             |                  |
|  | 27520064454  | D                           |  | 110           |                 |                     |             |                  |
|  | 375200GAKRA  |                             |  | 780           |                 |                     |             |                  |
| <b>b.</b>  |  |                             |  | Marine Trans  |                 |                     |             | 1 11             |
|  |  |                             | Control of the second s |               |                 |                     |             |                  |
| c. WM P  | rofile #   |                             |  |               |                 |                     | Ni Salah    |                  |
| C.   |  |                             | The state of the s |               |                 |                     |             |                  |
| WAA D  | rofile #   |                             | 100000   |               |                 |                     |             | 4                |
| d.   | Tonie #  | The Part of the             |  |               |                 |                     |             |                  |
|  |  |                             |  |               | The same of     |                     |             |                  |
| WAA D  | rofile #   |                             |  | 100           |                 | 111.570             |             | Name of the last |
| J. Additional Descriptions for Materials                     |  |                             | K. Disposal Location   |               |                 |                     |             |                  |
|  |  |                             | in disposal Eccution   |               |                 |                     |             |                  |
| 15   |  |                             | Cell 77  | 100           | 12              | Level               |             |                  |
|  |  | No.                         | Grid /   | 291           | 2011            | P3                  | 1           | - /-             |
| 15. Special Handling Instructions and Add                    | litional Information   |                             |  |               |                 | 1                   | -16         | 11-              |
|  |  |                             |  |               |                 |                     | 100         | 1                |
| D  |  |                             |  |               |                 |                     |             |                  |
| Purchase Order # GPC10760293                                 |  | EMERGENCY CON               | ITACT / PHONE NO.:   |               |                 |                     |             |                  |
| 16. GENERATOR'S CERTIFICATE:                                 |  | NAZ STANCE VALVA            |  |               |                 |                     |             |                  |
| I hereby certify that the above-described i                  | materials are not haz  | zardous wastes as define    | ed by CFR Part 261 or a  | any applicabl | e state law, ha | ve been ful         | ly and      |                  |
| accurately described, classified and packate<br>Printed Name | geu anu are in prope   | Signature "On behalf        |  | piicable regu | lations.        | Month               | Day         | Year             |
| BFLippovich  |  | 3 Dinging                   |  |               |                 | Wionth              | July        | / V              |
| 17. Transporter 1 Acknowledgement of Re                      | eceipt of Materials  |                             |  |               |                 | -                   | 1           | 10               |
| / Printed Name   | A CONTRACTOR OF THE PROPERTY O | Şignature                   |  |               |                 | Month               | Day         | Year             |
| YTarren  |  | V Tomas                     | 201  |               |                 | K                   |             | 18               |
| 18. Transporter 2 Acknowledgement of Re                      | eceipt of Materials  |                             |  | VI II         |                 | 2                   | 1           | 1 '              |
| Printed Name   | NAME OF THE  | Signature                   |  |               |                 | Month               | Day         | Year             |
|  |  |                             |  |               |                 | W                   |             |                  |
| 19. Certificate of Final Treatment/Disposa                   |  |                             |  |               |                 |                     |             |                  |
| I certify, on behalf of the above listed trea                |  | o the hest of my knowle     | dge the above describ  | hed wasto w   | as managod in   | complian            | o with all  |                  |
| applicable laws, regulations, permits and I                  |  |                             | uge, the above-descri  | beu waste W   | as managed in   | compliand           | e with all  |                  |
| 20. Facility Owner or Operator: Certificat                   |  |                             | vered by this manifest   |               |                 |                     |             | , ,              |
| Printed Name   |  | Signature                   | \  |               |                 | Month               | Day /       | Year             |
| 1/3  |  | 1117                        |  |               |                 |                     | 11          |                  |
| White-TREATMENT, STORAGE, DISPOSAL                           | FACILITY COPY  | Blue- GENERATOR #           | 2 COPY   | Ye            | llow- GENERAT   | OR #1 COP           | Ϋ́          | 7                |
| Pink- FACILITY USE ONLY                                      |  | Gold- TRANSPORTER           |  |               |                 |                     |             |                  |



Original Ticket# 1250177

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LMF 1 RENTAL Vehicle# 1 Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677714

Destination

Profile Generator

Comments

Product

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/01/2018 15:14:50 Out 05/01/2018 15:14:50

Scale Inbound 1

Operator rb rb

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

MARKENIENT Rate Tax LD% LIOM

COAL ASH & COAL CO 100 16.83 Tons

63140 15 Gross 29480 1b Tare 33660 lb Net 16.83 Tons

Origin Amount

PORTW

Total Tax Tobat ficket



#### WAY NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |                               |   | S 1 D N         |                        | 2. Dago 1 of                  |                                |   |  |  |
|--|-------------------------------|---|-----------------|------------------------|-------------------------------|--------------------------------|---|--|--|
| NON-HAZARDOUS MANIFEST 1. G  | Generator's US EPA I<br>N / A |   | ifest Doc No.   |                        | 2. Page 1 of                  |                                | 2:19  |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEOF                          | ator's Site Address (If diff<br>RGIA POWER PLANT<br>CROSSGATE RD. |                 | ):                     | A. Manifest                   | ΛNA                            | 6677714<br>enerator's ID                                  |  |  |
| 241 RALPH MCGILL BLVD NE, BIN#<br>ATLANTA, GA 30308-3374   | PORT                          | r WENTWORTH, GA   | 31407           |                        |                               | b. State G                     | encrator 3 ib   |  |  |
| 4. Generator's Phone 404-506-1  5. Transporter 1 Company Name  | 365                           | 6. US EPA ID  | Number          |                        | C. State Tra                  | ansporter's ID                 |   |  |  |
| 7. Transporter 2 Company Name  | ading                         | 8. US EPA ID  | Number          |                        |                               | rter's Phone                   |   |  |  |
|  |                               | 10. US EPA II   | ) Number        |                        |                               | ansporter's ID<br>rter's Phone |   |  |  |
| 9. Designated Facility Name and Site Add<br>SUPERIOR LANDFILL  | ress                          | 10. 03 11 A 11  | , rumber        |                        | G. State Fa                   | acility ID                     | 912-927-6113  |  |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |                               |   |                 |                        | TI. State                     |                                |   |  |  |
| 11. Description of Waste Materials   |                               | <u> </u>  | 12. Contain     | ners<br>Type           | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.           | I. Misc. Comments   |  |  |
| a. COAL ASH& COAL CONTAMINA  |                               | Lh  | NF/I            | M                      | 18                            |                                |   |  |  |
| WM Profile #   | 375200GAKRA                   |   |                 |                        |                               |                                | HIGHSU-VILLIONSUE AND |  |  |
|  | Profile #                     |   |                 |                        |                               |                                |   |  |  |
| C.   | TOTILE W                      |   |                 |                        |                               |                                |   |  |  |
| WMI  | Profile #                     |   |                 |                        |                               |                                |   |  |  |
| d.   |                               |   |                 |                        |                               |                                | See The Section   |  |  |
| WM   | Profile #                     |   |                 |                        |                               |                                |   |  |  |
| J. Additional Descriptions for Materials   | Listed Above                  |   | K. Disposal     | Location               |                               |                                |   |  |  |
|  | €                             |   | Cell Grid       | 320                    | 1290                          | 28 H                           | Level S   |  |  |
| 15. Special Handling Instructions and Ad   | ditional Information          |   | L               |                        |                               |                                |   |  |  |
|  | 1111111111111                 | EMERGENCY CC  | NITACT / PHON   | NE NO .                |                               |                                |   |  |  |
| Purchase Order # GPC10760293   | Tiches.                       |   |                 |                        |                               |                                | To Market   |  |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described accurately described, classified and pack  | d materials are not h         | per condition for transpe   | i tation accord | rt 261 or<br>ling to a | any applicat<br>oplicable reg | ole state law, l<br>ulations.  |   |  |  |
| Printed Name   |                               | Signature on ben  | alf of"         | /                      |                               | TELEVI                         | Month Day Yo  |  |  |
| 17. Transporter 1 Acknowledgement of Printed Name  | Receipt of Material           | s<br>Signature  | het             |                        |                               |                                | Month Day Y   |  |  |
| 18. Transporter 2 Acknowledgement of<br>Printed Name   | Receipt of Material           | Signature   |                 |                        |                               |                                | Month Day Y   |  |  |
| 19. Certificate of Final Treatment/Disport of the above listed to applicable laws, regulations, permits ar 20. Facility Owner or Operator: Certification of the above the applicable laws, regulations, permits ar 20. | reatment facility, tha        | ites listed above.  |                 |                        |                               | was managed                    |   |  |  |
| Printed Name   |                               | Signature   | )               |                        |                               |                                |   |  |  |
| White- TREATMENT, STORAGE, DISPOS<br>Pink- FACILITY USE ON   |                               | Blue- GENERATO<br>Gold- TRANSPORT                                 |                 |                        |                               | Yellow- GENE                   | RATOR #1 COPY   |  |  |



Original Ticket# 1250174

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

State Waste Code

Manifest 6677715

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/01/2018 15:10:23 Out 05/01/2018 15:10:23

Scale Inbound 1

Operator rb

Container

Driver

Check#

Gross Tare Net

59120 lb 27500 lb 31620 lb 15.81

Tons

Volume

Comments

WASTE WANAGEMENT LIOM

LD%

Qty

Rate

Vehicle# 5306

Billing B WWWWW3/ Gen EPA ID NR

Tax

Amount

Origin

Product

COAL ASH & COAL CO 100

15.81 Tons

PORTW

Total Tax Tobal Ticket



# W NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | N   | N / A  |   |  | + Number                     | O OF   |
|--|---|--|---|--|------------------------------|--|
| Generator's Mailing Address:   |   | Generator's Site Add   | dress (If different than mailing):  | A. Manifes                               | MNA                          | 6677715  |
| EORGIA POWER<br>41 RALPH MCGILL BLVD NE  | BINI#10221  | 155 CROSSGATE  |   |  |                              | enerator's ID  |
| TLANTA, GA 30308-3374  | , 5114#10221  | PORT WENTWO  |   | , A.P.                                   |                              |  |
|  | -506-1365   | , 01,1   |   |  |                              | 14878W-2384W-X   |
| Aransporter 1 Company Name   | 300-1303  | 6.   | US EPA ID Number  |  |                              |  |
| 5/1/   | 1.  |  |   |  | ransporter's ID              |  |
| 0921916  | iradil)   | 9  | US EPA ID Number  | D. Transpo                               | orter's Phone                |  |
| . Transporter 2 Company Name   |   | 8.   | 03 LFA ID Number  | E. State Ti                              | ransporter's IC              | )  |
|  |   |  |   | F. Transpo                               | orter's Phone                |  |
| . Designated Facility Name and Si  | ite Address   | 10.  | US EPA ID Number  | C State E                                | acility ID                   |  |
| SUPERIOR LANDFILL  |   |  |   | G. State F                               |                              | 912-927-6113   |
| 3001 LITTLE NECK ROAD  |   |  |   | H. State F                               | acility Phone                | 312-327-0113   |
| Savannah, GA 31419   |   |  |   |  |                              |  |
|  |   |  | 12. Containers  |  | 14. Unit<br>Wt./Vol.         | I. Misc. Comments  |
| 11. Description of Waste Material  |   |  | No. Ty  | pe Quantity                              | vvt./ vot.                   | I WINTER TO THE  |
| a. COAL ASH& COAL CONTA  | MINATED WAS   | IE   | COND  | TIX                                      |                              |  |
|  | file # 375200GA   | VDA.   | 2201  |  |                              |  |
|  | nle# 3/3200GF   | AKNA   |   |  |                              |  |
| 0.   |   |  |   |  |                              |  |
|  | WM Profile #  |  |   |  |                              |  |
| С.   | WINI FIGURE #   |  |   |  |                              |  |
|  |   |  |   |  | us his species summitte      |  |
|  | WM Profile #  |  |   |  |                              |  |
| d.   |   | -  |   |  |                              |  |
|  | 1   |  |   |  | and the second               |  |
|  | WM Profile #  |  | K. Disposal Loc   | cation                                   |                              |  |
| J. Additional Descriptions for M   | aterials Listed Abov  | re   |   |  |                              | 1///00 1/  |
| (A) - 2  |   |  | Cell A  | 71176                                    | 11.19/                       | Level 52 / W   |
|  |   |  | Grid / V  | 1012                                     | 1401                         |  |
| 15. Special Handling Instructions  | and Additional Info   | rmation  |   |  |                              |  |
|  |   |  |   |  |                              |  |
|  | TENERS ENERGY   | ENACI  | RGENCY CONTACT / PHONE  | NO.:                                     |                              |  |
|  | 0202  | LIVICI   | Country Continues (   | 30.00                                    |                              |  |
| Purchase Order # GPC1076   | 0293  | W 120 3  |   |  |                              | to the an fully and  |
| 16. GENERATOR'S CERTIFICATE:   |   |  | ites as defined by CFR Part 2   | 261 or any applica                       | ble state law,               | nave been rully and  |
| 16. GENERATOR'S CERTIFICATE:   |   | re not hazardous was   | 101 transportation according  | 261 or any applica<br>g to applicable re | ble state law,<br>gulations. |  |
| 16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-deaccurately described, classified a   |   | re not hazardous was   | tes as defined by CFR Part 2<br>for transportation according<br>e "On behalf of"    | 261 or any applica<br>g to applicable re | ble state law,<br>gulations. | Month Day Y  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  | escribed materials a<br>and packaged and ar   | re not hazardous was<br>e in proper condition<br>Signatu   | 101 transportation according  | 261 or any applica<br>g to applicable re | ble state law,<br>gulations. |  |
| 16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-daccurately described, classified a<br>Printed Name  | escribed materials a<br>and packaged and ar   | re not hazardous was<br>e in proper condition<br>Signatur<br>Materials                                       | re "On behalf of"   | 261 or any applica<br>g to applicable re | ble state law,<br>gulations. | Month Day Y  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  | escribed materials a<br>and packaged and ar   | re not hazardous was<br>e in proper condition<br>Signatu   | e "On behalf of"  | 261 or any applica<br>g to applicable re | ble state law,<br>gulations. | Month Day Y  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-duaccurately described, classified a Printed Name  17. Transporter 1 Acknowledges Printed Name  | escribed materials a<br>and packaged and ar<br>ment of Receipt of N   | re not hazardous was<br>e in proper condition<br>Signatur<br>Materials                                       | re "On behalf of"   | 261 or any applica<br>g to applicable re | ble state law,<br>gulations. | Month Day Y  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  18. Transporter 2 Acknowledge  | escribed materials a<br>and packaged and ar<br>ment of Receipt of N   | re not hazardous was e in proper condition Signatur Materials Signatur Matekials                             | re "On behalf of"   | 261 or any applica<br>g to applicable re | ble state law,<br>gulations. | Month Day Y Month Day Y  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-duaccurately described, classified a Printed Name  17. Transporter 1 Acknowledges Printed Name  | escribed materials a<br>and packaged and ar<br>ment of Receipt of N   | re not hazardous was<br>e in proper condition<br>Signatur<br>Materials                                       | re "On behalf of"   | 261 or any applica<br>g to applicable re | ble state law,<br>gulations. | Month Day Y Month Day Y  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledge Printed Name  18. Transporter 2 Acknowledge Printed Name  | escribed materials a<br>and packaged and ar<br>ment of Receipt of N<br>ment of Receipt of N   | re not hazardous was e in proper condition Signatur Materials Signatur Matekials Signatur                    | re "On behalf of"   | gre                                      |                              | Month Day Y  Month Day Y  Month Day Y  Month Day N   |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledge Printed Name  18. Transporter 2 Acknowledge Printed Name  | escribed materials a<br>and packaged and ar<br>ment of Receipt of N<br>ment of Receipt of N   | re not hazardous was e in proper condition Signatur Materials Signatur Matekials Signatur                    | re "On behalf of"   | gre                                      |                              | Month Day Y  Month Day Y  Month Day Y  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledges Printed Name  18. Transporter 2 Acknowledges Printed Name  19. Certificate of Final Treatmes I certify, on behalf of the above | escribed materials a and packaged and ar ment of Receipt of Ment of Ment of Receipt of Ment of Ment of Receipt of Ment of Ment of Ment of Ment of Ment of Receipt of Ment | re not hazardous was e in proper condition Signatur Materials Signatur Materials Signatur Signatur Materials | re "On behalf of" re of my knowledge, the above ve.                                 | e-described waste                        |                              | Month Day Y  Month Day Y  Month Day Y  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledges Printed Name  18. Transporter 2 Acknowledge Printed Name  19. Certificate of Final Treatme I certify, on behalf of the above   | escribed materials a and packaged and ar ment of Receipt of Ment of Ment of Receipt of Ment of Ment of Receipt of Ment of Ment of Ment of Ment of Ment of Receipt of Ment | re not hazardous was e in proper condition Signatur Materials Signatur Materials Signatur Signatur Materials | re "On behalf of" re of my knowledge, the above ve.                                 | e-described waste                        |                              | Month Day You Month Day Month Month Day Month  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledges Printed Name  18. Transporter 2 Acknowledge Printed Name  19. Certificate of Final Treatments of the above                     | escribed materials a and packaged and ar ment of Receipt of Ment of Ment of Receipt of Ment of Ment of Receipt of Ment of Ment of Ment of Ment of Ment of Receipt of Ment | re not hazardous was e in proper condition Signatur Materials Signatur Materials Signatur Signatur Materials | re "On behalf of"  re of my knowledge, the above ve. s materials covered by this re | e-described waste                        |                              | Month Day You Month Day Month Mo |

Original Ticket# 1250173

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Vehicle# C26 Volume Ticket Date 05/01/2018 Container

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6677716

Destination

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/01/2018 15:08:11

Out 05/01/2018 15:08:11

Comments

Product

LD%

Oty

Scale

Inbound 1

HOU

Operator

Driver

Check#

Billing # 0001037

Gen EPA ID NR

Tax Rate

Amount

Gross

Tare

Net

Tons

60180 15

25980 lb

34200 1b

17.10

PORTW

1 COAL ASH & COAL CO 100 17.10 Tons

Total Tax Cotal Ticket



## WW. NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  1. Generator's US EPA  N / /   |   | ifest Doc No.                 |                          | 2. Page 1 o                                    | f                               | 2:30                      |
|--|---|-------------------------------|--------------------------|--|---------------------------------|---------------------------|
| GEORGIA POWER  241 RALPH MCGILL BLVD NE, BIN#10221  155  | erator's Site Address (If dif<br>DRGIA POWER PLANT<br>CROSSGATE RD.<br>RT WENTWORTH, GA | KRAFT                         | ig):                     | A. Manifes                                     | ΛNA                             | 6677716<br>Generator's ID |
| 5. Transporter 1 Company Name  | 6. US EPA ID  |                               |                          |  | ansporter's II<br>orter's Phone | 0                         |
| 7. Transporter 2 Company Name  | 8. US EPA ID  | Number  D Number              |                          | AMERICAN AND AND AND AND AND AND AND AND AND A | ansporter's II<br>rter's Phone  | 0                         |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10. US EPA I  | D Number                      |                          | G. State Fa                                    | acility ID<br>acility Phone     | 912-927-6113              |
| 11. Description of Waste Materials   |   | 12. Conta                     | ainers<br>Type           | 13. Total<br>Quantity                          | 14. Unit<br>Wt./Vol.            | I. Misc. Comments         |
| a. COAL ASH& COAL CONTAMINATED WASTE   | (   | 1-26                          | DI                       | 18   |                                 |                           |
| WM Profile # 375200GAKRA b.  |   |                               |                          |  |                                 |                           |
| WM Profile #   |   |                               |                          | Constitution (Constitution)                    |                                 |                           |
| c.<br>WM Profile #   |   |                               |                          |  |                                 |                           |
| d.   |   |                               |                          |  |                                 |                           |
| WM Profile #   |   |                               |                          |  |                                 |                           |
| J. Additional Descriptions for Materials Listed Above  |   | Cell Grid                     | 320                      | 1291   | 166                             | Levels 2 (                |
| 15. Special Handling Instructions and Additional Information   | on  |                               |                          |  |                                 |                           |
| Purchase Order # GPC10760293   | EMERGENCY CO  | ONTACT / PHO                  | ONE NO.:                 |  |                                 |                           |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not accurately described, classified and packaged and are in process.  | t hazardous wastes as def   | ned by CFR P<br>ortation acco | art 261 or<br>rding to a | any applical                                   | ole state law,<br>gulations.    | 100                       |
| Printed Name B Filipouch   | Signature on ber  | alf of"                       |                          |  | *                               | Month Day Yes             |
| 17. Transporter 1 Acknowledgement of Receipt of Material Printed Name  | Signature   | Colf                          |                          |  |                                 | Month, Day Ye             |
| 18. Transporter 2 Acknowledgement of Receipt of Materia  | Signature   |                               |                          |  |                                 | Month Day Ye              |
| 19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility, the applicable laws, regulations, permits and licenses on the content of the con | dates listed above.   |                               |                          |  | was manage                      | ed in compliance with all |
| 20. Facility Owner or Operator: Certification of receipt of  | f non-hazardous material  | covered by t                  | his manife               | est.   | -                               | Month Day Ye              |
| Primer indirect  |   |                               |                          |  |                                 | 1 1 1 1                   |

Pink- FACILITY USE ONLY



S-----

Original Ticket# 1250185

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677717

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/01/2018 15:24:02

Out 05/01/2018 15:24:02

Scale Inbound 1

Operator rb rb

Vehicle# L07

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net Tons

51460 lb 25240 1b 26220 15 13.11

Comments

Qty LD%

MOU

RANAGEMENT Tax Rate

Amount

Origin

Product

COAL ASH & COAL CO 100

13.11 Tons

PORTW

Total Tax John Ticket



#### WWW. NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  1. Generator's  | US EPA ID No. N / A  | Manif                         | est Doc No   | ).          | 2. Page 1 o   |   | 2:3                    | 35   |          |
|---|--|-------------------------------|--------------|-------------|---|---|------------------------|--|----------|
| Generator's Mailing Address: EORGIA POWER 41 RALPH MCGILL BLVD NE, BIN#10221 TLANTA, GA 30308-3374  | Generator's Site Ad<br>GEORGIA POW<br>155 CROSSGAT<br>PORT WENTWO  | ER PLANT I<br>E RD.           | KRAFT        | ing):       | A. Manifes  | INA   | 66777<br>enerator's IC | T  |          |
| Generator's Phone 404-506-1365  Transporter 1 Company Name  Transporter 2 Company Name  | 6.   | US EPA ID N                   |              | 317         | D. Transpo  | ansporter's ID<br>orter's Phone<br>ansporter's ID |                        |  |          |
| D. Designated Facility Name and Site Address SUPERIOR LANDFILL  | 10.  | US EPA ID                     | Number       | -14-4       | F. Transporter's Phone  G. State Facility ID  H. State Facility Phone 912-927 |   |                        |  |          |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |  |                               | 12. Cor      | tainers     | H. State Fa   | 14. Unit  |                        | c. Comment   |          |
| 11. Description of Waste Materials  |  |                               | No.          | Туре        | Quantity  | Wt./Vol.  | 1. 10113               | c. comment   |          |
| 3. COAL ASH& COAL CONTAMINATED WA   |  | 7                             | 207          | 07          | 18  |   |                        |  |          |
| WM Profile # 3752000  | IAKKA  | - 0                           |              |             |   |   |                        |  |          |
|   |  |                               |              |             |   |   |                        |  |          |
| WM Profile #  |  |                               |              |             |   |   |                        |  |          |
| C.  |  |                               |              |             |   |   |                        | terrory.   |          |
| WM Profile #  |  |                               |              |             |   |   | PROPERTY.              |  |          |
| d.  |  |                               |              |             |   |   |                        | molecus dis  |          |
| WM Profile #  | NA CONTRACTOR OF THE CONTRACTO |                               | K. Dispos    | sal Locatio | in  |   |                        | The state of the s |          |
| J. Additional Descriptions for Materials Listed Abo   | JVC  |                               | Cell<br>Grid |             | N370  | 174   | Level                  | 61   | <b>A</b> |
| 15. Special Handling Instructions and Additional Inf  | formation  |                               |              |             | ~811  | 6   |                        |  |          |
| Purchase Order # GPC10760293  | EME  | ERGENCY CO                    | NTACT / PH   | IONE NO.:   |   |   |                        |  |          |
| 16. GENERATOR'S CERTIFICATE:  | are not hazardous wa   | stes as defin                 | ed by CFR    | Part 261 o  | r any applical  | ole state law, h                                  | nave been fu           | lly and  |          |
| accurately described, classified and packaged and a   | are in proper condition  | n for transpo<br>ure "On beha | tation acc   | orumg to    | applicable reg  | alations.   | Month                  | Day  | ν,       |
| Printed Name S Filippy (C)  | B  |                               |              | /           | 0   |   | 15                     |  | 1/       |
| 17. Transporter 1 Acknowledgement of Receipt of   |  |                               | 1            |             | //  |   | Month                  | Day  | Y        |
| Printed Name  | Signati  | ure /                         | 1.6          | e           | A   |   | 5                      | 11   | 1        |
| 18. Transporter 2 Acknowledgement of Receipt of<br>Printed Name   | Signat   | ure                           |              |             |   |   | Month                  | Day  |          |
| 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment for applicable laws, regulations, permits and licenses | on the dates listed abo  | ove.                          |              |             |   | was managed                                       | l in compliar          | nce with a   | all      |
| 20. Facility Owner or Operator: Certification of re   | ceipt of non-hazardo   | us materials o                | covered by   | this mani   | fest.   |   | Month                  | Day  |          |
|   | 1  | turo                          | 1            | 10          |   |   | World                  | 1  | 1        |
| Printed Name  | Signa  | cure                          | C            | 1           |   |   |                        | /  | /        |

Pink-FACILITY USE ONLY



Original Ticket# 1250189

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Vehicle# 5307 Volume Ticket Date 05/01/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677718

Destination

PO N

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/01/2018 15:32:34

Out 05/01/2018 15:32:34

Scale Inbound 1

Operator rb rb

Rate

Tax

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

Gross Tare Net Tons

53320 1b 24080 lb 2924Ø 1b 14.62

Comments

Product

COAL ASH & COAL CO 100 14.62 Tons

Origin Amount

PORTW

UOM

Total Tax Intal Thekert



#### WWW. NON-HAZARDOUS MANIFEST

| ASTE MANAGEMENT  | 1011   |                                 |  | · · · · · · · · · · · · · · · · · · · |             | 2 Page 1 o                |  |  | ~                |                  |  |
|--|--|---------------------------------|--|---------------------------------------|-------------|---------------------------|--|--|------------------|------------------|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's   | N/A                             |  | ifest Doc N                           |             | 2. Page 1 o               |  | 2,4  | 50               |                  |  |
| Generator's Mailing Address:   |  | GEOR                            | tor's Site Address (If diff<br>GIA POWER PLANT   |                                       | iling):     | A. Manifes                | ΛNA  | 667771   | L8               |                  |  |
| 41 RALPH MCGILL BLVD NE, E<br>TLANTA, GA 30308-3374  | 3IN#10221  |                                 | ROSSGATE RD.<br>WENTWORTH, GA  | 31407                                 |             | A TO                      | B. State G   | ienerator's ID   |                  |                  |  |
|  | 06-1365  |                                 |  |                                       |             |                           |  |  |                  | (SIEVOXS)        |  |
| . Transporter 1 Company Name   | 1  |                                 | 6. US EPA ID   | Number                                |             | C. State Tr               | ansporter's IE   | )  |                  | 811111111        |  |
| 12 1 m   | adin   | 0                               |  |                                       |             | Charles and the second    | orter's Phone  |  |                  | Dell'            |  |
| . Transporter 2 Company Name   | Varia  |                                 | 8. US EPA ID   | Number                                | 8           | E. State Transporter's ID |  |  |                  |                  |  |
|  |  |                                 |  |                                       |             | F. Transporter's Phone    |  |  |                  |                  |  |
| ). Designated Facility Name and Site   | Address  |                                 | 10. US EPA II  | ) Number                              |             | 1; Hanspered Street       |  |  |                  |                  |  |
| SUPERIOR LANDFILL  | ,,,,,,,  |                                 |  |                                       |             | G. State F                | acility ID   |  | 1                | 75               |  |
| 3001 LITTLE NECK ROAD  |  |                                 |  |                                       |             | H. State F                | acility Phone  | 912-92   | 7-6113           | OMESTICAL STREET |  |
| Savannah, GA 31419   |  |                                 |  |                                       |             |                           |  |  |                  |                  |  |
|  |  |                                 |  | 12. Co                                | ntainers    | 13. Total                 | 14. Unit   | L Miss   | Comments         |                  |  |
| 11. Description of Waste Materials   |  |                                 |  | No.                                   | Туре        | Quantity                  | Wt,/Vol.   | r. IVIISC  | Johnnere         |                  |  |
| a. COAL ASH& COAL CONTAN   | INATED WAS   | STE                             |  | 27                                    | N+          | 15                        |  |  |                  |                  |  |
|  |  |                                 | 5  | RO /                                  | PI          | 10                        |  |  |                  |                  |  |
|  | # 375200G  | AKRA                            |  |                                       |             |                           |  |  |                  | HILLIAN.         |  |
| <b>5.</b>  |  | de la                           |  | L. Vest                               |             |                           |  |  |                  |                  |  |
|  | WM Profile #   | 4.                              |  |                                       |             |                           |  |  |                  | 41-11            |  |
|  | WIVI Profile #   |                                 |  |                                       |             |                           |  | THE PARTY OF THE P |                  |                  |  |
|  |  |                                 |  |                                       |             |                           |  | AND THE RESIDENCE OF THE PARTY  |                  | al and a second  |  |
| - A  | WM Profile #   |                                 |  | Lance State                           |             |                           |  |  |                  |                  |  |
| d.   |  |                                 |  |                                       |             |                           |  | 4 1  |                  |                  |  |
|  |  |                                 |  |                                       |             |                           |  |  |                  |                  |  |
| J. Additional Descriptions for Mate  | WM Profile #<br>erials Listed Abo                              | ove                             |  | K. Dispo                              | sal Locatio | n                         |  |  | 15               |                  |  |
| J. Additional Descriptions for Mac   |  | 1700                            |  | 0.11                                  | - 1         | RIN                       | 29   | Level  | 0                |                  |  |
|  |  |                                 |  | Cell                                  |             | VV                        | 0  | Level  |                  |                  |  |
| 15. Special Handling Instructions ar   | nd Additional Info   | ormation                        |  | 0,14                                  |             | 14/11                     | 256  |  |                  |                  |  |
| 15. Special Handling Histractions at   | ia Additional IIII   |                                 |  |                                       | 01          | 10,                       |  |  |                  |                  |  |
|  |  |                                 |  |                                       |             | 100                       |  |  |                  |                  |  |
| Purchase Order # GPC107602   | 293  |                                 | EMERGENCY CO   | NTACT / P                             | HONE NO.:   | 1                         |  |  |                  |                  |  |
| 16. GENERATOR'S CERTIFICATE:   | A MARIE  |                                 | A STATE OF   |                                       |             |                           | ele etato lavy   | have been full   | v and            |                  |  |
| The state of the s | cribed materials   | are not ha                      | zardous wastes as defi   | ned by CFR                            | Part 261 of | pplicable reg             | ulations.  | nave been fun  | y aria           |                  |  |
|  |  |                                 |  | ortation aci                          |             |                           |  | Month  | Day              |                  |  |
| I hereby certify that the above-desc<br>accurately described, classified and   | packaged and a   | re in prop                      | Signature "On beh  | or tation ac                          |             |                           |  |  |                  | 4                |  |
| I hereby certify that the above-desc<br>accurately described, classified and<br>Printed Name   | l packaged and a   |                                 | Signature "On beh  | or tation ac                          |             |                           |  | 5  | +                |                  |  |
| I hereby certify that the above-desc<br>accurately described, classified and<br>Printed Name   | l packaged and a   |                                 | Signature On ben   | or tation ac                          | , d         | 7                         |  | Month.   | Day              |                  |  |
| I hereby certify that the above-desc<br>accurately described, classified and<br>Printed Name   | l packaged and a   |                                 | Signature On ben   | or tation ac                          |             | 2                         |  | Month<br>K   | Day              | 1                |  |
| I hereby certify that the above-desc<br>accurately described, classified and<br>Printed Name  17. Transporter 1 Acknowledgeme  | ent of Receipt of  | Materials                       | Signature On bell  | or tation ac                          |             | 2                         | - Spane  | Month 5  | Day              | 1                |  |
| I hereby certify that the above-descracturately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  Printed Name  18. Transporter 2 Acknowledgement  | ent of Receipt of  | Materials                       | Signature On bell  | or tation ac                          |             | 2                         | The Control of the Co | Month Month  | Day              | 1                |  |
| I hereby certify that the above-desc<br>accurately described, classified and<br>Printed Name  17. Transporter 1 Acknowledgeme  | ent of Receipt of  | Materials                       | Signature On ben   | or tation ac                          | M           | 2                         |  | 5  | 1                | 1                |  |
| I hereby certify that the above-descraction accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  | ent of Receipt of ent of Receipt of                            | Materials<br>Materials          | Signature On ben   | alf of"                               | M           | 2                         |  | Month  | Day              | 1                |  |
| I hereby certify that the above-descracturately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/  | ent of Receipt of ent of Receipt of ent of Receipt of          | Materials  Materials            | Signature Signature Signature to the best of my know   | alf of"                               | M           | 2                         |  | Month  | Day              | 1                |  |
| I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/ I certify, on behalf of the above list   | ent of Receipt of ent of Receipt of  Oisposal ted treatment fa | Materials  Materials  Materials | Signature  Signature  Signature  to the best of my known to the best of my kno | vledge, the                           | above-desc  | cribed waste              |  | Month  | Day              | 1                |  |
| I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name   | ent of Receipt of ent of Receipt of  Oisposal ted treatment fa | Materials  Materials  Materials | Signature  | vledge, the                           | above-desc  | cribed waste              |  | Month d in compliance  | Day              | 1                |  |
| I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/ I certify, on behalf of the above list   | ent of Receipt of ent of Receipt of  Oisposal ted treatment fa | Materials  Materials  Materials | Signature  Signature  Signature  to the best of my known to the best of my kno | vledge, the                           | above-desc  | cribed waste              |  | Month  | Day<br>ce with a |                  |  |



Original Ticket# 1250190

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/01/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677719

Destination

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/01/2018 15:35:25 Out 05/01/2018 15:35:25

Scale Inbound 1

Operator rb rb

61000 15 Gross 27040 lb Tare 33960 1b Net 16.98 Tons

Comments

WASTE MANAGEMENT Rate LOM LD% Qty

Vehicle# C25

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Product

Tax

Origin Amount

PORTW

COAL ASH & COAL CO 100

16.98 Tons

Total Tax robal fleket

Wirelest fry



#### WWW. NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |   |  |  |                   |                               |                            |  | THE RES    |       |
|--|---|--|--|-------------------|-------------------------------|----------------------------|--|------------|-------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                   |  | ifest Doc No.                                  |                   | 2. Page 1 o                   |                            | 3  | 01         |       |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                         |   | erator's Site Address (If diffe<br>DRGIA POWER PLANT |  |                   | A. Manifes                    | t Number<br><b>//NA</b>    | 66777  | 19         |       |
| 241 RALPH MCGILL BLVD NE,  |   | CROSSGATE RD.  |  |                   |                               | B. State C                 | ienerator's ID   |            |       |
| ATLANTA, GA 30308-3374   |   | RT WENTWORTH, GA                                     | 31407  | 100               |                               |                            |  |            |       |
| 4. Generator's Phone 404-5  5. Transporter 1 Company Name                | 06-1365                                 | 6. US EPA ID   | Number   |                   |                               |                            |  |            |       |
| 5. Italisporter I company Nume   | 1.                                      |  |  |                   | -145F 1140                    | ansporter's II             | )  |            |       |
| 7. Transporter 2 Company Name  | radiny                                  | 8. US EPA ID   | Number   |                   | D. Transpo                    | rter's Phone               |  |            |       |
| 7. Transporter 2 Company Name  |   |  |  |                   |                               | ansporter's II             |  |            |       |
| 9. Designated Facility Name and Sit                                      | e Δddress                               | 10. US EPA II  | ) Number                                       |                   | F. Transpo                    | rter's Phone               |  |            |       |
| SUPERIOR LANDFILL  | a Address                               |  |  |                   | G. State Fa                   | acility ID                 |  |            |       |
| 3001 LITTLE NECK ROAD  |   |  |  |                   | H. State Fa                   | acility Phone              | 912-92   | 7-6113     |       |
| Savannah, GA 31419   |   |  |  |                   |                               |                            |  |            |       |
| 11. Description of Waste Materials                                       |   |  | 12. Containe                                   | ers<br>Type       | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.       | I. Mise  | c. Comment | S     |
| a. COAL ASH& COAL CONTAIN  | MINATED WASTE                           | ^  |  |                   | 157                           |                            |  |            | 17    |
|  |   | C'.  | 251  | 27                | 10                            |                            |  |            |       |
|  | e# 375200GAKRA                          |  |  |                   |                               | 3, 360                     | A CONTRACTOR OF THE PARTY OF TH |            |       |
| b.   |   |  |  |                   |                               |                            |  |            | 7     |
|  | WM Profile #                            |  |  |                   |                               |                            |  |            |       |
| C.   |   |  |  |                   |                               | 1                          |  |            |       |
|  | WM Profile #                            |  |  |                   |                               |                            |  |            |       |
| d.   | WINTER IN                               |  |  | :                 |                               |                            |  |            |       |
|  |   |  |  |                   |                               |                            | Programme  |            |       |
| J. Additional Descriptions for Mat                                       | WM Profile #                            |  | K. Disposal L                                  | ocation           |                               |                            |  |            |       |
| J. Additional Descriptions for Max                                       |   |  | C-II   |                   | 1370                          | 179                        | Level (  | 267        |       |
|  |   |  | Cell<br>Grid                                   | 1                 | 000                           | 137                        | 24.4   | 1          | N. C. |
| 15. Special Handling Instructions a                                      | nd Additional Informatio                | on   |  | 1                 | e811                          | 1616                       |  |            |       |
|  |   |  |  |                   |                               |                            |  |            | 2     |
| Purchase Order # GPC10760  | 293                                     | EMERGENCY CO   | NTACT / PHONI                                  | E NO.:            |                               |                            |  |            |       |
| 16 CENTRATOR'S CERTIFICATE:  |   |  | ALCO NE SE |                   | +                             |                            |  |            |       |
| I hereby certify that the above-des accurately described, classified and | cribed materials are not                | hazardous wastes as defin                            | ed by CFR Part                                 | t 261 or          | any applicab<br>policable reg | le state law,<br>ulations. | have been ful  | ly and     |       |
| accurately described, classified and Printed Name                        | i packaged and are in pi                | Signature "On beha                                   | If of"   |                   |                               |                            | Month  | Day        | Year  |
| BTILIDOVICE  | New World David Control                 | BFC  | -  |                   | 1 E                           | - 4                        |  | -1-        | 1/4   |
| 17. Transporter 1 Acknowledgeme  | ent of Receipt of Materia               |  |  |                   |                               |                            | Month  | Day        | Yea   |
| Printed Name   | arles                                   | V MM   | cho Fr   | 4                 | · -                           |                            | 15   | -          | 118   |
| 18. Transporter 2 Acknowledgeme  | ent of Receipt of Materia               |  |  | ,                 |                               |                            | Month  | Day        | Yea   |
| Printed Name   |   | Signature  |  |                   |                               |                            | 10.1   |            |       |
|  | /n:1                                    |  |  | en de la constant |                               |                            | 1  |            |       |
| 19. Certificate of Final Treatment,                                      | vuisposai<br>ted treatment facility. th | nat to the best of my know                           | ledge, the abov                                | ve-descr          | ibed waste                    | was manage                 | d in complian  | ce with a  | ll .  |
| applicable laws regulations, perm  | its and licenses on the d               | lates listed above.                                  |  |                   |                               |                            |  |            |       |
| 20. Facility Owner or Operator: C  | ertification of receipt of              |  | covered by this                                | manite            | St.                           |                            | Month  | Day        | Yea   |
| Printed Name   | MS                                      | Signature  | 4  | 1)                |                               |                            | 1  | //         | 140   |
| White- TREATMENT, STORAGE, D   | SPOSAL FACILITY COPY                    | Blue- GENERATOI                                      |  |                   |                               | Yellow- GENE               | RATOR #1 CO  | PΥ         |       |
| Pink- FACILITY US  |   | Gold- TRANSPORTI                                     | ER #1 COPY                                     |                   |                               |                            |  |            |       |

Original Ticket# 1250269

PORTW

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier CDASTALGRADING COASTALGRADING Vehicle# C26 Volume Ticket Date 05/02/2018 Container Payment Type Credit Account Driver Manual Ticket# Check# Hauling Ticket# Billing # 0001037 Route Gen EPA ID NR State Waste Code Manifest 6677720 Destination PO Profile 3752006AKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Profile 57460 15 Gross Operator Scale Time 25980 1b Tare lbejaran In 05/02/2018 07:57:32 Inbound 1 31480 lb Net lbejaran Out 05/02/2018 07:57:32 15.74 Tons Comments WASTE MANAGEMENT Amount Rate Tax Qty UOM LD% Product

Inm

1 COAL ASH & COAL CO 100 15.74 Tons

Total Tax Fotal Ficket



## WAY NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |                             |                                       |                        |                |  |                                |   |             |           |
|---|-----------------------------|---------------------------------------|------------------------|----------------|--|--------------------------------|---|-------------|-----------|
| NON-HAZARDOUS MANIFEST  1. Genera   | tor's US EPA ID No<br>N / A | , Ma                                  | nifest Doc No.         |                | 2. Page 1 o  |                                | -   | 7:16        |           |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | GEORGIA                     | s Site Address (If di<br>A POWER PLAN |                        | ng):           | A. Manifes   | ΛNA                            | 66777   |             |           |
| 241 RALPH MCGILL BLVD NE, BIN#1022<br>ATLANTA, GA 30308-3374  |                             | SSGATE RD.<br>ENTWORTH, GA            | A 31407                |                |  | B. State 0                     | ienerator's ID  |             |           |
| 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name  | 6.                          | US EPA II                             | Number                 |                | C. State Tr  | ansporter's II                 |   |             |           |
| 7. Transporter 2 Company Name   | 19 8.                       | US EPA II                             | ) Number               |                | D. Transporter's Phone   |                                |   |             |           |
|   | 10.                         | LIC EDA                               | ID Number              |                | The state of the s | ansporter's II<br>rter's Phone |   |             |           |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL  | 10.                         | USEPA                                 | ID Number              |                | G. State Fa  |                                | 912.92  | 7-6113      |           |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |                             |                                       |                        |                | H. State Fa  | acility Phone                  | 312-32  | 7-0113      |           |
| 11. Description of Waste Materials  |                             |                                       | 12. Conta              | ainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.           | I. Miso   | c. Comments |           |
| a. COAL ASH& COAL CONTAMINATED \  |                             | (                                     | 26                     | DT             | 18   |                                | A DESCRIPTION OF THE PROPERTY |             |           |
| WM Profile # 37520<br>b.  | JUGAKKA                     |                                       |                        |                |  |                                |   |             |           |
| WM Profile  | #                           |                                       |                        |                |  |                                |   |             |           |
| C.  | #                           |                                       |                        |                |  |                                |   |             |           |
| d.  |                             |                                       |                        |                |  | - SK                           |   | 3):         |           |
| WM Profile  |                             |                                       |                        |                |  |                                |   |             |           |
| J. Additional Descriptions for Materials Listed   | Above                       |                                       | K. Disposa  Cell  Grid | Location       | 0/29   | 418                            | Level 3   | 26          | *<br>6 (1 |
| 15. Special Handling Instructions and Additiona   | l Information               |                                       | ·                      |                | (  |                                |   | À           |           |
| Purchase Order # GPC10760293  |                             | EMERGENCY CO                          | ONTACT / PHO           | NE NO.:        |  |                                |   |             |           |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described mater accurately described, classified and packaged a                   | ials are not hazard         | dous wastes as def                    | ined by CFR Pa         | art 261 or     | any applicab   | le state law,<br>ulations.     | have been ful   | ly and      |           |
| Printed Name  R Filhpould   | ilu are in proper es        | Signature "On beh                     | alf of"                |                |  |                                | Month   | Day /       | Year      |
| T 17. Transporter 1 Acknowledgement of Receip   |                             | Signature                             | 01                     |                |  |                                | Month   | Day         | Year      |
| N J AM 05 Cd X  | Ŋ                           | Hus                                   | 999                    |                |  |                                | 5   | 2 1         | 10        |
| Printed Name  |                             | Signature                             |                        |                |  | ,                              | Month   | Day         | Year      |
| 19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatmer applicable laws, regulations, permits and licens | nt facility, that to the    | he best of my know                    | wledge, the ab         | ove-desc       | ribed waste  | was managed                    | d in compliand  | ce with all |           |
| applicable laws, regulations, permits and license 20. Facility Owner or Operator: Gertification of  | of receipt of non-ha        | azardous materials                    | covered by th          | nis manife     | st.  |                                | Month   | Day         | Year      |
| Printed Name  |                             | Signature                             | )                      |                |  | Collow CENT                    | RATOR #1 CO   | )           | 1         |
| White- TREATMENT, STORAGE, DISPOSAL FACE  | LITY COPY                   | Blue- GENERATO                        | JR #2 COPY             |                | 7  | GIOM- GEIVE                    | MATON #1 CO   | -           |           |

Pink- FACILITY USE ONLY

Original Ticket# 1250275

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/02/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677721 Destination

PO

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/02/2018 08:07:55

Out 05/02/2018 08:07:55

Scale Inbound 1

Operator 1be jaran Ibejaran

Vehicle# C25

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

Gross Tare Net Tons

55820 1b 27040 1b 28780 15 14.39

Comments

UOM Rate LD% Oty Product

Amount Tax

Origin

COAL ASH & COAL CD 100 14.39 Tons

SAVANNAH

Total Tax Tabat fleskert

Michty



#### **NON-HAZARDOUS MANIFEST**

|  |  | (0-   |  |  |   |   |             |
|--|--|---|--|--|---|---|-------------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA  |   | ifest Doc No.  | 2. Page 1 c  | of  | 7:  | 24          |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEC  | erator's <mark>Site Addres</mark> s (If diff<br>DRGIA POWER PLANT<br>CROSSGATE RD.  |  | A. Manifes   | MNA   | 6677721   |             |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5  |  | RT WENTWORTH, GA  | 31407  |  | B. State G  | enerator's ID   |             |
| 5. Transporter 1 Company Name  | 00 1000  | 6. US EPA ID  | Number   | in the state of the little   |   |   |             |
| 120011   | 12-11-0  |   |  | The state of the s | ansporter's ID  | ) //  |             |
| Castale  | 11 ad 11 a   | 8. US EPA ID  | Number   | D. Transpo   | orter's Phone   |   |             |
| 7. Transporter 2 Company Name  |  | 8. US EPA ID  | Number   |  | ansporter's ID<br>orter's Phone                             | )   |             |
| 9. Designated Facility Name and Site   | e Address  | 10. US EPA II   | ) Number   |  |   |   |             |
| SUPERIOR LANDFILL  |  |   |  | G. State F   | acility ID  |   | _1          |
| 3001 LITTLE NECK ROAD  |  |   |  | H. State F   | acility Phone   | 912-927-0   | 5113        |
| Savannah, GA 31419   |  |   |  |  |   |   |             |
|  |  |   | 12. Containers   | 13. Total  | 14. Unit  |   |             |
| 11. Description of Waste Materials   |  |   | No. Type   | Quantity   | Wt./Vol.  | I. Misc. Co   | mments      |
| a. COAL ASH& COAL CONTAN   | INATED WASTE   |   | ~ -  | 109  |   |   |             |
|  |  | /   | J2 D1  | 118  | CANCELLY MANAGEMENT AND | EDITION OF THE PROPERTY OF THE PARTY OF THE |             |
| WM Profile   | # 375200GAKRA  | C-  |  |  |   |   |             |
| b.   | THE STREET   |   |  | *  |   |   |             |
|  |  |   |  |  |   |   |             |
| The state of the s | WM Profile #   |   |  |  |   |   |             |
| C.   |  |   |  |  |   |   |             |
|  |  |   |  |  |   |   |             |
|  | WM Profile #   |   |  |  |   |   |             |
| d.   |  |   |  |  | 4   |   |             |
|  |  |   |  |  |   |   |             |
|  | WM Profile #   |   | K. Disposal Locatio  | n  |   |   |             |
| J. Additional Descriptions for Mat   | eriais Listed Above  |   | A. Disposal Education  | 1011   | 177   |   | 01          |
|  |  |   | Cell   | VIV  | 10  | Level   | 1           |
| 4  |  |   |  | 63   | 1166  | -   |             |
|  |  |   | Grid   | X  | 10)   |   |             |
| 15. Special Handling Instructions ar   | nd Additional Informatio   | 'n  | Grid   | N  | 10)   |   | *           |
| 15. Special Handling Instructions ar  Purchase Order # GPC107602   |  |   | NTACT / PHONE NO.:   |  | 10)   | 1   | *           |
| Purchase Order # GPC107602   | 293  | EMERGENCY CO  | NTACT / PHONE NO.:   |  | 10)   | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   |             |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:  I hareby certify that the above described the control of the control | 293  | EMERGENCY CO  | NTACT / PHONE NO.:   | r any applicab   | ole state law, h  | nave been fully a   | nd          |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and  | 293  | EMERGENCY COI<br>hazardous wastes as defin<br>oper condition for transpo  | NTACT / PHONE NO.:<br>ned by CFR Part 261 o<br>rtation according to a      | r any applicab   | ole state law, h  |   | nd<br>Day Y |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name   | 293  | EMERGENCY CO  | NTACT / PHONE NO.:<br>ned by CFR Part 261 o<br>rtation according to a      | r any applicab   | ole state law, h  | 1   |             |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  | 293<br>cribed materials are not<br>packaged and are in pro   | EMERGENCY CO<br>hazardous wastes as defin<br>oper condition for transpo<br>Signature "On beha   | NTACT / PHONE NO.:<br>ned by CFR Part 261 o<br>rtation according to a      | r any applicab   | ole state law, h  | 1   |             |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name   | 293<br>cribed materials are not<br>packaged and are in pro   | EMERGENCY CO<br>hazardous wastes as defin<br>oper condition for transpo<br>Signature "On beha   | NTACT / PHONE NO.:<br>ned by CFR Part 261 o<br>rtation according to a      | r any applicab   | ole state law, h  | Month 5   |             |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  M. Chacle For   | cribed materials are not packaged and are in pront of Receipt of Materia   | hazardous wastes as definoper condition for transpo Signature On beha   | NTACT / PHONE NO.:<br>ned by CFR Part 261 o<br>rtation according to a      | r any applicab   | ole state law, h  | Month 5   | Day Y       |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  | cribed materials are not packaged and are in pront of Receipt of Materia   | hazardous wastes as definoper condition for transpo Signature On beha   | NTACT / PHONE NO.:<br>ned by CFR Part 261 o<br>rtation according to a      | r any applicab   | ole state law, h  | Month Month   | Day Y       |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  M. Chacle For   | cribed materials are not packaged and are in pront of Receipt of Materia   | hazardous wastes as definoper condition for transpo Signature On beha   | NTACT / PHONE NO.:<br>ned by CFR Part 261 o<br>rtation according to a      | r any applicab   | ole state law, h  | Month Month   | Day Y       |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme   | cribed materials are not packaged and are in pront of Receipt of Materia   | hazardous wastes as definoper condition for transpo Signature On beha   | NTACT / PHONE NO.:<br>ned by CFR Part 261 o<br>rtation according to a      | r any applicab   | ole state law, h  | Month Month   | Day Y       |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  | cribed materials are not packaged and are in production of Receipt of Material and of Receipt of Material Disposal   | hazardous wastes as definoper condition for transpo Signature On beha Is Signature Signature Signature Signature  | NTACT / PHONE NO.:  eed by CFR Part 261 o rtation according to a lf of"    | r any applicab<br>applicable reg   | ulations.   | Month Month Month   | Day Y       |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgemee Printed Name  Printed Name  18. Transporter 2 Acknowledgemee Printed Name  19. Certificate of Final Treatment/ I certify, on behalf of the above list applicable laws, regulations, permi  | cribed materials are not packaged and are in production of Receipt of Material and of Receipt of Material Disposal and treatment facility, the ts and licenses on the determinant of the determinant of the determinant of the determinant facility, the determinant facility of the deter | EMERGENCY COI hazardous wastes as defin oper condition for transpo Signature On beha Is Signature Is Signature at to the best of my knowlates listed above. | NTACT / PHONE NO.:  seed by CFR Part 261 o retation according to a lif of" | r any applicab<br>applicable reg   | ulations.   | Month Month Month   | Day Y       |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/ Legrify, on behalf of the above list  | cribed materials are not packaged and are in production of Receipt of Material and of Receipt of Material Disposal and treatment facility, the ts and licenses on the determinant of the determinant of the determinant of the determinant facility, the determinant facility of the deter | EMERGENCY COI hazardous wastes as defin oper condition for transpo Signature On beha Is Signature Is Signature at to the best of my knowlates listed above. | NTACT / PHONE NO.:  seed by CFR Part 261 o retation according to a lif of" | r any applicab<br>applicable reg   | ulations.   | Month  Month  in compliance v   | Day Y       |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/ I certify, on behalf of the above list applicable laws, regulations, permi  | cribed materials are not packaged and are in production of Receipt of Material and of Receipt of Material Disposal and treatment facility, the ts and licenses on the determinant of the determinant of the determinant of the determinant facility, the determinant facility of the deter | EMERGENCY COI hazardous wastes as defin oper condition for transpo Signature On beha Is Signature Is Signature at to the best of my knowlates listed above. | NTACT / PHONE NO.:  seed by CFR Part 261 o retation according to a lif of" | r any applicab<br>applicable reg   | ulations.   | Month Month Month   | Day Y       |

Pink- FACILITY USE ONLY



Original Ticket# 1250286

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/02/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6677722

Time

Destination

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

05/02/2018 08:26:48 Out 05/02/2018 08:26:48

Scale Inbound 1

Operator Ibejaran 1bejaran

Vehicle# LØ7

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net Tons

51340 lb 25240 16 26100 lb 13.05

Comments

Product

COAL ASH & COAL CO 100

LDX Qty UDM Rate ENTETAX

Amount

Origin

13.05 Tons

PORTW

Total Tax fobal flicket



#### **NON-HAZARDOUS MANIFEST**

| WASTE MANAGEMENT  |  |   |                           |                 |                       |                                 |                        |             |            |
|---|--|---|---------------------------|-----------------|-----------------------|---------------------------------|------------------------|-------------|------------|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA I                                      |   | anifest Doc N             | 0,              | 2. Page 1 c           | of                              | 7                      | 2           | T          |
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5 | GEOF<br>BIN#10221 155 C                                      | ator's Site Address (If<br>RGIA POWER PLAI<br>CROSSGATE RD.<br>I WENTWORTH, G | NT KRAFT                  | iling):         | A. Manifes            | MNA                             | 66777<br>enerator's IC |             |            |
| 5. Transporter 1 Company Name   | md'00  | 6. US EPA   | ID Number                 | <u> </u>        |                       | ansporter's ID<br>orter's Phone |                        |             |            |
| 7. Transporter 2 Company Name   |  | 8. US EPA   | ID Number                 | 4               | The second second     | ansporter's ID<br>orter's Phone |                        |             |            |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                   | e Address  | 10. US EPA  | A ID Number               |                 | G. State F.           | acility ID<br>acility Phone     | 912-92                 | 7-6113      |            |
| 11. Description of Waste Materials  |  |   | 12. Cor                   | tainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.            | I. Mis                 | c. Comments |            |
| a. COAL ASH& COAL CONTAN  | MINATED WASTE  |   | 207                       | PT              | 18                    |                                 |                        |             |            |
|   | e# 375200GAKRA   | 0   |                           | 1.00            | 1 Section             |                                 |                        |             |            |
| b.  | WM Profile #   |   |                           |                 |                       |                                 |                        |             |            |
| c.  | WM Profile #   |   |                           |                 |                       |                                 |                        |             |            |
| d.  | WM Profile #   |   |                           |                 |                       |                                 |                        |             |            |
| J. Additional Descriptions for Mat  |  |   | K. Dispos<br>Cell<br>Grid | sal Location    | 1961                  | 11                              | Level                  | 61          |            |
| 15. Special Handling Instructions a   | nd Additional Information                                    |   | T GITE                    | U               | N HU                  | ,,                              |                        |             |            |
| Purchase Order # GPC10760   | 793  | EMERGENCY (   | CONTACT / PH              | ONE NO.:        |                       |                                 |                        |             | ×          |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and                     | cribed materials are not ha                                  | azardous wastes as de   | fined by CFR I            | Part 261 or     | any applicab          | le state law, h                 | ave been ful           | ly and      |            |
| Printed Name  |  | Signature "On be  | half of"                  |                 |                       |                                 | Month 5                | Day         | Year<br>18 |
| 17. Transporter 1 Acknowledgement Printed Name 18. Transporter 2 Acknowledgement 18. Transporter 2 Acknowledgement 18.    | 2KS  | Signature   | 1. Le                     | olc             | S                     |                                 | Month 5                | Day         | Year       |
| Printed Name  |  | Signature   |                           |                 |                       |                                 | Month                  | Day         | Year       |
| 19. Certificate of Final Treatment, I certify, on behalf of the above lis applicable laws, regulations, perm              | ted treatment facility, that<br>its and licenses on the date | es listed above.  |                           |                 |                       | was managed                     | in complian            | ce with all |            |
| 20. Facility Owner or Operator: C   | ertification of receipt of no                                | on-hazardous materia<br>Signature   | is covered by             | )               |                       |                                 | Month                  | Day         | Year       |
| White- TREATMENT, STORAGE, DI   |  | Blue- GENERAT<br>Gold- TRANSPOR   |                           |                 |                       | ellow- GENER                    | ATOR #1 CO             | PΥ          |            |

Pink- FACILITY USE ONLY



Original Ticket# 1250284

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 05/02/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677723

Destination

PO

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/02/2018 08:23:27

Out 05/02/2018 08:23:27

Scale Inbound 1

Operator lbejaran Ibejaran

WASTE MANAGEMENT

Vehicle# 5306

0001037

Tax

Container

Gen EPA ID NR

Rate

Driver

Check# Billing #

> Gross Tare Net Tons

> > Amount

54560 1b 27500 lb 27060 15 13.53

Comments

Product

Qty

Origin

1 COAL ASH & COAL CO 100

13.53 Tons

HOM

PORTW

LD%

Total Tax fotal fleket



## WWW. NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   | (/jejs  |  |                         |                    |                                 |                        |
|--|---|--|-------------------------|--------------------|---------------------------------|------------------------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EI                                |  | ifest Doc No.           | 2. Page 1 o        | t                               | 7.32                   |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                             | GE  | nerator's Site Address (If diff<br>ORGIA POWER PLANT |                         | A. Manifes         | t Number<br><b>⁄/NA</b>         | 6677723                |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                          | PC  | 5 CROSSGATE RD.<br>ORT WENTWORTH, GA                 | 31407                   |                    | B. State G                      | Generator's ID         |
| 4. Generator's Phone 404-5  5. Transporter 1 Company Name                    | 06-1365   | 6. US EPA ID   | Number                  |                    |                                 |                        |
| (mstal (   | imalino   | À l  |                         |                    | ansporter's IE<br>orter's Phone | )                      |
| 7. Transporter 2 Company Name  | 1.000   | 8. US EPA ID   | Number                  |                    | ansporter's II<br>rter's Phone  | )                      |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL                       | e Address   | 10. US EPA II  | ) Number                | G. State Fa        |                                 | 212 227 5112           |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419                                  |   |  |                         | H. State Fa        | acility Phone                   | 912-927-6113           |
| 11. Description of Waste Materials   |   |  | 12. Containers No. Type | 13. Total Quantity | 14. Unit<br>Wt./Vol.            | I. Misc. Comments      |
| a. COAL ASH& COAL CONTAN   | IINATED WASTE                                       |  | MOME                    | 7 18               |                                 |                        |
| WM Profile   | # 375200GAKR/                                       | 4  | 7047                    |                    |                                 |                        |
| <b>b.</b>  |   |  |                         |                    |                                 |                        |
|  | WM Profile #  |  |                         |                    |                                 |                        |
| c.   |   |  |                         |                    |                                 |                        |
| d.   | WM Profile #  |  |                         |                    |                                 |                        |
| )+   | WM Profile #  |  |                         |                    |                                 |                        |
| J. Additional Descriptions for Mate  |   |  | K. Disposal Loca        | tion               | Λ                               | 16                     |
|  |   |  | Cell<br>Grid            | NSZOI              | 15                              | Level                  |
| 15. Special Handling Instructions ar   | d Additional Informat                               | ion  | Gild                    | W11                | 431                             |                        |
| Purchase Order # GPC107602   | 93  | EMERGENCY CO   | NTACT / PHONE N         | O.:                | 1                               |                        |
| 16. GENERATOR'S CERTIFICATE:   |   |  | 11 CFD B-+ 26           | 1anı analicah      | lo stato law h                  | nave been fully and    |
| I hereby certify that the above-desc<br>accurately described, classified and | ribed materials are no<br>packaged and are in p     | roper condition for transpo                          | rtation according t     | o applicable regu  | ulations.                       | Month Day Year         |
| Printed Name   | h   | Signature "On beha                                   | IT OT                   |                    | 1                               | 5218                   |
| T 17. Transporter 1 Acknowledgeme R Printed Name                             | nt of Receipt of Mater                              | ials Signature                                       | (st                     | XI V               | 1                               | Month Day Year         |
| N S P 19 Transporter 2 Acknowledgeme   | of Receipt of Mater                                 | Citype 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1         |                         | Short              | Trys                            | 151211                 |
| Printed Name   |   | Signature  |                         | )                  |                                 | Month Day Year         |
| E R  | Disposal  |  |                         |                    |                                 |                        |
| 19. Certificate of Final Treatment/ I certify, on behalf of the above list   | ed treatment facility, t                            | hat to the best of my know                           | ledge, the above-d      | escribed waste     | was managed                     | in compliance with all |
| applicable laws, regulations, permi 20. Facility Owner or Operator: Ce       | ts and licenses on the<br>ertification of receipt o | dates listed above.<br>If non-hazardous materials of | covered by this ma      | nifest.            |                                 | 150 11                 |
| T Printed Name   | ta  | Signature  | A.                      | 23                 |                                 | Month Day Year         |
| White- TREATMENT, STORAGE, DIS   | 1   | Blue- GENERATOR<br>Gold- TRANSPORTE                  |                         | Υ                  | ellow- GENER                    | RATOR #1 COPY          |

Volume



Superior Landfill 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Ticket Date 05/02/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Time

In 05/02/2018 08:38:10

Out 05/02/2018 08:38:10

Manifest 6677724

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale Inbound 1

1be jaran lbejaran

LDX Rety LIDM Rate Tax

Operator

Vehicle# 5307

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Gross Tare Net Tons

54420 1b 24080 1b 30340 1b 15.17

Comments

Product

1 COAL ASH & COAL CO 100 15.17 Tons

Amount

Origin

PORTW

Total Tax Total Picket



#### WAY NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |  |   |  |              | T                     |                                  |                 |             |       |
|--|--|---|--|--------------|-----------------------|----------------------------------|-----------------|-------------|-------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA  N / A   |   | ifest Doc N                              | 0.           | 2. Page 1 d           | of                               | ,               | 74          | 9     |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | * A TEXAME   | rator's Site Address (If diff<br>RGIA POWER PLANT |  | iling):      | A. Manifes            | MNA                              | 66777           | 24          |       |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | POR  | CROSSGATE RD.<br>T WENTWORTH, GA                  | 31407                                    |              |                       | B. State G                       | enerator's ID   |             |       |
| The state of the s | 06-1365  | C UCEDAID   | No.                                      |              |                       |                                  |                 |             |       |
| 5. Transporter 1 Company Name  | 3 mins   | 6. US EPA ID                                      | Number                                   |              |                       | ransporter's ID<br>orter's Phone |                 |             |       |
| 7. Transporter 2 Company Name  | 71.000   | 8. US EPA ID                                      | Number                                   |              |                       | ransporter's ID<br>orter's Phone |                 |             |       |
| 9. Designated Facility Name and Sit  | e Address  | 10. US EPA II                                     | Number                                   |              |                       |                                  |                 |             |       |
| SUPERIOR LANDFILL  |  |   |  |              | G. State F            | acility ID                       | 1.22            |             |       |
| 3001 LITTLE NECK ROAD  |  |   |  |              | H. State F            | acility Phone                    | 912-92          | 7-6113      |       |
| Savannah, GA 31419   |  |   | ne en e |              |                       |                                  |                 |             |       |
| 11. Description of Waste Materials   | The sales of the sales and the sales are sales as the sales are sales as the sales are |   | 12, Cor<br>No.                           | Type         | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | I. Mis          | c. Comments |       |
| a. COAL ASH& COAL CONTAIN  |  | 5   | 307                                      | DI           | 18                    |                                  |                 | 411016PH    |       |
| T 10 00 00 00 00 00 00 00 00 00 00 00 00   | e# 375200GAKRA   |   |  |              |                       |                                  |                 | U165        |       |
| <b>b.</b>  |  |   |  |              | 1                     |                                  |                 |             |       |
|  | WM Profile #   |   |  |              |                       |                                  |                 |             |       |
| C.   | WWW Frome #  |   |  |              |                       |                                  |                 |             |       |
|  |  |   |  |              |                       |                                  | nomen and \$200 |             | 77    |
|  | WM Profile #   |   |  |              |                       |                                  |                 |             |       |
| d.   |  |   |  |              |                       |                                  |                 |             |       |
|  | WM Profile #   |   |  |              |                       |                                  |                 |             |       |
| J. Additional Descriptions for Mat   |  |   | K. Dispos                                | sal Location | 1                     | l l                              |                 | 15          | - 4   |
|  |  |   | Call                                     | - 1          | no                    | 74                               | Level           | (1)         |       |
|  |  |   | Cell                                     | - 1          | VJU                   | 71                               | Level           |             |       |
| 15. Special Handling Instructions at   | nd Additional Information  | 1   | 4  | C            | XIII                  | 7 5                              | 132-            |             |       |
| Purchase Order # GPC107602   | 293  | EMERGENCY CO                                      | NTACT / PH                               | IONE NO.:    |                       |                                  |                 |             |       |
| 16 GENERATOR'S CERTIFICATE:  | -  | 5-V-6-7   |  |              |                       |                                  |                 |             |       |
| I hereby certify that the above-desc   | cribed materials are not h   | nazardous wastes as defin                         | ed by CFR                                | Part 261 or  | any applicat          | ole state law, h                 | ave been ful    | ly and      |       |
| accurately described, classified and<br>Printed Name   | packaged and are in pro  | Signature "On beha                                | If of"                                   | ording to a  | pplicable reg         | ulations.                        | Month           | Day         | Year  |
| B Tilloovich   |  | BR  |  |              |                       |                                  | 5               | 2           | 10    |
| 17. Transporter 1 Acknowledgeme  | nt of Receipt of Material  | s \ \ \ \ \                                       |  | . 1          |                       |                                  | 1 1             |             |       |
| Printed Name   | Lami   | Signature   | 1  | N            | D                     |                                  | Month 5         | Day         | Year  |
| 18. Transporter 2 Acknowledgeme  | nt of Receipt of Material  | 7 (6  |  |              |                       |                                  | Month           | Day         | Year  |
| Printed Name   |  | Signature   |  |              |                       |                                  | Worki           | 33)         | ,,,,, |
| 19. Certificate of Final Treatment/  | Disposal   |   |  |              |                       |                                  |                 |             |       |
| I certify, on behalf of the above list applicable laws, regulations, permi   | ed treatment facility, tha   | et to the best of my know<br>tes listed above.    | edge, the a                              | above-desc   | ribed waste           | was managed                      | in compliand    | e with all  | 1     |
| 20. Facility Owner or Operator: Co   | ertification of receipt of r   | on-hazardous materials o                          | overed by                                | this manife  | est.                  |                                  |                 |             |       |
| Printed Name   | 490  | Signature   | 173                                      |              |                       |                                  | Month           | Day         | Year  |
| White- TREATMENT, STORAGE, DI  | SPOSAL FACILITY COPY   | Blue- GENERATOR                                   | #2 COPY                                  |              |                       | ellow- GENER                     | ATOR#1 CO       | PY          |       |

Pink- FACILITY USE ONLY



Original Ticket# 1250334

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier CDASTALGRADING COASTALGRADING Vehicle# C26 Ticket Date 05/02/2018 Payment Type Credit Account Container Driver

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6677725

Destination

PO

Profile 3752006AKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/02/2018 09:50:57 Inbound 1

Out 05/02/2018 09:50:57

Scale

Dogrator

Billing # 0001037

Gen EPA ID NR

61040 lb Gross 25980 15 Tare 35060 lb Net 17.53 Tons

Product

Comments

UOM Rate Tax

Check#

Amount

Origin

COAL ASH & COAL CO 100 17.53 Tons

PORTW

Total Tax Total Ticket



## WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |                              |   |  |                         | The state of the s | Telegraphy and the second        |                |  |        |
|--|------------------------------|---|--|-------------------------|--|----------------------------------|----------------|--|--------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA N / A  |   | anifest Doc No   |                         | 2. Page 1 o  | of                               | 8'             | 58   | 7      |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | 1 3 200 000                  | rator's Site Address (If o<br>RGIA POWER PLAN     |  | ng):                    | The second second  | st Number                        | 66777          | 25   |        |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | PORT                         | CROSSGATE RD.<br>T WENTWORTH, G                   | A 31407  |                         |  | B. State G                       | Senerator's ID |  |        |
|  | 606-1365                     | 6. US EPA I                                       | D Number   |                         |  |                                  |                |  |        |
| 5/Transporter 1 Company Name   | radina                       | 6. US EPAT  | D Namber   |                         |  | ransporter's ID<br>orter's Phone |                |  |        |
| 7. Transporter 2 Company Name  |                              | 8. US EPA I                                       | D Number   |                         | The same of the same of the same of  | ransporter's ID<br>orter's Phone |                |  |        |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL   | e Address                    | 10. US EPA  | ID Number  |                         | G. State F   | acility ID                       |                |  |        |
| 3001 LITTLE NECK ROAD  |                              |   |  |                         | H. State F   | acility Phone                    | 912-92         | 7-6113   |        |
| Savannah, GA 31419   |                              |   |  |                         |  |                                  |                |  |        |
| 11. Description of Waste Materials   |                              |   | 12. Conta  | Type                    | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.             | I. Miso        | c. Comment   | S      |
| a. COAL ASH& COAL CONTAN   |                              | (   | 126  | DT                      | 18   |                                  |                |  |        |
| WM Profile   | # 375200GAKRA                |   |  |                         |  |                                  |                |  |        |
|  |                              |   |  |                         |  |                                  |                |  | 511.95 |
| C.   | WM Profile #                 |   | 1  |                         |  |                                  |                | SHRIN  |        |
|  | WM Profile #                 |   |  |                         |  |                                  |                |  |        |
| d.   |                              |   |  |                         |  |                                  |                |  |        |
|  | WM Profile #                 |   |  |                         |  |                                  |                |  |        |
| J. Additional Descriptions for Mate  | erials Listed Above          |   | K. Disposa   | l Location              | 1  | 1 1                              |                |  |        |
| * *  |                              |   | Cell Grid  | 177                     | 0/ 2   | 612                              | Level          | 6  | ??     |
| 15. Special Handling Instructions an   | d Additional Information     |   | 1  |                         | 12   |                                  |                | 6  | 6      |
| Purchase Order # GPC107602   | 93                           | EMERGENCY CO                                      | ONTACT / PHO   | NE NO.:                 |  |                                  | V.             |  |        |
| 16. GENERATOR'S CERTIFICATE:   |                              | N.  |  |                         |  |                                  |                |  |        |
| I hereby certify that the above-desc<br>accurately described, classified and   | ribed materials are not ha   | azardous wastes as def<br>er condition for transp | ned by CFR Pa<br>ortation accor  | irt 261 or<br>ding to a | any applicab<br>oplicable regi   | le state law, h<br>ulations.     | ave been full  | y and  |        |
| Printed Name   |                              | Signature "On beh                                 |  |                         |  |                                  | Month          | Day  | Year   |
| BFILIPOUICH  | -                            | B   | Difference of the Control of the Con |                         |  |                                  |                | X  | 1      |
| 17. Transporter 1 Acknowledgemen   | nt of Receipt of Materials   | Signature   | 0  | 1                       |  |                                  | Month          | Day  | Year   |
| Printed Name   | de                           | V GMB   | (AU)   |                         |  |                                  | 5              | 2  | N      |
| 18. Transporter 2 Acknowledgemen   | nt of Receipt of Materials   | 1/1/2   |  | 1                       |  |                                  | 1 2 2          |  |        |
| Printed Name   |                              | Signature   |  |                         |  |                                  | Month          | Day  | Year   |
| 19. Certificate of Final Treatment/I   | Disposal                     |   |  |                         | 8 0  |                                  |                |  |        |
| I certify, on behalf of the above listed applicable laws, regulations, permit  | s and licenses on the date   | es listed above.                                  |  |                         |  | was managed                      | in complianc   | e with all   |        |
| The state of the s |                              |   | covered by th  | is manife               | st.  |                                  |                |  |        |
| 20. Facility Owner or Operator: Ce   | rtification of receipt of no | on-hazardous materiais                            | covered by th  | 13 manife               | 200  |                                  | 1000           | The Control of the Co |        |
| 20. Facility Owner or Operator: Ce   | rtification of receipt of no | Signature Signature                               | covered by th  | is marine               |  |                                  | Month          | Day  | Year   |

Pink- FACILITY USE ONLY



Original Ticket# 1250350

| Ticket Date Payment Type Manual Ticket Hauling Ticke Route State Waste C Manifest Destination | 05/02/2018<br>Credit Account<br>#<br>t# | Vel<br>Cor<br>Dr<br>Ch<br>Bi | hicle# C<br>ntainer<br>iver<br>eck#<br>lling # |        | COASTALGRADING<br>Volume |
|---|---|------------------------------|--|--------|--------------------------|
| PO<br>Profile   | 375200GAKRA (COAL ASH                   | & COAL CON                   | TAMINATED                                      | WASTE) |                          |

| Gene       | rator 1    | 26-GEORGIAPW | IRCHAT GEORGIA | PUWEK - PLANT | KRHFI |       |       |    |
|------------|------------|--------------|----------------|---------------|-------|-------|-------|----|
|            | Time       |              | Scale          | Operator      |       | Gross | 59480 | 16 |
| In         | 05/02/2018 | 3 10:21:05   | Inbound 1      | RB \/         |       | Tare  | 27040 | lb |
| Out        |            | 10:21:05     |                | RB / V        |       | Net   | 32440 | 16 |
| 397 399.00 |            |              |                |               |       | Tons  | 16.   | 22 |

Comments

|                             | 1.0 | MSTE  |     | MAGE | MENT                                    |                                   |        |
|-----------------------------|-----|-------|-----|------|---|-----------------------------------|--------|
| Product                     | LD% | Qty   | UOM | Rate | Tax                                     | Amount                            | Origin |
| - value de la casa em cente |     |       |     |      | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | * * * * * * * * * * * * * * * * * |        |
| 1 COAL ASH & COAL CO        |     | 16.22 |     |      |   |                                   | PORTW  |

Total Tax Total Ticket

Mirelfry "



#### WWW. NON-HAZARDOUS MANIFEST

|  |  | 7/10/20  |  | 2.0  |                                 |  | THE REAL PROPERTY.     |   |
|--|--|--|--|--|---------------------------------|--|------------------------|---|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA ID<br>N / A  | No. Mani   | fest Doc No.   | 2. Page 1 c  | t                               | 9:   | 13                     | 1/2                                     |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEOR   | tor's Site Address (If diffe<br>GIA POWER PLANT  |  | A. Manifes   | t Number<br><b>VNA</b>          | 66777  | 26                     |   |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  |  | ROSSGATE RD.<br>WENTWORTH, GA  | 31407  |  | B. State G                      | enerator's II  | )                      |   |
| 4. Generator's Phone 404-5   | 506-1365   |  |  |  |                                 |  |                        | 100000000000000000000000000000000000000 |
| 5. Transporter 1 Company Name  |  | 6. US EPA ID I   | lumber   | C State Tr   | ansporter's ID                  |  |                        |   |
| 1,000701 P   | tradina  |  |  |  | orter's Phone                   |  | ALCO MICE AND ACCOUNTS |   |
| 7. Transporter 2 Company Name  | ( )  | 8. US EPA ID I   | lumber   |  |                                 |  | Holler III             |   |
|  |  |  |  | The state of the s | ansporter's ID<br>orter's Phone |  |                        |   |
| 9. Designated Facility Name and Site   | o Address  | 10. US EPA ID  | Number   | F. Hallspc   | ittel 3 i none                  |  |                        |   |
| SUPERIOR LANDFILL  | e Address  |  |  | G. State F   | acility ID                      | DEGREE STATE OF THE STATE OF TH |                        |   |
| 3001 LITTLE NECK ROAD  |  |  |  | H. State F   | acility Phone                   | 912-92   | 27-6113                |   |
| Savannah, GA 31419   |  |  |  |  |                                 |  |                        |   |
|  |  |  |  |  | 14. Unit                        |  |                        |   |
| 11. Description of Waste Materials   |  | Company of the State of the Sta | 12. Containers No. Type                                  | 13. Total<br>Quantity  | Wt./Vol.                        | I. Mis   | c. Comment             | .S                                      |
| a. COAL ASH& COAL CONTAN   | VINATED WASTE  | 4  | 000  | - 17   |                                 |  |                        |   |
| personal property and the second seco |  |  | DI   | 16   |                                 |  |                        |   |
| WM Profil  | e# 375200GAKRA   |  | 4  | E Colonia  |                                 |  |                        |   |
| b.   |  |  |  |  |                                 |  |                        |   |
|  |  |  |  |  |                                 |  |                        |   |
|  | WM Profile #   |  |  |  |                                 |  |                        |   |
| <b>C.</b>  | •  |  | HOW NEED   |  |                                 |  | Ħ                      |   |
|  | WM Profile #   |  | C AND STREET   |  |                                 |  |                        |   |
| d.   |  |  |  |  |                                 |  |                        |   |
|  |  |  |  |  | - 1000                          |  |                        | ***********                             |
|  | WM Profile #   |  |  |  |                                 |  |                        |   |
| J. Additional Descriptions for Mat   | erials Listed Above  |  | K. Disposal Location                                     | n<br>k // 1 (  | 17/                             |  | 105                    |   |
|  |  |  | Cell   | V) C   | 119                             | Level  | 01                     |   |
|  |  |  | Grid /   | 201  | 132                             |  |                        |   |
| 15 Special Handling Instructions at  | nd Additional Information  |  | (  | ~ 11   | 05                              |  |                        |   |
| 15. Special nationing instructions at  |  |  |  |  |                                 | 18   | * **                   |   |
| 15. Special nationing instructions at  |  |  |  |  |                                 |  | 44                     |   |
|  |  | EMERGENCY CON  | ITACT / PHONE NO.:                                       |  |                                 |  | 4                      |   |
| Purchase Order # GPC10760.   |  | EMERGENCY CON  | NTACT / PHONE NO.:                                       |  |                                 |  | 4                      |   |
| Purchase Order # GPC10760  | 293  |  |  |  | le state law, h                 | nave been fu   | ly and                 |   |
| Purchase Order # GPC10760:  16. GENERATOR'S CERTIFICATE:   | 293  | zardous wastes as definer<br>er condition for transpor   | ed by CFR Part 261 o                                     | or any applicat  | ile state law, hulations.       |  |                        | L                                       |
| Purchase Order # GPC10760.   | 293  | zardous wastes as defin  | ed by CFR Part 261 o                                     | or any applicat  | ile state law, h<br>ulations.   | nave been fu   | Ily and                | Ye                                      |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  | 293<br>cribed materials are not had<br>d packaged and are in prope   | zardous wastes as definer<br>er condition for transpor   | ed by CFR Part 261 o                                     | or any applicat  | ile state law, h<br>ulations.   |  |                        | Ye                                      |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement   | 293<br>cribed materials are not had<br>d packaged and are in prope   | zardous wastes as defin<br>er condition for transpol<br>Signature "On behal  | ed by CFR Part 261 o                                     | or any applicat  | ole state law, h<br>ulations.   |  |                        | 18                                      |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  | 293<br>cribed materials are not had<br>d packaged and are in prope   | zardous wastes as definer<br>er condition for transpor   | ed by CFR Part 261 o                                     | or any applicat  | ole state law, h                | Month  | Day<br>2               | 1/8                                     |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name   | 293  cribed materials are not had packaged and are in properent of Receipt of Materials  | zardous wastes as defin<br>er condition for transpol<br>Signature "On behal  | ed by CFR Part 261 o                                     | or any applicat  | ole state law, hulations.       | Month  | Day<br>2               | 1/8                                     |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement   | 293  cribed materials are not had packaged and are in properent of Receipt of Materials  | zardous wastes as defin<br>er condition for transpol<br>Signature "On behal  | ed by CFR Part 261 o                                     | or any applicat  | ile state law, h<br>ulations.   | Month  | Day<br>2               | Ye   / C                                |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name   | 293  cribed materials are not had packaged and are in properent of Receipt of Materials  | zardous wastes as definer condition for transpoles ignature "On behales ignature"  | ed by CFR Part 261 o                                     | or any applicat  | ole state law, h                | Month Month  | Day Day                | Ye   / C                                |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  Printed Name  Printed Name  | cribed materials are not had packaged and are in proper ent of Receipt of Materials  | zardous wastes as definer condition for transpoles ignature "On behales ignature"  | ed by CFR Part 261 o                                     | or any applicat  | ole state law, h                | Month Month  | Day Day                | Ye                                      |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  Printed Name  18. Transporter 2 Acknowledgement Printed Name  | cribed materials are not had packaged and are in proper ent of Receipt of Materials ent of Receipt of Materials  | zardous wastes as definer condition for transport Signature "On behalt Signature Signature Signature   | ed by CFR Part 261 o<br>rtation according to a<br>if of" | or any applicab<br>applicable reg  | unitions.                       | Month  Month  Month  | Day Day Day            | Ye                                      |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-destacturately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment, I certify, on behalf of the above listannicable laws, regulations, perm  | cribed materials are not had packaged and are in proper and of Receipt of Materials are not reached the facility, that not saits and licenses on the date | Signature  Signature  Signature  Signature  Signature  | ed by CFR Part 261 o<br>rtation according to a<br>If of" | or any applicab<br>applicable reg  | unitions.                       | Month  Month  Month  | Day Day Day            | Ye                                      |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment, I certify, on behalf of the above lise  | cribed materials are not had packaged and are in proper and of Receipt of Materials are not reached the facility, that not saits and licenses on the date | Signature  Signature  Signature  Signature  Signature  Signature   | ed by CFR Part 261 o<br>rtation according to a<br>If of" | or any applicab<br>applicable reg  | unitions.                       | Month  Month  Month  | Day Day Ce with al     |   |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-destaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgemed Printed Name  Printed Name  18. Transporter 2 Acknowledgemed Printed Name  19. Certificate of Final Treatment, I certify, on behalf of the above listannicable laws, regulations, perm  | cribed materials are not had packaged and are in proper and of Receipt of Materials are not reached the facility, that not saits and licenses on the date | Signature  Signature  Signature  Signature  Signature  | ed by CFR Part 261 o<br>rtation according to a<br>If of" | or any applicab<br>applicable reg  | unitions.                       | Month  Month  Month  | Day Day Day            | Yes                                     |

Pink- FACILITY USE ONLY



Original Ticket# 1250352

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 05/02/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677727

Destination

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/02/2018 10:24:09 In Out 05/02/2018 10:24:09

Scale Inbound 1 Operator

59060 1b Gross 27500 lb Tare 31560 lb Net 15.78 Tons

Comments

403WM

Vehicle# 5306

0001037

Container

Billing #

Gen EPA ID NR

Driver

Check#

Origin Amount Tax Qty MOU Rate LD% Product. PORTW

1 COAL ASH & COAL CO 100

15,78 Tons



Total Tax Total Ticket



### WWW. NON-HAZARDOUS MANIFEST

|                       | WASTE MANAGEMENT   |   |   |              | KV-                                     | 1  | · 1                              |   |            |      |
|-----------------------|--|---|---|--------------|---|--|----------------------------------|---|------------|------|
|                       | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                 |   | nifest Doc N | No.                                     | 2. Page 1 c  | T-AL                             | 9.24                                    |            |      |
|                       | B. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,                        | GEC   | erator's Site Address (If dir<br>DRGIA POWER PLAN'<br>CROSSGATE RD. |              | ailing):                                | A. Manifes   | MNA                              | 66777                                   | 711        | 1    |
|                       | ATLANTA, GA 30308-3374   |   | RT WENTWORTH, GA  | 31407        |   |  | B. State C                       | ienerator s it                          |            |      |
|                       | 5. Transporter 1 Company Name  | Iradias   | 6. US EPA ID  |              |   | The state of the s | ansporter's IC<br>orter's Phone  |   |            |      |
|                       | 7. Transporter 2 Company Name  | 1. 3011 13  | 8. US EPA ID  |              | V                                       |  | ransporter's IE<br>orter's Phone |   |            |      |
|                       | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD                   | e Address   | 10. US EPA  | D Number     |   | G. State F   | acility ID                       | 912-92                                  | 27-6113    |      |
|                       | Savannah, GA 31419   |   |   | 12.00        | ontainers                               | 13. Total  | 14. Unit                         |   |            |      |
| G                     | 11. Description of Waste Materials   |   |   | No.          | Туре                                    | Quantity   | Wt./Vol.                         | I. Mis                                  | c. Comment | is   |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAN   | MINATED WASTE  e# 375200GAKRA                         | K   | 306          | DT                                      | 18   |                                  |   |            |      |
| R                     | b.   | e# 3/3200GAKKA  |   |              | 200000000000000000000000000000000000000 |  |                                  | W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |            |      |
| A<br>T<br>O           |  | WM Profile #  |   |              |   |  |                                  |   |            |      |
| R-                    | C.   | St. II  |   |              | a Planting                              |  |                                  |   |            |      |
| -                     | d.   | WM Profile #  |   |              |   |  |                                  |   |            |      |
|                       |  | WM Profile #  |   |              |   |  |                                  |   |            |      |
|                       | J. Additional Descriptions for Mat   | erials Listed Above                                   |   | Cell<br>Grid | osal Location                           | VSt  | 174                              | Level                                   | 6          |      |
|                       | 15. Special Handling Instructions a  | nd Additional Informatio                              | n   |              | (                                       | 1  | 669                              |   |            |      |
|                       | Purchase Order # GPC10760  | 293   | EMERGENCY CO  | ONTACT / P   | HONE NO.:                               |  |                                  |   |            |      |
|                       | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and | cribed materials are not<br>I packaged and are in pro | oper condition for transp   | ortation acc | Part 261 or<br>cording to a             | any applicat<br>pplicable reg  | ole state law, l<br>ulations.    | nave been fu                            | lly and    | Year |
|                       | Printed Name  R + 1 Pource  17. Transporter 1 Acknowledgeme  | ent of Receipt of Materia                             | Signature "On beh   | alf of       | 0                                       |  | )-                               | 5                                       | 2          | 12   |
| T<br>R<br>A<br>N<br>S | Printed Name   | Karne   | Signature   | here         | 7                                       | 19   | re                               | Month 5                                 | Day        | Year |
| P<br>O<br>R<br>T<br>E | 18. Fransporter 2 Acknowledgeme<br>Printed Name  | ent of Receipt of Materia                             | Signature   |              |   | 1  |                                  | Month                                   | Day        | Year |
| R                     | 19. Certificate of Final Treatment, I certify, on behalf of the above lis                            | ted treatment facility, th                            | at to the best of my know   | vledge, the  | above-desc                              | ribed waste  | was managed                      | l in complian                           | ce with a  | 11   |
| A<br>C                | applicable laws regulations, perm  | its and licenses on the da                            | ates listed above.  |              |   |  |                                  | N.S.                                    | 94.        | - Ti |
| L<br>I<br>T<br>Y      | 20. Facility Owner or Operator: C Printed Name   | ertification of receipt of                            | non-hazardous materials<br>Signature                                | covered by   | y this manife                           | est.   |                                  | Month                                   | Day        | Wear |
|                       | White-TREATMENT, STORAGE, DI   | THE SHAPE CORV  | Blue- GENERATO  | ID #3 COBY   |   |  | Yellow- GENE                     | RATOR #1 CC                             | PY         | -    |

Pink- FACILITY USE ONLY



Original Ticket# 1250360

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/02/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677728

Destination

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

- 14

Time

In 05/02/2018 10:34:23 Dut 05/02/2018 10:34:23

Scale Inbound 1

Operator

Vehicle# LØ7 Container

Gen EPA ID NR

Billing # 0001037

Driver

Check#

Gross Tare Net Tons

54280 1b 25240 lb 29040 1b 14.52

Comments

WASTE MANAGEMENT Tax

HOM Rate LD% Oty Product

Asount

Drigin

COAL ASH & COAL CO 100 14.52 Tons

PORTW

Total Tax Intal floket



## WWW. NON-HAZARDOUS MANIFEST

| NON HAZADDOUG MAANIEEGT  |  |  |                   |  |  |                                     |  |
|--|--|--|-------------------|--|--|-------------------------------------|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA  |  | ifest Doc No.     | 2. Page 1 o                              | f  | 9:42                                |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | BIN#10221 155  | nerator's Site Address (If diff<br>ORGIA POWER PLANT<br>5 CROSSGATE RD.<br>RT WENTWORTH, GA  | KRAFT             |  | A. Manifest Number WMNA  B. State Generator's ID |                                     |  |
|  | 506-1365   | 6. US EPA ID   | Number            |  |  |                                     |  |
| Coastala   | rading   | 8. US EPA ID   | Number            |  | C. State Transporter's ID D. Transporter's Phone |                                     |  |
| 7Trånsporter 2 Company Name  |  | 8. USEPAID   | Number            |  | ansporter's IC<br>rter's Phone                   |                                     |  |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | e Address  | 10. US EPA II  | ) Number          | G. State Fa                              | acility ID<br>acility Phone                      | 912-927-6113                        |  |
|  |  |  | 12. Containers    | 13. Total                                | 14. Unit   | I. Misc. Comments                   |  |
| 11. Description of Waste Materials   |  |  | No. Typ           | e Quantity                               | Wt./Vol.   | I. WISC. COMMENS                    |  |
| a. COAL ASH& COAL CONTAI   | MINATED WASTE  | Z  | 07 D              | 1/8                                      |  |                                     |  |
| b. WM Profil   | e# 5/3200GARRA   |  |                   |  |  |                                     |  |
|  | WM Profile #   |  |                   |  |  |                                     |  |
| C.   | WM Profile #   |  |                   |  |  |                                     |  |
| d.  J. Additional Descriptions for Mar   | WM Profile #<br>terials Listed Above   |  | K. Disposal Loca  | ation 370                                | 124  | Level OT                            |  |
| 15. Special Handling Instructions a  | ınd Additional Informati   | on   | Grid              | roll                                     | 632  | 2                                   |  |
| £  |  |  | NEACE / DUONE A   | 10 :                                     | - X  | ×                                   |  |
|  | 202  | EMERGENCY CO   | NTACT / PHONE N   | 10                                       |  |                                     |  |
| Purchase Order # GPC10760  | 293  | The state of the s |                   |  |  |                                     |  |
| 16. GENERATOR'S CERTIFICATE:   | cribed materials are not   | t hazardous wastes as defin  | ed by CFR Part 26 | 1 or any applicab                        | le state law, l                                  | have been fully and                 |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name   | cribed materials are not   | t hazardous wastes as defin  | rtation according | i1 or any applicab<br>to applicable reg  | le state law, l<br>ulations.                     |                                     |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name   | scribed materials are not dispatched and are in proceedings of the process of the | t hazardous wastes as defin<br>roper condition for transpo<br>Signature "On beha<br>als  | rtation according | of 1 or any applicable to applicable reg | le state law, l<br>ulations.                     | Month Day Y                         |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement  | scribed materials are not dispatched and are in proceedings of the process of the | t hazardous wastes as defin<br>roper condition for transpo<br>Signature "On beha<br>als  | rtation according | of or any applicable to applicable reg   | le state law, l<br>ulations.                     | Month Day Y                         |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  | scribed materials are not d packaged and are in preent of Receipt of Materials ent of Receipt of Materials ent of Receipt of Materials (Disposal   | t hazardous wastes as defin<br>roper condition for transpo<br>Signature "On beha<br>als<br>Signature<br>ials   | lf of"            | to applicable reg                        | arations.  | Month Day Y Month Day Y Month Day N |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment I certify, on behalf of the above list applicable laws, regulations, perm | ent of Receipt of Materials are not of Receipt of Materials and Justine Materials are in pure and the control of Receipt of Materials and Justine Materials and  | t hazardous wastes as defin<br>roper condition for transpo<br>Signature "On beha<br>als<br>Signature<br>ials<br>Signature<br>hat to the best of my know<br>dates listed above.   | ledge, the above- | described waste                          | arations.  | Month Day Y Month Day Y Month Day Y |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment Licertify, on behalf of the above list                                    | ent of Receipt of Materials are not of Receipt of Materials and Justine Materials are in pure and the control of Receipt of Materials and Justine Materials and  | t hazardous wastes as defin<br>roper condition for transpo<br>Signature "On beha<br>als<br>Signature<br>ials<br>Signature<br>hat to the best of my know<br>dates listed above.   | ledge, the above- | described waste                          | arations.  | Month Day Y Month Day Y Month Day Y |  |

Pink- FACILITY USE ONLY



Original Ticket# 1250374

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Vehicle# 5307 Volume Ticket Date 05/02/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677729

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

0/ = 3E

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/02/2018 10:50:15 Out 05/02/2018 10:50:15

Scale Inbound 1

Operator RB RA

Gross Tare Net Tons

57140 lb 24080 15 33060 1b 16.53

Comments

WASTE MANAGEMENT

MOU Rate LD% Qty Product

Container

Billing # 0001037

Sen EPA ID NR

Driver

Check#

Tax

Amount

Origin

1 COAL ASH & COAL CO 100 16.53 Tons

PORTW

Total Tax fatal floket



### WANA NON-HAZARDOUS MANIFEST

| ASTE MANAGEMENT  |                      | \               |  |                     |                 |  | f   |                |  |  |
|--|----------------------|-----------------|--|---------------------|-----------------|--|---|----------------|--|--|
| NON-HAZARDOUS MANIFEST  1. Generator's US EPA ID  N / A                      |                      |                 | o. N                                   | lanifest Doc No     | O.              | 2. Page 1 o  |   | 9:57           |  |  |
| Generator's Mailing Address:<br>EORGIA POWER                                 |                      |                 | 's Site Address (If<br>A POWER PLA     |                     | ling):          | : A. Manifest Number  WMNA   |   |                | 29   |  |
| 41 RALPH MCGILL BLVD NE,<br>TLANTA, GA 30308-3374                            |                      |                 | SSGATE RD.<br>ENTWORTH, (              | SA 31407            |                 |  | B. State G  | enerator's ID  |  |  |
| Generator's Phone 404-<br>Transporter 1 Company Name                         | 506-1365             | 6.              | US EPA                                 | ID Number           | 1 - 1 -         |  |   |                |  |  |
| Pastal G   | radin                | 9               |  |                     |                 | Name and the same  | ansporter's ID<br>orter's Phone   |                |  |  |
| . Transporter 2 Company Name   |                      | ) 8.            | US EPA                                 | ID Number           |                 |  | ansporter's ID  | )              |  |  |
| . Designated Facility Name and Sit<br>UPERIOR LANDFILL                       | e Address            | 10              | . US EP                                | A ID Number         | TV V            | G. State Fa  | acility ID  |                |  |  |
| 001 LITTLE NECK ROAD   |                      |                 |  |                     |                 | H. State Fa  | acility Phone   | 912-92         | 7-6113   |  |
| Savannah, GA 31419   |                      |                 |  |                     | 1-41            |  |   |                |  |  |
| 1. Description of Waste Materials  |                      |                 |  | 12. Con<br>No.      | tainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.  | I. Misc        | Comments   |  |
| . COAL ASH& COAL CONTAI  | MINATED WAS          | STE             |  |                     | 1               | 10   |   |                |  |  |
|  |                      |                 | 1                                      | 307                 | 101             | II Ò   | processing constitut  |                |  |  |
| WM Profi   | le# 375200G          | AKRA            |  |                     |                 |  |   |                |  |  |
| ).   |                      |                 |  |                     | 7               |  | 100   | Y X            |  |  |
|  |                      |                 |  |                     |                 |  |   |                |  |  |
|  | WM Profile #         |                 |  |                     |                 |  |   |                |  |  |
|  |                      |                 |  |                     |                 | 1  |   |                | b. 1   |  |
|  | WM Profile #         |                 |  |                     |                 |  |   |                | The Assessment of the Assessme |  |
| 1.   |                      |                 |  |                     | 14-14           |  | 100 May |                |  |  |
|  |                      |                 |  |                     |                 | The state of the s |   | 1              | -4   |  |
|  | WM Profile #         |                 |  |                     |                 |  |   |                |  |  |
| <ol> <li>Additional Descriptions for Ma</li> </ol>                           | terials Listed Abo   | ive             |  | K. Dispos           | al Locatio      | 171  | 176   | 3              | rt   |  |
|  |                      |                 |  | Cell                |                 | VIL  | 1 1   | Level          | 0  |  |
|  |                      |                 |  | Grid                | 1/              | 1 1  | 7 7   |                |  |  |
| 15. Special Handling Instructions a  | nd Additional Info   | ormation        |  |                     |                 | M  | 1167.   | 1              |  |  |
| Purchase Order # GPC10760  | 293                  |                 | EMERGENCY                              | CONTACT / PH        | ONE NO.:        |  |   |                |  |  |
| 16 GENERATOR'S CERTIFICATE:  | 2253025              |                 | and the second                         |                     |                 |  |   |                | 11.23  |  |
| II   | scribed materials    | are not hazar   | dous wastes as d                       | efined by CFR F     | Part 261 o      | r any applicab   | le state law, h   | nave been ful  | ly and   |  |
| accurately described, classified an  | d packaged and a     | re in proper o  | condition for trans<br>Signature "On b | sportation acco     | ording to a     | ірріісаріе гед   | uiduoris.   | Month          | Day  |  |
| Printed Name  B Filippy C  |                      |                 | 3 P                                    |                     | 1               |  | W   | 5              | 2  |  |
| 17. Transporter 1 Acknowledgem   | ent of Receipt of    | Materials       | 11                                     |                     |                 | 1  |   |                |  |  |
| Printed Name   | 2                    | -4              | Signature                              | . , &               | V               | N  |   | Month          | Day  |  |
| V Stonley  | DUIC                 | m               | V mg                                   |                     | 26              | ) —  |   | 15             | d l  |  |
| 18. Transporter 2 Acknowledgem   | ent of Receipt of    | Materials       | Cianotura                              |                     |                 |  |   | Month          | Day  |  |
| Printed Name   |                      |                 | Signature                              |                     |                 |  |   |                |  |  |
|  | MILITARY.            |                 |  |                     |                 |  |   |                |  |  |
| 19. Certificate of Final Treatment   | /Disposal            |                 |  | and the Property of |                 | - فعدد : ام م ما تد  | was managad   | l in compliant | e with all   |  |
| I certify, on behalf of the above list<br>applicable laws, regulations, perm | sted treatment fa    | cility, that to | the best of my kn                      | owledge, the a      | ibove-desc      | cribed waste   | was managed   | ти сотприал    | C WILL ALL   |  |
| applicable laws regulations pern   | nits and licenses of | on the dates I  | nazardous materia                      | als covered by      | this manif      | est.   |   | 1              |  |  |
| applicable laws, regulations, peri   | atification of       |                 |  |                     | 5868E-1866-66   |  |   | 11-            | Personal Property of the Personal Property of  |  |
| 20. Facility Owner or Operator: ( Printed Name                               | Certification of red | cerpt of from   | Signature                              | 1 0                 |                 | 7  |   | Month          | Day  |  |

Pink- FACILITY USE ONLY

Original Ticket# 1250390

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 05/02/2018 Vehicle# C25 Payment Type Credit Account Container Manual Ticket# Hauling Ticket# Check# Billing # Route State Waste Code Gen EPA ID NR

Manifest 6677730 Destination

PO. Profile Generator

Comments

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/02/2018 11:21:42 Out 05/02/2018 11:21:42

Scale Inbound 1

Unerator LBEJARAN LBEJARAN

Gross. Tare 27040 lb 34020 1b Tons

Product LD% Qty LIOM Rate Amount COAL ASH & COAL CO 100

17.01 Tons





| NON-HAZARDOUS MANIFEST  |  | ID No.   | Manifest Doc N   | 0                       | 2. Page 1 c                                      | of I                            |                                 |
|---|--|--|--|-------------------------|--|---------------------------------|---------------------------------|
|   | 1. Generator's US EPA  N / /   |  | Mannest Doc N  | <b>.</b>                | Z. Tage I  | 10:41                           |                                 |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374   | GEC<br>BIN#10221 155   | erator's Site Address<br>DRGIA POWER PI<br>CROSSGATE RD<br>RT WENTWORTH  | ANT KRAFT  | ling):                  | A. Manifes                                       | MNA                             | 6677730<br>enerator's ID        |
|   | 506-1365   |  |  |                         |  |                                 |                                 |
| 5. Transporter 1 Company Name   | maling   |  | PA ID Number   |                         | C. State Transporter's ID D. Transporter's Phone |                                 |                                 |
| 7. Transporter 2 Company Name   |  |  | PA ID Number   |                         |  | ansporter's ID<br>orter's Phone |                                 |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  | e Address  | 10. US   | EPA ID Number  |                         | G. State F                                       | acility ID<br>acility Phone     | 912-927-6113                    |
| Savannah, GA 31419  |  |  |  |                         |  |                                 |                                 |
| 11. Description of Waste Materials  |  |  | 12. Cor<br>No.   | tainers<br>Type         | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.            | I. Misc. Comments               |
| a. COAL ASH& COAL CONTAIN   | MINATED WASTE  |  | C-24   | D1                      | 17   |                                 |                                 |
|   | e# 375200GAKRA   |  |  |                         |  |                                 |                                 |
| <b>b.</b>   |  |  |  |                         |  |                                 |                                 |
|   | WM Profile #   |  |  |                         |  |                                 |                                 |
| <b>c.</b>   |  |  |  |                         |  |                                 |                                 |
|   | WM Profile #   |  |  |                         |  |                                 |                                 |
|   |  |  |  |                         |  |                                 |                                 |
| J. Additional Descriptions for Mat  | WM Profile #<br>terials Listed Above   |  | Cell   | sal Location            | 34   | 112                             | Level 6 5                       |
|   | terials Listed Above   | n  |  | sal Location            | 34<br>M  | 124                             | Level 6                         |
| J. Additional Descriptions for Mat<br>15. Special Handling Instructions an  | terials Listed Above<br>nd Additional Information  |  | Cell<br>Grid   |                         | 34<br>M  | 1232                            | Level 6                         |
| J. Additional Descriptions for Mat  15. Special Handling Instructions an  Purchase Order # GPC107602  | terials Listed Above<br>nd Additional Information  |  | Cell   |                         | 134<br>M   | 1252                            | Level 6                         |
| J. Additional Descriptions for Mat  15. Special Handling Instructions at  Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: Liberally certify that the above-desi  | nd Additional Information  293   | EMERGEN<br>hazardous wastes as   | Cell Grid  CY CONTACT / PH  s defined by CFR l ansportation according                                    | ONE NO.:                | any application                                  | ole state law, hulations.       | ave been fully and              |
| J. Additional Descriptions for Material 15. Special Handling Instructions at Purchase Order # GPC107602.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described accurately described, classified and Printed Name  | nd Additional Information  293  cribed materials are not la packaged and are in pro  | EMERGEN hazardous wastes as oper condition for tree signature. "Or   | Cell Grid  CY CONTACT / PH  s defined by CFR l ansportation according                                    | ONE NO.:                | any application                                  | ole state law, hulations.       |                                 |
| J. Additional Descriptions for Material Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descripted Additional Printed Name  17. Transporter 1 Acknowledgement Printed Name   | nd Additional Information 293 cribed materials are not less packaged and are in procent of Receipt of Material   | hazardous wastes as oper condition for tr<br>Signature "Or   | Cell Grid  CY CONTACT / PH  s defined by CFR l ansportation according                                    | ONE NO.:                | any application                                  | ole state law, hulations.       | ave been fully and              |
| J. Additional Descriptions for Material Section 15. Special Handling Instructions at Purchase Order # GPC107602.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described accurately described, classified and Printed Name.  17. Transporter 1 Acknowledgements                             | nd Additional Information 293 cribed materials are not less packaged and are in procent of Receipt of Material   | hazardous wastes as oper condition for tr<br>Signature "Or   | Cell Grid  CY CONTACT / PH  s defined by CFR lansportation according                                     | ONE NO.:                | any application                                  | ole state law, hulations.       | nave been fully and             |
| J. Additional Descriptions for Mate 15. Special Handling Instructions at Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-dest accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement | nd Additional Information 293  cribed materials are not less and are in proceed and are i | hazardous wastes as oper condition for treatment of the Signature of the best of my attention of the Signature of the best of the best of my attention of the Signature of the S | Cell Grid  CY CONTACT / PH  and defined by CFR I ansportation according to behalf of "  knowledge, the a | Part 261 or ording to a | any applicate pplicable reg                      | ulauons.                        | Month Day  Month Day  Month Day |

Original Ticket# 1250417

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Vehicle# C25 Ticket Date 05/02/2018 Container Payment Type Credit Account Driver Manual Ticket# Check# Hauling Ticket# 0001037 Billing # Route Gen EPA ID NR State Waste Code Manifest 6677731

Destination PO

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Profile 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Generator

Scale Operator Time Inbound 1 rb 05/02/2018 12:07:13 rb Out 05/02/2018 12:07:13

Comments

Origin Amount HOU Rate Tax Qty LD% Product

COAL ASH & COAL CO 100

17.48 Tons

PORTW

62000 1b

27040 15

34960 lb

17.48

Total Tax Inbat floket

Gross

Tare

Net

Tons

minfor



| WASTE MANAGEMENT  |                        |  |                | 12           | D D 1   | t I  |                |            |             |
|---|------------------------|--|----------------|--------------|---|--|----------------|------------|-------------|
| NON-HAZARDOUS MANIFEST  |                        | / A  | Manifest Doc N |              | 2. Page 1 of 11. 2  |  |                | :20        | )           |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  |                        | Generator's Site Address<br>GEORGIA POWER PL |                | niling):     | A. Manifes  | t Number   | 66777          | 31         |             |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374   | F                      | 155 CROSSGATE RD.<br>PORT WENTWORTH,         | GA 31407       |              |   | B, State 0   | Generator's IE |            |             |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name  | 06-1365                | 6. US EP                                     | A ID Number    |              | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID |  |                |            | entinentl   |
| 7. Transporter 2 Company Name   | radin                  | 8. US EP                                     | A ID Number    |              |   |  |                |            |             |
| 9. Designated Facility Name and Sit   | e Address              | 10. US E                                     | PA ID Number   |              | F. Transpo  |  |                |            |             |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  |                        |  |                |              | G. State F  | acility ID   | 912-92         | 7-6113     |             |
| Savannah, GA 31419  |                        |  |                | ontainers    | 13. Total   | 14. Unit   | I. Mis         | c. Comment | s III       |
| a. COAL ASH& COAL CONTAIN   | MINATED WASTE          |  | 125            | Туре         | Quantity  | Wt./Vol.   |                |            |             |
|   | # 375200GAK            | RA   |                |              |   | THE PARTY OF THE P |                |            |             |
|   | WM Profile #           |  |                |              |   | The Police of Section 1997   |                |            |             |
| c.  | WM Profile #           |  |                |              |   |  |                |            |             |
| d.  | WM Profile #           |  |                |              |   |  |                |            |             |
| J. Additional Descriptions for Mat  |                        |  | K. Dispo       | sal Location | 1   | 18/  | Level          | )  - ,     | / (         |
| 15. Special Handling Instructions a   | nd Additional Inform   | nation                                       | Grid /         | sac          | 11 291  | <u> </u>   | W JC           |            | 1           |
| Purchase Order # GPC10760   | 293                    | EMERGENC                                     | y CONTACT / PI | HONE NO.:    |   |  | .0.            |            |             |
| 16. GENERATOR'S CERTIFICATE:  | cribed materials are   | not hazardous wastes as                      | defined by CFR | Part 261 or  | any applicat  | ole state law,   | have been fu   | ly and     |             |
| accurately described, classified and Printed Name   | packaged and are in    | Signature "On                                | behalf of"     | ording to a  | ррпсавле гед  | ulations.  | Month          | Day        | Year<br>/ 8 |
| 17. Transporter 1 Acknowledgeme Printed Name  |                        | Signature Min                                | do dife        | · ·          |   |  | Month          | Day        | Year.       |
| 18. Transporter 2 Acknowledgeme   |                        |  |                |              |   | W. G   | Month          | Day        | Year        |
| 19. Certificate of Final Treatment, I certify, on behalf of the above lis                                   | Disposal               | y that to the heet of my                     | nowledge the   | above-desc   | ribed waste   | was manage   | d in complian  | ce with al | <u> </u>    |
| I certify, on behalf of the above list applicable laws, regulations, perm 20. Facility Owner or Operator: C | its and licenses on th | ne dates listed above.                       |                |              |   | 3  |                |            |             |
| Printed Name  | )                      | Signaturé                                    | 3)             |              |   |  | Month          | Day        | Year        |
| White- TREATMENT, STORAGE, DI   | SPOSAL FACILITY CO     | PY Blue- GENER                               | ATOR #2 COPY   |              |   | Yellow- GENE   | RATOR #1 CO    | PY         |             |

Pink- FACILITY USE ONLY



Original Ticket# 1250439

NUMBERS INTERPRISE

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier

Ticket Date 05/02/2018

Payment Type Credit freumi

Manual Ticket# Hauling Ticket#

State Waste Code

Manifest 6677732

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Generator

Time

In 05/02/2018 12:42:09 Out 05/02/2018 12:42:09

Inbound i

Scale

rb rb

Vehicle# 5306

Ditting # WWW.W.37 Gen EPA ID NR

Container

Driver

Check#

Operator

58200 1b Gross 27500 lb Tare 30700 16 Net 15.35 Tons

Comments

LDX Oty | UOM Rate EN Tax

Amount

Origin

Product

COAL ASH & COAL CO 100 15.35 Tons

PORTW

Total Tax fotal flicket



### WWW. NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |   |                    | 2.0                                     |                                 |                  |            | -  |
|---|---|--------------------|---|---------------------------------|------------------|------------|--|
| NON-HAZARDOUS MANIFEST  1. Generator's  | N / A   | nifest Doc No.     | 2. Page 1 of                            |                                 |                  | 25         | _  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | Generator's Site Address (If di<br>GEORGIA POWER PLAN |                    |   | st Number                       | 6677732          |            |  |
| 241 RALPH MCGILL BLVD NE, BIN#10221<br>ATLANTA, GA 30308-3374   | 155 CROSSGATE RD. PORT WENTWORTH, GA                  | A 31407            | 17 17                                   | B. State                        | Generator's ID   |            |  |
| 4. Generator's Phone 404-506-1365 5. Transporter 1 Company Name   | 6. US EPA ID  | Number             |   |                                 |                  |            |  |
| (mastal Gradin  | Q   |                    |   | ransporter's I<br>orter's Phone |                  |            |  |
| 7. Transporter 2 Company Name   | 8. US EPA II  | ) Number           | 100000000000000000000000000000000000000 | ransporter's I                  |                  |            |  |
| 9. Designated Facility Name and Site Address  | 10. US EPA  | ID Number          | F. Transp                               | orter's Phone                   |                  |            |  |
| SUPERIOR LANDFILL   |   |                    |   | Facility ID                     | 242.02           | 7 6442     |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |   |                    | H. State                                | Facility Phone                  | 912-92           | /-6113     |  |
| Savaillali, GA 31419  |   | 12. Containers     | 13. Total                               | 14. Unit                        |                  |            |  |
| 11. Description of Waste Materials  |   |                    | ype Quantity                            | Wt./Vol.                        | I. Misc          | . Comments |  |
| a. COAL ASH& COAL CONTAMINATED WAS  | TE F  | 206 E              | T 18                                    |                                 |                  |            | Maria da Santa da Sa |
| WM Profile # 375200G  | AKRA  |                    |   |                                 |                  |            |  |
| b.  |   |                    |   |                                 |                  |            |  |
| WM Profile #  |   |                    |   |                                 |                  | ji         |  |
| C.  |   |                    |   |                                 |                  |            |  |
| WM Profile #  |   |                    |   |                                 |                  |            |  |
| d.  |   |                    |   |                                 |                  |            |  |
| WM Profile #  |   | K. Disposal Lo     | cation                                  |                                 |                  |            |  |
| J. Additional Descriptions for Materials Listed About   | ve  | Cell<br>Grid       | NSW                                     | 174                             | Level 🗘          | 5          |  |
| 15. Special Handling Instructions and Additional Info   | rmation   | Sile               | 100                                     | 1136                            |                  | 4          |  |
| Purchase Order # GPC10760293  | EMERGENCY CO  | ONTACT / PHONE     | NO.:                                    |                                 |                  |            |  |
| 16. GENERATOR'S CERTIFICATE:  |   | and by CER Root 2  | 161 or any applica                      | hle state law                   | have been full   | v and      |  |
| I hereby certify that the above-described materials a<br>accurately described, classified and packaged and ar   | e in proper condition for transp                      | ortation according | g to applicable re                      | gulations.                      | Month            | Day        | Year   |
| Printed Name  B + 11 poulch   | Signature "On beh                                     | alf of"            |   |                                 | 5                | 2          | 18   |
| 17. Transporter 1 Acknowledgement of Receipt of N   | Materials   | 1/- 1              | (1)                                     |                                 | Month            | Day        | Year   |
| Printed Name.   | Signature   | free               | Jajn                                    | l_                              | 15               | 2          | 18   |
| 18. Transporter 2 Acknowledgement of Receipt of Printed Name  | Materials Signature                                   |                    | 1                                       | 30                              | Month            | Day        | Yea  |
| Filited ivalue  | 1   |                    |   |                                 |                  |            |  |
| 19. Certificate of Final Treatment/Disposal   |   | uladga tha shawa   | -described wasto                        | was manage                      | ed in compliance | e with all |  |
| I certify, on behalf of the above listed treatment fac<br>applicable laws, regulations, permits and licenses of | n the dates listed above.                             |                    |   | was manage                      |                  |            |  |
| 20. Facility Owner or Operator: Certification of rec  | eipt of non-hazardous materials<br>Signature          | covered by this n  | nanifest.                               |                                 | Month            | Day        | Yea  |
| Printed Name  | Signature   |                    | ~                                       |                                 | 2                | let        | 18   |
| White-TREATMENT, STORAGE, DISPOSAL FACILITY   | COPY Blue- GENERATO                                   | OR #2 COPY         | THE TOTAL                               | Yellow- GENE                    | RATOR #1 CO      | γ          |  |

Pink- FACILITY USE ONLY



Original Ticket# 1250463

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier Ticket Date 05/02/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

State Waste Code

6677733 Manifest Destination

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/02/2018 13:23:25 Out 05/02/2018 13:23:25

Inbound 1

Operator

Vehicle# L07

Container

Bitting #

Gen EPA ID NR

MMH 10.37

Driver

Check#

Volume

Gross Tare Net

Tons

55400 lb 25240 lb 30160 lb

15.08

Comments

#### MANAGEMENT

Amount Origin LD% . Dty Tax Product PORTW COAL ASH & COA' CO 100

Total Tax febal floket



|   | 1. Generator's US EPA  | A ID No.                    |  |                  |  |                      |                   |        |  |  |
|---|--|-----------------------------|--|------------------|--|----------------------|-------------------|--------|--|--|
| NON-HAZARDOUS MANIFEST  |  |                             | anifest Doc  | No.              | 2. Page 1  | . of                 | 111.              | 1      |  |  |
|   | N /  |                             | 160  |                  |  |                      | 11                | 3      |  |  |
| 3. Generator's Mailing Address:   | and the second s | erator's Site Address (If d |  | nailing):        | A. Manife  | est Number           |                   |        |  |  |
| GEORGIA POWER   |  | ORGIA POWER PLAN            | T KRAFT  |                  | W  | /MNA                 | 6677733           |        |  |  |
| 241 RALPH MCGILL BLVD NE, B   | 1000000  | CROSSGATE RD.               |  |                  |  | B. State             | Generator's ID    |        |  |  |
| ATLANTA, GA 30308-3374  |  | RT WENTWORTH, G             | 4 31407  |                  |  |                      |                   |        |  |  |
| 4. Generator's Phone 404-50   | 6-1365   |                             |  | [ L              |  |                      |                   |        |  |  |
| 5/ Transporter 1 Company Name   | 1.   | 6. US EPA II                | Number   |                  |  |                      |                   |        |  |  |
| 11,00010110   | adina  |                             |  |                  | C. State Transporter's ID  |                      |                   |        |  |  |
| 7. Transporter 2 Company Name   | 901119   | 8. US EPA II                | Number   |                  | D. Transporter's Phone  E. State Transporter's ID  |                      |                   |        |  |  |
|   |  |                             | riumbei  |                  |  |                      |                   |        |  |  |
|   |  | 1-181                       |  |                  | A STATE OF THE STA | orter's Phone        |                   |        |  |  |
| 9. Designated Facility Name and Site A  | ddress   | 10. US EPA                  | D Number   |                  |  |                      |                   |        |  |  |
| SUPERIOR LANDFILL   |  |                             |  |                  | G. State I   | acility ID           |                   |        |  |  |
| 3001 LITTLE NECK ROAD   |  |                             |  |                  | H. State I   | acility Phone        | 912-927-          | 6113   |  |  |
| Savannah, GA 31419  |  |                             |  |                  | , Far Oliven   | i Salikum            |                   |        |  |  |
|   | *  |                             | 12.0   | ntoines-         |  |                      |                   |        |  |  |
| G 11. Description of Waste Materials  |  |                             | No.  | ntainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol. | I. Misc. Co       | mments |  |  |
| a. COAL ASH& COAL CONTAMIN  | NATED WASTE  | 1                           |  | 7-               | 17   | 5                    |                   |        |  |  |
| E   |  | T.                          | 101  | DI               | 1 6  |                      |                   |        |  |  |
|   | 375200GAKRA  | 0                           | U  |                  |  |                      |                   |        |  |  |
| <b>д b</b> .  |  |                             |  |                  |  |                      |                   |        |  |  |
| T   |  |                             |  |                  |  | 100                  |                   |        |  |  |
| O WN  | Л Profile #  |                             |  |                  |  |                      |                   |        |  |  |
| C.  |  | Francisco Pyri              |  |                  |  |                      | The second second |        |  |  |
| *   |  |                             |  |                  |  |                      |                   |        |  |  |
|   | / Profile #  |                             | 1000   |                  |  |                      |                   |        |  |  |
| d.  |  |                             |  |                  |  |                      |                   |        |  |  |
|   |  |                             |  |                  | 1 ,  |                      | +                 |        |  |  |
|   | /I Profile #   |                             |  |                  |  |                      |                   |        |  |  |
| J. Additional Descriptions for Materia  | Is Listed Above  |                             | K. Dispos  | al Location      | 1 1  | - 1 7                |                   | 1 4    |  |  |
|   |  |                             | Cell   |                  | AK   | 10114                | Level             | 0      |  |  |
| 4.04  |  |                             | Grid   |                  | 100  | 110                  | Level             |        |  |  |
| 15. Special Handling Instructions and A   | dditional Information  |                             | 1.00/10/00   | 1                | N  | 1660                 | -                 |        |  |  |
|   |  |                             |  | (                | / 0  |                      |                   |        |  |  |
|   |  |                             |  |                  |  |                      |                   |        |  |  |
| Purchase Order # GPC10760293  |  | EMERGENCY CON               | NTACT / PH   | ONE NO.:         | 9.01   |                      |                   |        |  |  |
| 16. GENERATOR'S CERTIFICATE:  | THE RESERVE  |                             |  |                  | 7 55   |                      |                   |        |  |  |
| I hereby certify that the above-describe  | d materials are not ha   | zardous wastes as define    | ed by CFR P  | art 261 or a     | ny applicabl   | e state law, ha      | ave been fully an | d      |  |  |
| accurately described, classified and pac  | kaged and are in prope   | er condition for transpor   | tation acco  | rding to app     | olicable regu  | lations.             |                   |        |  |  |
| Printed Name  |  | Signature "On behal         | f of"  |                  |  |                      | Month Da          | y Year |  |  |
| 17. Transporter 1 Acknowledgement of  | f Possint of Material  | 0                           | and the same of th |                  |  |                      | 0                 | 1/1/   |  |  |
| Printed Name  | Receipt of iviaterials   | Constur                     | 7-3-   | A                |  |                      |                   |        |  |  |
| VIIIIed Name  |  | Signature                   | (0   | N                | 7.15   |                      | Month Da          | y Year |  |  |
| 18. Transporter 2 Acknowledgement of  | f Receipt of Materials   | 1                           | , 0  |                  | 9  |                      | 100               | 1 0    |  |  |
| Printed Name  |  | Signature                   |  | -                |  |                      | Month Da          | Wass   |  |  |
|   |  | Signature                   |  |                  |  |                      | Month Da          | y Year |  |  |
|   |  | 4.5                         |  |                  |  |                      |                   |        |  |  |
| 19. Certificate of Final Treatment/Dispo  |  | W 8 2                       |  |                  |  |                      |                   |        |  |  |
| I certify, on behalf of the above listed tr                                       | eatment facility, that t   | to the best of my knowle    | dge, the ab  | ove-describ      | ed waste w   | as managed in        | n compliance wit  | h all  |  |  |
| applicable laws, regulations, permits an 20. Facility Owner or Operator: Certific |  |                             | wored bud  | to market        |  |                      |                   |        |  |  |
| Printed Name  | audit of receipt of nor  |                             | vered by tr  | iis manitest     | •  |                      | ( h               | Tax    |  |  |
| THICCO IVAILE   | TNI  | Signature                   | -11  | -                | -  |                      | Month Da          | y Year |  |  |
| White- TREATMENT, STORAGE, DISPOSA  | AN EACHTY CORY   | Rive CENTRATOR              | ta cons  |                  |  | llow CENERA          | TOP #1 COPY       | 10     |  |  |
| VVIIILE- INLATIVILINT, STURAGE, DISPUSA   | METACILITI CUPT  | Blue- GENERATOR #           | tz CUPY  |                  | Ye   | llow- GENERA         | TOK #T COSA       |        |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1250445

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 05/02/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677734

Destination

PO

Profile

375200GAKRA (CDAL ASH & CDAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/02/2018 12:56:57

Out 05/02/2018 12:56:57

Scale Inbound 1

Operator rb rb

Vehicle# 5307

0001037

Container

Billing #

Gen EPA ID NR

Driver

Check特

Gross Tare Net Tons

Volume

58240 lb 24080 lb 34160 lb 17.08

Comments

Product

LDX Qty DOM Rate Tax

Amount

Origin

COAL ASH & COAL CO 100

17.08 Tons

PORTW

Total Tax fab.it ficket



|                                 | NON-HAZARDOUS MANIFEST   | 1. Generator's US E  | PAID No. M  | anifest Doc No.              | 2. Page 1  | L of   | : 11                      | ~ Q      |
|---------------------------------|--|--|---|------------------------------|--|--|---------------------------|----------|
|                                 | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, E ATLANTA, GA 30308-3374 4. Generator's Phone 404-50   | Ge<br>GI<br>BIN#10221 15   | enerator's Site Address (If o<br>EORGIA POWER PLAN<br>55 CROSSGATE RD.<br>DRT WENTWORTH, G. | IT KRAFT                     | The state of the s | est Number  /MNA  B. State G                           | 6677734<br>Generator's ID |          |
|                                 | 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | rading   |   | O Number O Number            | D. Trans   | Fransporter's ID<br>porter's Phone<br>Fransporter's ID |                           |          |
|                                 | 9. Designated Facility Name and Site of<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | Address  | 10. US EPA  | ID Number                    | G. State   | Facility ID  | 912-927-6                 | 113      |
| G<br>E<br>N<br>E<br>R           | 11. Description of Waste Materials  a. COAL ASH& COAL CONTAMI  WM Profile #  | NATED WASTE  375200GAKRA   | 5   | 12. Containers No. Ty        | pe 13. Total Quantity  | 14. Unit<br>Wt./Vol.                                   | I. Misc. Con              | iments   |
| A<br>T<br>O<br>R                | b.   | M Profile #  |   |                              |  |  |                           |          |
|                                 | d.   | M Profile #  |   |                              |  |  |                           |          |
|                                 | 15. Special Handling Instructions and A  |  | n   | K. Disposal Loca  Cell  Grid | NSW.   | 177  | Level Level               |          |
|                                 | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-describe   | ed materials are not l   | hazardous wastes as define  | NTACT / PHONE NO             | l or any applicabl   | e state law, hav                                       | re been fully and         |          |
|                                 | accurately described, classified and pace Printed Name B   |  | Signature On behal  |                              | o applicable regu  | lations.   | Month Day                 | Year     |
| R<br>T<br>E<br>R                | <ol> <li>Transporter 2 Acknowledgement of Printed Name</li> <li>Certificate of Final Treatment/Disp</li> </ol>   |  | Signature   |                              |  |  | Month Day                 | Year     |
| F<br>A<br>C<br>I<br>I<br>T<br>Y | I certify, on behalf of the above listed to<br>applicable laws, regulations, permits ar<br>20. Facility Owner or Operator: Certifi<br>Printed Name<br>White-TREATMENT, STORAGE, DISPOS | reatment facility, tha<br>nd licenses on the dat<br>cation of receipt of n | tes listed above. on-hazardous materials co Signature                                       | vered by this man            | ifest.   |  | Month Day                 | all Year |
|                                 | Pink- FACILITY USE ONL   |  | Blue- GENERATOR # Gold- TRANSPORTER   |                              | Ye   | llow- GENERAT  | OK #IT COPA               |          |

AGEMENT

Superior Landfill 3001 Little Neck Rd Savannah, GA, 31419 Original Ticket# 1250690

Comer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING cket Date 05/03/2018 ayment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

6677735 Manifest

Destination

PO

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Profile

Generator

Time

In 05/03/2018 10:14:36 Out 05/03/2018 10:14:36

Scale Inbound 1 Operator

Driver Check#

Billing # 0001037

Gen EPA ID NR

Gross Tare Net Tons

54100 lb 26660 lb 27440 lb 13.72

Comments

WASTE MANAGEMENT Rate UDM Qty LD% Product

Amount

Origin PORTW

COAL ASH & COAL CO 100

13.72 Tons

Total Tax

fabal floket

Dell Mux



| 10.3   | WASIEWAWAGEWEN  |                            |  | 200                | 11 March 11 | 10.72               | Attention of the second | Action was   | Mrs.       |   |
|--------|---|----------------------------|--|--------------------|---|---------------------|-------------------------|--------------|------------|---|
| *      | NON-HAZARDOUS MANIFEST  1. Generator's US EPA ID No.  N / A  Manifest Doc No.   |                            |  |                    |   | Page 1              | of                      |              | 9/3        | 20                                      |
|        | 3. Generator's Mailing Address:<br>GEORGIA POWER                                |                            | nerator's Site Address (If a<br>ORGIA POWER PLAN |                    | g): A.  |                     | st Number               | 6677         | 735        | J~                                      |
|        | 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                             |                            | 5 CROSSGATE RD.<br>RT WENTWORTH, G.              | A 31407            |   |                     | Total a Van de          | Generator's  | ID         |   |
| V      | 4. Generator's Phone 404-5  | 06-1365                    |  |                    |   |                     |                         |              |            |   |
|        | 5-Transporter 1 Company Name  | redina                     | 6. US EPA II                                     | ) Number           |   |                     | ransporter's I          |              |            | o 39 Saul                               |
|        | 7. Transporter 2 Company Name   | 1 1 1 1                    | 8. US EPA II                                     | ) Number           | E.  | State Tr            | ansporter's II          |              |            |   |
|        | 9. Designated Facility Name and Site SUPERIOR LANDFILL                          | Address                    | 10. US EPA                                       | ID Number          |   |                     | orter's Phone           |              |            |   |
|        | 3001 LITTLE NECK ROAD   |                            |  |                    |   |                     |                         | 012.0        | 27-611     | 2                                       |
|        | Savannah, GA 31419  |                            |  |                    |   | State F             | acility Phone           | 312-3        | 27-011     | 3                                       |
| G      | 11. Description of Waste Materials  |                            |  | 12. Contain<br>No. |   | 3. Total<br>uantity | 14. Unit<br>Wt./Vol.    | I. Mi        | sc. Commer | nts                                     |
| E      | a. COAL ASH& COAL CONTAIN   | IINATED WASTE              |  |                    | , ,   | 7                   |                         |              |            |   |
| N<br>E |   |                            |  | 1111               | MI  | 8                   |                         |              |            |   |
| R      | WM Profile  | # 375200GAKRA              |  | DV -               | 711.  |                     | Edinius de Car          |              |            |   |
| A      | <b>b.</b> ,   |                            |  |                    |   |                     |                         |              |            |   |
| T      | -get  |                            |  |                    |   |                     |                         | 1.57         |            |   |
| O<br>R | v   | VM Profile #               | *  |                    |   |                     |                         |              |            |   |
| -      | c.  |                            |  |                    |   |                     |                         |              |            |   |
| Ų      |   |                            |  |                    |   |                     |                         |              |            | *************************************** |
|        |   | VM Profile #               |  |                    |   |                     | 0.000                   |              |            |   |
|        | d.  | VM Profile #               |  |                    |   |                     |                         |              |            |   |
| 734    | J. Additional Descriptions for Mate   | rials Listed Above         |  | K. Disposal L      | ocation   |                     |                         |              |            |   |
|        |   |                            |  | Cell               | N   | lole                | 15                      | Level        | 5          |   |
|        | 15. Special Handling Instructions and   | d Additional Informatio    | n  |                    | M   | ) 1                 | () C                    |              |            | Ã.                                      |
|        | Purchase Order # GPC1076029   | 93                         | EMERGENCY CO                                     | NTACT / PHONI      | E NO.:  |                     |                         |              |            |   |
|        | 16. GENERATOR'S CERTIFICATE:  |                            | 3 7  |                    |   |                     |                         | 1            |            |   |
|        | I hereby certify that the above-descr<br>accurately described, classified and p |                            |  |                    |   |                     |                         | ave been ful | ly and     |   |
|        | Printed Name  |                            | Signature "On beha                               | lf of"             |   |                     |                         | Month        | Day        | Year                                    |
|        | 13 tilipovich   |                            | BK   |                    |   |                     |                         | 0            | 5          | 10                                      |
| T<br>R | 17. Transporter 1 Acknowledgemen  | t of Receipt of Material   |  |                    |   |                     |                         |              | 200        | 1                                       |
| A      | Printed Name  |                            | Signature  | 11                 |   |                     |                         | Month        | Day        | Year /                                  |
| S      | Y DEIL MUCLA  | V                          | A Colle  | 1010               |   |                     |                         | -0           | 5          | 10                                      |
| O<br>R | 18. Transporter 2 Acknowledgemen  | t or Receipt of Material   |  | 1                  |   |                     |                         | Month        | Day        | Year                                    |
| TE     | Printed Name  |                            | Signature  | ~                  |   |                     |                         | WORLD        | Day        | ieai                                    |
| R      | Darley Harten   | THE TEN                    |  |                    |   |                     |                         | ALT Y        |            |   |
|        | 19. Certificate of Final Treatment/D  |                            |  |                    |   |                     |                         |              |            |   |
| FACI   | I certify, on behalf of the above lister applicable laws, regulations, permits  |                            |  | edge, the abov     | e-described v   | waste w             | vas managed             | in compliand | e with al  | 1.                                      |
| L      | 20. Facility Owner or Operator: Cer   | tification of receipt of n | non-hazardous materials o                        | overed by this     | manifest.   |                     |                         |              |            |   |
| T      | Printed Name  |                            | Signature  | 1                  | /   |                     |                         | Month        | Day        | Year                                    |
|        |   | MAN                        |  |                    |   |                     | 1 3 2                   | )            | )          | 10                                      |
| Ī      | White-TREATMENT, STORAGE, DISP  | OSAL FACILITY COPY         | Blue- GENERATOR                                  | #2 COPY            |   | Υe                  | ellow- GENER            | ATOR #1 CO   | Рү         |   |
|        | Pink- FACILITY USE O  | ONLY V                     | Gold- TRANSPORTE                                 | R #1 COPY          |   |                     |                         |              |            |   |



Original Ticket# 1250692

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Vehicle# j10

Ticket Date 05/03/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677736

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/03/2018 10:18:27

Out 05/03/2018 10:18:27

Scale Inbound 1

Operator RH

Gross 53700 15 Tare ' 20720 16 Net

Volume

32980 15 Tons 16.49

Comments

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Product

LD%

Qty

MOL

Rate

Tax

Amount

Origin

1 COAL ASH & COAL CO 100

16.49 Tons

PORTW

Josh 7 Str

Total Tax fobal ficket



| NON-HAZARDOUS MANIFEST  | 1. Generator's US EP.<br>N / |   | Manifest Doc  | No.          | 2. Page 1  | of                               | 9           | ).33           |
|---|------------------------------|---|---------------|--------------|--|----------------------------------|-------------|----------------|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BII   | GEO                          | nerator's Site Address (n<br>ORGIA POWER PLA<br>5 CROSSGATE RD. |               | nailing):    | Service 210 (2007), 190                          | est Number                       | 667         | 7736           |
| ATLANTA, GA 30308-3374 4. Generator's Phone 404-506   | POI                          | RT WENTWORTH,   | GA 31407      |              |  | B. State 0                       | Generator's | ilD            |
| 5. fransporter 1 Company Name  7. Transporter 2 Company Name  | ading                        |   | ID Number     |              | C. State Transporter's ID D. Transporter's Phone |                                  |             |                |
| 9. Designated Facility Name and Site Ad   |                              |   | ID Number     |              |  | ransporter's IC<br>orter's Phone |             |                |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  | uuress                       | 10. US EP/  | ID Number     |              | G. State I                                       | acility ID                       | 912-9       | 927-6113       |
| Savannah, GA 31419  |                              |   |               |              |  |                                  |             |                |
| 11. Description of Waste Materials  | PROCESS VALUE OF STREET      |   | No.           | Type         | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.             | 1. N        | Aisc. Comments |
| a. COAL ASH& COAL CONTAMIN  |                              |   | 510           | 27           | 18   |                                  |             |                |
| b. WM Profile #   | 375200GAKRA                  |   |               |              | Establiques es                                   |                                  |             |                |
| c. WM   | Profile #                    |   |               |              |  |                                  |             |                |
| WM  | Profile #                    |   |               | 11244917     |  |                                  |             |                |
| d.  |                              |   |               |              |  |                                  |             |                |
| J. Additional Descriptions for Material   | Profile #<br>s Listed Above  |   | K. Dispos     | al Location  |  | 26                               |             |                |
|   |                              |   | Cell<br>Grid  | - 1          | 1370   | 17                               | Level       | 67             |
| 15. Special Handling Instructions and Ac  | dditional Information        |   |               | C            | 2571   | 132                              |             |                |
| Purchase Order # GPC10760293  | T.Au                         | EMERGENCY CO  | ONTACT / PH   | ONE NO.:     |  |                                  |             | VE STORY       |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described accurately described, classified and pack                     | d materials are not ha       | azardous wastes as defi   | ned by CFR P  | art 261 or a | any applicabl                                    | e state law, ha                  | ve been fu  | lly and        |
| Printed Name 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |                              | Signature "On beh   |               | A            | pricubic regu                                    | iduloris.                        | Month 5     | Day Year       |
| Printed Name SHAR   |                              | Signature   | 7/            |              |  |                                  | Month       | Day Year       |
| 18. Transporter 2 Acknowledgement of<br>Printed Name  | Receipt of Materials         | Signature   |               |              |  |                                  | Month       | Day Year       |
| 19. Certificate of Final Treatment/Dispo<br>I certify, on behalf of the above listed tre<br>applicable laws, regulations, permits and | eatment facility, that       | to the best of my know<br>es listed above.                      | ledge, the ak | ove-descril  | bed waste w                                      | as managed in                    | complian    | ce with all    |
| 20. Facility Owner or Operator: Certifica   |                              | n-hazardous materials   | covered by th | nis manifest | i.   |                                  |             |                |
| Printed Name  White-TREATMENT, STORAGE, DISPOSA   | L FACILITY COPY              | Signature  Blue- GENERATOR                                      | 1 #3 CODY     |              | Vo   | llow- GENERAT                    | Month COL   | (bay / Year)   |

Pink- FACILITY USE ONLY



Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Ticket Date 05/03/2018 Vehicle# JØ1 Volume Payment Type Credit Account Container Manual Ticket# Driver Hauling Ticket# Check# Billing # Route 0001037 State Waste Code Gen EPA ID NR

Manifest 6677737 Destination

PO .

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time Scale Openator Gross 05/03/2018 10:32:43 Inbound 1 RB Tare Dut 05/03/2018 10:32:43 RB Net Tons Comments

LD% / Oty E DOM A Rate EM ETax Product Amount Origin

COAL ASH & COAL CO 100

14.93 Tons

PORTW

53200 1b

23340 lb

29860 1b

14.93

Total Tax Intal finket



| NON-HAZARDOUS MANIFEST                                       | 1. Generator's US EF                    |  | Manifest Doc N     | No.         | 2. Page 1             | of                               | 0.00   |            |
|--|---|--|--------------------|-------------|-----------------------|----------------------------------|--|------------|
| 3. Generator's Mailing Address:                              | N /                                     |  |                    |             |                       |                                  | 7 39   | P          |
| GEORGIA POWER  |   | nerator's Site Addres<br>ORGIA POWER P |                    | ailing):    | A. Manife             | est Number                       | 6677737  |            |
| 241 RALPH MCGILL BLVD NE,                                    |   | 5 CROSSGATE RD                         |                    |             | W                     | MNA                              | 0077737  |            |
| ATLANTA, GA 30308-3374                                       |   | ORT WENTWORTH                          |                    |             |                       | B. State (                       | Generator's ID   |            |
|  | 06-1365                                 |  | i, GA 31407        |             |                       |                                  |  |            |
| 5. Transporter 1 Company Name                                | FloresTr                                | 6. US E                                | PA ID Number       |             |                       |                                  |  |            |
| 1/2001-1/1   | Linksu                                  | UKIN                                   |                    |             | C. State T            | ransporter's IE                  |  |            |
| LUDIGIO  | rading                                  |  |                    |             |                       | orter's Phone                    |  |            |
| 7. Transporter 2 Company Name                                |   | 8. US E                                | PA ID Number       |             |                       |                                  |  |            |
|  | 0                                       |  |                    |             |                       | ransporter's IE<br>orter's Phone |  |            |
| 9. Designated Facility Name and Site                         | Address                                 | 10. US                                 | EPA ID Number      |             | T. Transp             | STEET ST HOHE                    |  |            |
| SUPERIOR LANDFILL  |   |  |                    |             | G. State F            | acility ID                       |  | 1002000000 |
| 3001 LITTLE NECK ROAD  |   |  |                    |             | H. State F            | acility Phone                    | 912-927-6113   |            |
| Savannah, GA 31419   |   |  |                    |             |                       |                                  |  |            |
|  |   |  | 12.6-              |             |                       |                                  |  |            |
| 11. Description of Waste Materials                           |   |  | 12. Con<br>No.     | Type        | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | I. Misc. Comments  |            |
| a. COAL ASH& COAL CONTAM                                     | INATED WASTE                            |  |                    | * -         | 15                    |                                  |  |            |
|  |   |  | -10                | 121         | 18                    | 14                               |  |            |
| b. WM Profile  | # 375200GAKRA                           |  |                    |             |                       |                                  |  |            |
| <b>b</b> .   |   |  |                    |             |                       |                                  |  |            |
|  |   |  |                    |             | hay                   |                                  |  | t-         |
| c. W   | /M Profile #                            |  |                    |             |                       |                                  |  |            |
| C.   |   | Sa <sub>ke</sub>                       |                    |             | , ,                   |                                  |  |            |
| w  | /M Profile #                            |  |                    |             | SUMMER AND A STREET   |                                  |  |            |
| d.   |   | **                                     |                    |             |                       |                                  |  |            |
|  |   |  |                    |             |                       |                                  |  |            |
| W  | /M Profile #                            |  |                    |             | E. S.                 |                                  |  |            |
| J. Additional Descriptions for Mater                         | ials Listed Above                       |  | K. Disposa         | al Location |                       |                                  |  |            |
|  |   |  | 0.11               | 1.4         | 173                   | 177                              | -65  |            |
|  |   |  | Cell<br>Grid       | - 1         | 1)0                   |                                  | Level  |            |
| 15. Special Handling Instructions and                        | Additional Information                  | n                                      | Grid               |             | 1 &                   | 1,0                              |  |            |
| 100  |   |  |                    |             | 001                   | 1011                             |  |            |
|  | ALC: NO                                 |  |                    |             |                       |                                  |  |            |
| Purchase Order # GPC1076029                                  | 3                                       | EMERGENCY                              | CONTACT / PHO      | NE NO.:     |                       |                                  | The state of the s |            |
| 16. GENERATOR'S CERTIFICATE:                                 |   |  |                    | 700         |                       |                                  | The same of  |            |
| I hereby certify that the above-describ                      | ped materials are not h                 | nazardous wastes as o                  | lefined by CFR Pa  | rt 261 or a | ny applicable         | e state law, ha                  | ve been fully and  |            |
| accurately described, classified and parents of Printed Name | аскаged and are in pro                  |  |                    | ding to app | olicable regu         | lations.                         | I Maria I a I  |            |
| BFILIPOVICE  |   | Signature On b                         | CHAIL OF           |             |                       |                                  | Month Day  | Year       |
| 17. Transporter 1 Acknowledgement                            | of Receipt of Materials                 | 5                                      |                    | 1           |                       | 11                               |  | 1 8        |
| Printed Name   | No. 11                                  | Signature                              | /                  | 15          | (                     | 1                                | Month Day  | Year       |
| mang of  | aus                                     | 1                                      | et                 | 1           | Burk                  |                                  | 57   | 14         |
| 18. Transporter 2 Acknowledgement                            | of Receipt of Materials                 |  |                    |             |                       |                                  | - 41   | Û          |
| Printed Name   |   | Signature                              |                    | V           |                       |                                  | Month Day  | Year       |
| Land Garage Control  |   |  |                    |             |                       |                                  |  |            |
| 19. Certificate of Final Treatment/Dis                       | • |  |                    |             |                       |                                  |  |            |
| I certify, on behalf of the above listed                     | treatment facility, that                | t to the best of my kn                 | owledge, the abo   | ove-describ | ed waste w            | as managed in                    | compliance with all  |            |
| applicable laws, regulations, permits a                      | and licenses on the dat                 | es listed above.                       |                    |             |                       |                                  |  |            |
| 20. Facility Owner or Operator: Certi                        | lication of receipt of no               |  | als covered by thi | s manifest  |                       |                                  | 1  |            |
| Printed Name   | 1                                       | Signature                              | 1                  |             |                       |                                  | Month Day  | Year       |
| White- TREATMENT, STORAGE, DISPO                             | ISAL FACILITY CORV                      | Blue- GENERAT                          | FOR #3 CORY        |             | V-                    | low- GENERAT                     | OP #1 CODY /   |            |
| Pink- FACILITY USE ON  |   | Gold- TRANSPO                          |                    |             | ie                    | IOW- GENERAL                     | OK #1 COPT   |            |



Original Ticket# 1250737

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/03/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Manifest

6677738

Destination,

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

05/03/2018 11:08:47

FOut 05/03/2018 11:08:47

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale

Inbound 1

Querator

Gross Tare

Volume

55740 16 23800 16 31949 1b

Net Tons 15.97

Comments

#### WASTE MANAGEMENT

Vehicle# J04

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

| Prod | act Training   | LD%      | Qty   | UOM  | Rate | Tax                           | Amount  | Origin |
|------|----------------|----------|-------|------|------|-------------------------------|---|--------|
| 1    | COAL ASH & COA | L CO 100 | 15.97 | Tons |      | <br>n mn den som den lese dan | The Control of the State and the Control of the State and the | PORTW  |

Total Tax Intal Fictiont



## WASTEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA                                     |                                     | Manifest Doc N       | 0.               | 2. Page 1 o  | of                   | 12.7   | D          |        |  |  |  |
|---|---|-------------------------------------|----------------------|------------------|--|----------------------|--|------------|--------|--|--|--|
| 3. Generator's Mailing Address:   |   | rator's Site Addres<br>RGIA POWER P |                      | iling):          | A. Manifes   |                      | 66777  | 738        |        |  |  |  |
| GEORGIA POWER  241 RALPH MCGILL BLVD NE,  ATLANTA, GA 30308-3374  4. Generator's Phone 404-5                    | BIN#10221 155   | CROSSGATE RE                        |                      |                  | WI   | MNA<br>B. State (    | <br>Generator's II   | )          |        |  |  |  |
| 5. Transporter 1 Company Name 7. Transporter 2 Company Name   | freding   |                                     | PA ID Number         |                  | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID |                      |  |            |        |  |  |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419        | e Address   | 10. US                              | 10. US EPA ID Number |                  |  |                      | F. Transporter's Phone  G. State Facility ID  H. State Facility Phone 912-927-6113 |            |        |  |  |  |
| G 11. Description of Waste Materials  |   |                                     | 12. Cor              | ntainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol. | I. Mis   | c. Comment | ts     |  |  |  |
| a. COAL ASH& COAL CONTAN  |   |                                     | -KA4                 | D1               | 18   |                      |  |            |        |  |  |  |
| R WM Profile  | wm Profile #  |                                     |                      |                  |  |                      |  |            |        |  |  |  |
| c.  |   |                                     |                      |                  |  |                      |  | Internal   |        |  |  |  |
| d.  | WM Profile #  |                                     |                      |                  |  |                      |  |            |        |  |  |  |
|   | WM Profile #  |                                     | The second second    |                  |  |                      |  |            |        |  |  |  |
| J. Additional Descriptions for Mate   | erials Listed Above                                       |                                     | Cell Grid            | Sal Location     | 129  | 1 WB1                | Leviel 3   | 2          |        |  |  |  |
| 15. Special Handling Instructions an  | nd Additional Information                                 |                                     |                      |                  |  |                      | Eli  | 5-6-       | 1      |  |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc                   | ribed materials are not h                                 | azardous wastes a                   | CY CONTACT / PH      | Part 261 or      | any applicab   | le state law, I      | nave been ful  | ly and     |        |  |  |  |
| accurately described, classified and Printed Name  1 17. Transporter 1 Acknowledgement                          | packaged and are in prop                                  | Signature "Or                       | ansportation acco    | ording to a      | pplicable reg  | ulations.            | Month  | Day        | Year   |  |  |  |
| Printed Name  | Young   | Signature                           | Kule                 | 9                | eng  | 3                    | Month 5  | Day 3      | Year / |  |  |  |
| P 18. Transporter 2 Acknowledgeme   | nt of Receipt of Materials                                | Signature                           | V V                  | O.               |  |                      | Month  | Day        | Year   |  |  |  |
| 19. Certificate of Final Treatment/I I certify, on behalf of the above list applicable laws, regulations, permi | ed treatment facility, that<br>ts and licenses on the dat | es listed above.                    |                      |                  |  | was managed          | l in complian  | ce with al | Ĺ      |  |  |  |
| 20. Facility Owner or Operator: Ce Printed Name  White- TREATMENT, STORAGE, DIS                                 | 123   | Signature                           | RATOR #2 COPY        | .nis manife      |  | ellow- GENER         | Month O  | Day<br>3   | /Year  |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1250763

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/03/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Manifest 6677739

Destination

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/03/2018 12:05:25

Out 05/03/2018 12:05:25

Scale

Inbound 1

rb

מיץ WASTE MANAGEMENT Gross Tare

Volume

53680 lb 25980 lb

Net Tons

27700 1b 13, 65

Comments

Product 

LD% Qty

UDM Rate Tax

Vehicle# C26

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

Amount

Origin

PORTW

1 COAL ASH & COAL CO 100 13.85 Tons

Total Tax Pakat Plaket



## WWW. NON-HAZARDOUS MANIFEST

|        | WASTE MANAGEMENT   |                             |   | - 4/4/6/     |                   |                          | The second second  | 34.5   |           |             |  |
|--------|--|-----------------------------|---|--------------|-------------------|--------------------------|--|--|-----------|-------------|--|
|        | NON-HAZARDOUS MANIFEST 1.  | Generator's US EPA<br>N / A |   | ifest Doc N  | 0.                | 2. Page 1 c              | of   | 11.  | 15        | -           |  |
|        | 3. Generator's Mailing Address:<br>GEORGIA POWER                                   | GEO                         | rator's Site Address (If diff<br>RGIA POWER PLANT |              | iling):           | A. Manifes               | t Number   | 66777  | 39        |             |  |
|        | 241 RALPH MCGILL BLVD NE, BIN ATLANTA, GA 30308-3374 4. Generator's Phone 404-506- | POR                         | 155 CROSSGATE RD.<br>PORT WENTWORTH, GA 31407     |              |                   |                          | B. State Generator's ID  |  |           |             |  |
| 1      | 5. Transporter 1 Company Name  |                             | 6. US EPA ID                                      | Number       |                   |                          |  |  |           |             |  |
|        | Pacalal Am   | 1100                        |   |              |                   |                          | ansporter's ID<br>orter's Phone  |  |           |             |  |
|        | 7. Transporter 2 Company Name  | amy                         | 8. US EPA ID                                      | Number       |                   | D. Hallspo               | orter 3 Priorie  |  |           |             |  |
|        |  |                             |   |              |                   | , House, to the case was | ansporter's ID   |  |           |             |  |
|        |  | •                           | 40 HC FDA II                                      | Nicosban     | -                 | F. Transpo               | orter's Phone  |  |           | RANGEROODS! |  |
|        | 9. Designated Facility Name and Site Add<br>SUPERIOR LANDFILL                      | iress                       | 10. US EPA II                                     | Number       |                   | G. State Fa              | acility ID   |  |           |             |  |
|        | 3001 LITTLE NECK ROAD  |                             |   |              |                   |                          | acility Phone  | 912-92   | 7-6113    | 3           |  |
|        | Savannah, GA 31419   |                             |   |              |                   |                          |  |  |           |             |  |
|        |  |                             |   |              |                   |                          |  |  |           |             |  |
| G      | 11. Description of Waste Materials   |                             |   | No.          | Type              | 13. Total<br>Quantity    | 14. Unit<br>Wt./Vol.   | I. Mis   | c. Commen | ts          |  |
| E      | a. COAL ASH& COAL CONTAMINA  | ATED WASTE                  | ,   | 2-1          | -                 | 15                       |  |  |           |             |  |
| N<br>E |  |                             |   | -26          | 7)                | 10                       |  |  |           |             |  |
| R      |  | 375200GAKRA                 |   | - 11         |                   |                          |  |  |           |             |  |
| A<br>T | b.   |                             |   |              |                   |                          |  | 1 5 Y  |           |             |  |
| o      | 14/84  | Profile #                   |   |              |                   |                          |  |  |           |             |  |
| R      | C.   | Prome #                     |   |              |                   |                          | DESCRIPTION OF THE PROPERTY OF | ACCOUNT OF THE PERSON NAMED OF THE PERSON NAME |           |             |  |
|        |  |                             |   |              |                   |                          |  |  |           |             |  |
|        | A STANSON  | Profile #                   |   |              |                   |                          |  |  |           |             |  |
|        | d.   |                             |   |              | 1000              | 1                        |  |  |           |             |  |
|        |  |                             |   |              |                   |                          |  |  |           |             |  |
|        | J. Additional Descriptions for Materials   | Profile #<br>Listed Above   |   | K. Dispos    | l<br>sal Location |                          | 7.   |  | 1         |             |  |
|        |  |                             |   |              | 11                | 1276                     | 11/9   | 1 2 2 2  | 0         |             |  |
| Ä      |  |                             |   | Cell<br>Grid | - 1               | 001.                     | 77   | Level  |           |             |  |
|        | 15. Special Handling Instructions and Ac   | ditional Information        |   |              |                   | SIL                      | ))   |  |           | 1           |  |
|        | 15. Special flanding field dead and Additional financials                          |                             |   |              |                   |                          |  |  |           |             |  |
|        |  |                             |   |              | To constant       |                          |  |  |           |             |  |
| 100    | Purchase Order # GPC10760293   |                             | EMERGENCY CON                                     | ITACT / PH   | ONE NO.:          |                          |  |  |           |             |  |
| -      | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described            |                             | devisionates as dofin                             | ad by CER E  | Part 261 or       | any annlicah             | le state law h   | eve heen full  | ly and    | × 1         |  |
|        | accurately described, classified and pack  | aged and are in pro         | per condition for transpor                        | tation acco  | ording to ap      | plicable regu            | ulations.  |  |           |             |  |
|        | Printed Name   |                             | Signature "On behal                               | f of"        |                   |                          |  | Month  | Day       | Year        |  |
|        | BFilipovich  | D                           | 77  |              |                   |                          |  | 15   | 3         | 1/0         |  |
| T<br>R | 17. Transporter 1 Acknowledgement of   | Receipt of Materials        | Signature   | 0            | 1                 |                          |  | Month  | Day       | Year        |  |
| A<br>N | Printed Name   |                             | 1 snee  | Con          |                   |                          |  | 5  | 3         | 17          |  |
| P      | 18. Transporter 2 Acknowledgement of   | Receipt of Materials        | , 17  | 1            |                   |                          |  |  |           | , ,         |  |
| R      | Printed Name   |                             | Signature   |              |                   |                          |  | Month  | Day       | Year        |  |
| E<br>R |  |                             |   |              |                   | عورا عجل                 |  |  |           |             |  |
| 6      | 19. Certificate of Final Treatment/Dispo   | sal                         |   |              |                   |                          |  |  |           |             |  |
| F      | I certify, on behalf of the above listed tr  | eatment facility, tha       | t to the best of my knowl                         | edge, the a  | bove-descr        | ibed waste \             | was managed i  | n complianc  | e with a  | l .         |  |
| 1      | applicable laws, regulations, permits an 20. Facility Owner or Operator: Certific  | a licenses on the dat       | on-hazardous materials o                          | overed by t  | this manife:      | st.                      |  |  |           | 1           |  |
| I      | Printed Name   | auon or receipt of fi       | Signature   |              |                   |                          | 11.77  | Month  | 5 Day     | Wear        |  |
| Y      |  | 1                           | 1   | 1            |                   |                          | T. 1 1-2   | 1  |           |             |  |
|        | MALIA- TREATMENT STORAGE DISPOS  | A EACHITY CORV              | Blue- GENERATOR                                   | #2 CORV      |                   | ٧                        | ellow- GENERA  | ATOR #1 COL  | Υ         |             |  |

Pink- FACILITY USE ONLY



Original Ticket# 1250759

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/03/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 5677740

Destination

PO V

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/03/2018 12:00:23 Out 05/03/2018 12:00:23

Scale Inbound 1

rb rb

Vehicle# J12

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Gross Tare

Volume

50280 lb 21520 lb

Net Tons

28760 1b 14.38

Comments

Origin Qty. UOM Rate Tax Amount LD% Product PORTW

James Shubert

WASTE MANAGEMENT

COAL ASH & COAL CO 100

14.38 Tons

Total Tax Inhal ficket



| WASTE MANAGEMENT  | Tale                     | DA ID No                          | N/0×                      | nifest Doc N |             | 2 Page 1   | of I             | 10. 30                  |            |                 |  |  |
|---|--------------------------|-----------------------------------|---------------------------|--------------|-------------|--|------------------|-------------------------|------------|-----------------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US E      | / A                               | Mar                       | nifest Doc N | 10.         | 2. Page 1  | OI .             | 11'10                   |            |                 |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                            | G                        | enerator's Site Ad<br>EORGIA POWE | ER PLANT                  |              | iling):     |  | st Number<br>MNA | 6677                    | 740        |                 |  |  |
| ATLANTA, GA 30308-3374  |                          |                                   |                           |              |             |  |                  | B. State Generator's ID |            |                 |  |  |
| 4. Generator's Phone 404-5 5. Fransporter 1 Company Name                    | 006-1365                 | 6. US EPA ID Number               |                           |              |             |  | Pane             |                         |            |                 |  |  |
| l'asta L'   | radina                   |                                   |                           |              |             | C. State Transporter's ID D. Transporter's Phone   |                  |                         |            |                 |  |  |
| 7. Transporter 2 Company Name   |                          | 8. US EPA ID Number               |                           |              |             |  | ransporter's ID  |                         |            |                 |  |  |
| 9. Designated Facility Name and Sit   | 10. US EPA/ID Number     |                                   |                           |              |             | orter's Phone  |                  |                         |            |                 |  |  |
| SUPERIOR LANDFILL   |                          |                                   |                           |              |             | G. State F   |                  | 043.0                   | 27.644     | 2               |  |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419                                 |                          |                                   |                           |              |             | H. State F   | acility Phone    | 912-9.                  | 27-611     | 3               |  |  |
|   |                          |                                   |                           | 12. Co       | ntainers    | 13. Total  | 14. Unit         | L Mi                    | sc. Commer | nts             |  |  |
| a. COAL ASH& COAL CONTAIN   | AINATED WASTE            | - N                               |                           | No.          | Туре        | Quantity   | Wt./Vol.         |                         |            |                 |  |  |
| N<br>E  |                          |                                   | 5                         | 12           | 107         | 18   |                  |                         |            |                 |  |  |
| WM Profil   | e# 375200GAKR            | A                                 |                           |              |             |  |                  |                         |            |                 |  |  |
| T<br>O  |                          |                                   |                           |              |             |  |                  |                         |            | 12/11/21/11     |  |  |
| C.  | WM Profile #             |                                   |                           |              |             | e di la compressión de la comp |                  |                         |            |                 |  |  |
|   | WM Profile #             |                                   |                           |              |             |  |                  |                         |            | <del>-</del> 90 |  |  |
| d.  | Anni Tome ii             |                                   |                           |              |             |  | 1                | 1                       |            |                 |  |  |
|   | WM Profile #             |                                   |                           |              |             |  | (                |                         |            |                 |  |  |
| J. Additional Descriptions for Mat  |                          | K. Disposa                        |                           |              |             | 171  | 179              | 64                      |            |                 |  |  |
|   |                          |                                   | 1                         | Cell         | 1           | 300  |                  | Level                   |            |                 |  |  |
| 15. Special Handling Instructions at  | nd Additional Informat   | tion                              | +                         | Grid         | a           | 8010   | 36               | y/a                     |            |                 |  |  |
|   |                          |                                   |                           |              |             |  |                  | *                       |            | -               |  |  |
| Purchase Order # GPC107602  | 293                      | EMER                              | GENCY CO                  | NTACT / PH   | ONE NO.:    |  |                  |                         |            | 1.4-            |  |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-desc          | cribed materials are no  | ot hazardous wast                 | tes as defin              | ed by CFR I  | Part 261 or | any applical   | ole state law, h | ave been fu             | lly and    |                 |  |  |
| accurately described, classified and  | packaged and are in p    | proper condition f                | for transpo<br>e "On beha | rtation acco | ording to a | pplicable reg  | ulations.        | Month                   | Day        | Year            |  |  |
| Printed Name B + 1/1 Pourch   |                          | 3                                 | 1                         |              | 1           |  |                  | 5                       | 3          | 18              |  |  |
| 17. Transporter 1 Acknowledgeme   | nt of Receipt of Mater   | ials<br>Signatur                  | eA                        |              | 01          | 1  | ×                | Month                   | Day        | Year            |  |  |
| S Y JAMES   | ShibE                    | n7                                | y as                      | nes          | Sh          | when   | <i></i>          | 15                      | 3          | 1/8             |  |  |
| R Printed Name  | int of Receipt of Mater  | Signatur                          | re .                      |              |             |  |                  | Month                   | Day        | Year            |  |  |
| E<br>R  |                          |                                   |                           |              | 1 4         |  |                  |                         | d          |                 |  |  |
| 19. Certificate of Final Treatment/  I certify, on behalf of the above list | ed treatment facility,   | that to the best o                | f my knowl                | ledge, the a | bove-desc   | ribed waste  | was managed      | in complian             | ce with a  | dl              |  |  |
| applicable laws, regulations, permi   | ts and licenses on the   | dates listed abov                 | e                         |              |             |  |                  |                         |            | Ann E           |  |  |
| Printed Name  | The second of receipt of | Signatur                          |                           | 0            |             |  |                  | Month                   | Day        | Year            |  |  |
| White- TREATMENT, STORAGE, DI   | []                       | 61 6                              | ENERATOR                  | #2 CORY      |             |  | Yellow- GENER    | ATOR #1 CO              | PY         |                 |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1250769

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Vehicle# C20

Ticket Date 05/03/2019

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest / 6677741

Destination

PO

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/03/2018 12:13:52 Dut 05/03/2018 12:13:52

LD%

Scale Operator Inbound 1 LBEJARAN

LBEJARAN

HOM

Gross Tare

55940 1b 26660 16 2928Ø 1b

Net Tons

14.64

Comments

Product

Qty

Rate

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Tax

Amount

Origin

COAL ASH & COAL CO 100

14.64 Tons

PORTW

Total Tax fotal ficket

Doll Muz



### WAND NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |   | C. A. D. C. N. C.   | 2 Dags 1 5       | e l            |                        |                        |
|--|---|---|------------------|----------------|------------------------|------------------------|
| NON-HAZARDOUS MANIFEST  1. Generator's U   | IS EPA ID No. Mani N / A Generator's Site Address (If diffe   | fest Doc No.  | 2. Page 1 o      |                | 11:14                  | 2                      |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | A. Manifest   | t Number<br><b>//NA</b>   | 6677741          |                |                        |                        |
| 241 RALPH MCGILL BLVD NE, BIN#10221<br>ATLANTA, GA 30308-3374  | 155 CROSSGATE RD.<br>PORT WENTWORTH, GA   | 31407   |                  | B. State C     | Generator's ID         |                        |
| 4. Generator's Phone 404-506-1365  | c ucroano   | Versibor.   |                  |                |                        | 100                    |
| 5. Transporter 1 Company Name  | 6. US EPA ID I  | vumber  | C. State Tra     | ansporter's II | )                      |                        |
| Logetal Gradi  | K   | Markey Nove   | D. Transpo       | rter's Phone   | STATEMENT STATEMENT OF |                        |
| 7. Transporter 2 Company Name  | 8. US EPA ID  | Number  | E State Tr       | ansporter's II |                        |                        |
|  | 7   |   |                  | rter's Phone   |                        |                        |
| 9. Designated Facility Name and Site Address   | 10. US EPA ID   | Number  |                  | 74.1           |                        |                        |
| SUPERIOR LANDFILL  |   |   | G. State Fa      |                |                        | _                      |
| 3001 LITTLE NECK ROAD  |   | Company and the second | H. State Fa      | acility Phone  | 912-927-611            | 3                      |
| Savannah, GA 31419   |   |   |                  |                |                        |                        |
|  |   | 12. Containers  | 13. Total        | 14. Unit       | 1. Misc. Comme         | nts                    |
| 11. Description of Waste Materials   |   | No. Type  | Quantity         | Wt./Vol.       |                        |                        |
| a. COAL ASH& COAL CONTAMINATED WAS   |   | MI  | 1/8              |                |                        |                        |
| WM Profile # 375200GA  | KRA C   | 0   |                  |                |                        |                        |
| b.   | Monages   |   |                  |                |                        |                        |
|  |   |   |                  |                |                        | W-0111100000           |
| WM Profile #   |   |   |                  | and the second |                        |                        |
| c.   |   |   |                  |                |                        |                        |
| WM Profile #   |   |   |                  |                |                        |                        |
| d.   |   |   |                  |                |                        |                        |
|  |   |   |                  |                |                        |                        |
| WM Profile #   |   |   |                  |                |                        | e se de la composition |
| J. Additional Descriptions for Materials Listed Abov   | e   | K. Disposal Loca  | 1111             | 125            | 6                      | 5                      |
|  |   | Cell  | No               | 177            | Level C                |                        |
|  |   | Grid  | MI               | 616            |                        |                        |
| 15. Special Handling Instructions and Additional Info  | mation  |   |                  |                |                        |                        |
|  |   |   |                  |                |                        |                        |
| Purchase Order # GPC10760293   | EMERGENCY CO  | NTACT / PHONE NO  | ).:              |                |                        |                        |
| 16 OFNERATOR'S CERTIFICATE:  | WE THE STREET   |   |                  |                |                        |                        |
|  | e not hazardous wastes as defin   | ed by CFR Part 261  | or any applicab  | le state law,  | have been fully and    |                        |
| I hereby certify that the above-described materials a  | 1979 6 1  | riation according t   | o applicable reg | ulations.      | Month Day              | Y                      |
| accurately described, classified and packaged and are  | in proper condition for transpo   | If of"  |                  |                |                        | /                      |
| accurately described, classified and packaged and are<br>Printed Name  | s in proper condition for transpo<br>Signature "On beha   | If of"  |                  |                | 1613                   |                        |
| accurately described, classified and packaged and are<br>Printed Name  | Signature "On beha  | lf of"  |                  |                | 1513                   |                        |
| accurately described, classified and packaged and are Printed Name   | Signature "On beha  | If of"  |                  |                | Month Day              | 7                      |
| accurately described, classified and packaged and are Printed Name  17. Transporter 1 Acknowledgement of Receipt of N Printed Name  ACM ACM  Printed Name  | Signature On beha   | Mary  |                  | *              | Month Day              | 10                     |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt of Notes 18. Transporter 2 Acknowledgement of Receipt of Notes 18. Transporter 2 Acknowledgement of Receipt of Notes 18. Transporter 2 Acknowledgement of Receipt of Notes 18.  | Signature On behar Signature Signature Signature Signature Signature  | Muz   |                  |                | Month Day              | 10                     |
| accurately described, classified and packaged and are Printed Name  17. Transporter 1 Acknowledgement of Receipt of N Printed Name  ACM ACM  Printed Name  | Signature On beha   | Muz   |                  |                | 53                     | 10                     |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt of Note Printed Name  18. Transporter 2 Acknowledgement of Receipt of Note Printed Name  19. Printed Name  19. Printed Name   | Signature On behar Signature Signature Signature Signature Signature  | Muz   |                  |                | 53                     | 10                     |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt of No.  Printed Name  18. Transporter 2 Acknowledgement of Receipt of No.  Printed Name  19. Contiferator of Final Treatment/Disposal   | Signature On behalaterials  Signature Signature Signature Signature Signature Signature   | Muz   | escribed waste   | was manage     | Month Day              | 10                     |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt of Northead Name  18. Transporter 2 Acknowledgement of Receipt of Northead Name  19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility applicable laws, regulations, permits and licenses or | Signature On behalaterials  Signature Signature Signature Signature Signature Signature Signature   | Mu deledge, the above-d   |                  | was manage     | Month Day              | 10                     |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt of Note of Name  18. Transporter 2 Acknowledgement of Receipt of Note of Name  19. Certificate of Final Treatment/Disposal  Leartify on hebalf of the above listed treatment facility.  | Signature On behar Signature Signature  Signature  Signature  Signature  Signature  Signature  Signature  Signature  Signature  Signature | Mu deledge, the above-d   |                  | was manage     | Month Day              | y                      |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt of Northead Name  18. Transporter 2 Acknowledgement of Receipt of Northead Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facing applicable laws, regulations, permits and licenses or    | Signature On behalaterials  Signature Signature Signature Signature Signature Signature Signature   | Mu deledge, the above-d   |                  | was manage     | Month Day              |                        |

Pink- FACILITY USE ONLY



Original Ticket# 1250773

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Vehicle# j10 Volume

Ticket Date 05/03/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677742

Destination

Profile 375200GAKRA (CDAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/03/2018 12:18:46 Inbound 1 Out 05/03/2018 12:18:46

Scale

Operator LBEJARAN LBEJARAN

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Gross Tare Net Tons

51140 lb 20720 1b 30420 16 15.21

Comments .

#### WASTE MANAGEMENT

Origin LD% Qty UDM Rate Tax Amount Product COAL ASH & COAL CO 100 FORTW 15.21 Tons

Joseph 74

Total Tax Intal flekot



|             | NON HAZARDOUG MANUFECT                               | 1. Generator's   | US EPA ID No.       | EPA ID No. Manifest Doc No. |                             |              |   | of                                      | TE PLATE TO THE STATE OF |            |        |
|-------------|--|--|---------------------|-----------------------------|-----------------------------|--------------|---|---|--------------------------|------------|--------|
|             | NON-HAZARDOUS MANIFEST                               | 1 1  | N/A                 |                             |                             |              |   |   | 11                       | 20         | 1      |
|             | 3. Generator's Mailing Address:                      | Address: Generator's Site Address (If different than mailing |                     |                             |                             |              | A. Manife   | st Number                               | 1                        | .01        | /      |
|             | GEORGIA POWER  |  | GEORGIA PO          |                             |                             |              |   | MNA                                     | 6677                     | 742        |        |
|             | 241 RALPH MCGILL BLVD NE,                            | BIN#10221  | 155 CROSSO          | SATE RD.                    |                             |              | VV  |   | Generator's ID           |            |        |
|             | ATLANTA, GA 30308-3374                               |  | PORT WENT           | WORTH, G                    | 4 31407                     |              | 1000  | b. State C                              | senerator s              | ID         |        |
|             | 4. Generator's Phone 404-5                           | 06-1365  |                     |                             |                             |              |   |   |                          |            |        |
|             | 5. Transporter 1 Company Name                        |  | 6.                  | US EPA ID                   | Number                      |              |   |   |                          |            |        |
|             | 1122211  |  |                     |                             |                             |              | ransporter's II   | )                                       |                          |            |        |
|             | 7. Transporter 2 Company Name                        | 15   | US EPA II           | N 81 1                      |                             | D. Transp    | orter's Phone   | S I S I S I S I S I S I S I S I S I S I | mineral stellars at the  |            |        |
|             | 7. Hansporter 2 company Name 1                       | O 8.   | US EPA IL           | Number                      |                             | F State T    | ransporter's IE   |   | Cic                      |            |        |
|             |  |  |                     |                             |                             |              | orter's Phone   | V. Indian                               |                          |            |        |
|             | 9. Designated Facility Name and Site                 | Address  | 10.                 | US EPA                      | ID Number                   |              |   |   |                          |            |        |
|             | SUPERIOR LANDFILL                                    |  |                     |                             |                             |              | G. State F  | acility ID                              |                          |            |        |
|             | 3001 LITTLE NECK ROAD                                |  |                     |                             |                             |              | H. State F  | acility Phone                           | 912-9                    | 27-611     | 3      |
|             | Savannah, GA 31419                                   |  |                     |                             |                             |              |   |   |                          |            |        |
|             | 11 Description of Wests Materials                    |  |                     |                             | 12. Con                     | tainers      | 13. Total   | 14. Unit                                |                          |            |        |
| G           | 11. Description of Waste Materials                   | - 11<br>- 11   |                     |                             | No.                         | Туре         | Quantity  | Wt./Vol.                                | I. M                     | isc. Comme | nts    |
| E<br>N      | a. COAL ASH& COAL CONTAM                             | INATED WAS   | TE                  |                             | 70                          | NI           | 57  |   | 17 - 1                   |            |        |
| E           |  | 2752006  | A LCD A             |                             | $\mathcal{M}_{\mathcal{O}}$ |              | 1 0   |   |                          |            |        |
| R           | b. WM Profile  | # 375200G/   | AKKA                |                             |                             |              |   |   |                          |            |        |
| A           |  |  |                     |                             |                             |              | 27. V   |   | V.                       |            |        |
| 0           | 10   | /M Profile #   |                     |                             |                             | 2000         |   |   |                          |            |        |
| R           | c.   | ANI FIOINE #   |                     |                             |                             |              |   |   |                          |            |        |
| X           |  | *  |                     |                             |                             |              |   | 11                                      |                          |            |        |
|             |  | /M Profile #   | The Charles         | as well                     |                             |              |   |   |                          |            |        |
|             | d.   |  |                     |                             | 100                         |              | 100   |   |                          |            | 4      |
|             |  |  |                     |                             |                             |              |   |   |                          |            |        |
| 4-          | The appropriate southern and southern by appropriate | /M Profile #   |                     |                             |                             |              | Harring and the same of the |   |                          |            |        |
|             | J. Additional Descriptions for Mater                 | rials Listed Abov  | е                   |                             | K. Disposa                  | al Location  | 17  | 20                                      |                          | 10         |        |
|             | A TO THE STATE OF                                    |  |                     |                             | Cell                        | IA           | 1300  | 101                                     | Level                    | 6          | 2      |
|             |  |  |                     |                             | Grid                        | 1            | 00/   | , 21                                    | 1                        |            |        |
|             | 15. Special Handling Instructions and                | Additional Infor   | mation              |                             |                             |              | WIL   | 6,                                      |                          | ,          |        |
|             |  |  |                     |                             |                             |              |   |   |                          |            |        |
|             | Purchase Order # GPC1076029                          | 12   | EN                  | MERGENCY CO                 | NTACT / DUC                 | NE NO .      |   |   |                          |            |        |
| 1           | 16. GENERATOR'S CERTIFICATE:                         | ,5   | TA TAKE             | MENGENCI COI                | WIACI / TITO                | INC INO      |   |   |                          |            |        |
|             | I hereby certify that the above-descri               | hed materials ar   | e not hazardous w   | vastes as defin             | ed by CER Pa                | art 261 or a | ny applicabl  | e state law ha                          | ve heen fu               | lly and    | - 4    |
|             | accurately described, classified and p               |  |                     |                             |                             |              |   |   | ive been in              | ny ana     |        |
|             | Printed Name   |  | Signa               | ture "On beha               | lf of"                      |              |   |   | Month                    | Day        | Year   |
| 123         | 17 The Hill povice                                   | -6 D lut - 6 A A   | 0                   |                             | -                           | 0            |   |   | 10                       | 7          | 1/8    |
| T<br>R      | 17. Transporter 1 Acknowledgement Printed Name       | of Receipt of IVI  |                     | tivo                        | -                           | Vr-          | A   | 1-                                      | Month                    | Day        | Year   |
| A<br>N<br>S | 1 Joseph Sharp                                       | <  | Signa               | Joseph                      | -1/                         |              | <u> </u>  |   | Month                    | Pay        | Y      |
| P           | 18. Transporter 2 Acknowledgement                    | of Receipt of M  | aterials /          |                             | 16.10                       |              |   |   | ' )                      |            | 10     |
| R           | Printed Name   |  | Signa               | ture                        |                             |              |   |   | Month                    | Day        | Year   |
| E<br>R      |  |  |                     |                             |                             |              |   |   |                          |            |        |
|             | 19. Certificate of Final Treatment/Dis               | sposal   |                     |                             |                             |              |   |   |                          |            |        |
| F<br>A      | I certify, on behalf of the above listed             |  | ty, that to the bes | at of my knowle             | edge, the abo               | ove-describ  | oed waste w   | ras managed ir                          | n complian               | e with al  |        |
| C           | applicable laws, regulations, permits                | and licenses on t  | the dates listed ab | oove.                       |                             |              |   |   |                          |            |        |
| 1           | 20. Facility Owner or Operator: Cert                 | ification of recei   |                     |                             | overed by th                | is manifest  | :   | Talk Talk                               | -                        |            | AFFER! |
| Y           | Printed Name   | M  | Signa               | ture                        | 02                          |              |   |   | Month                    | Day        | Year   |
|             |  |  |                     |                             | 0                           |              |   |   | 1                        | )/         | 0      |
|             | White-TREATMENT, STORAGE, DISPO                      | DSAUFACILITY CO  | JPY Blue            | - GENERATOR                 | #2 COPY                     |              | Ye  | llow- GENERA                            | IOR #1 CO                | PΥ         |        |

Pink- FACILITY USE ONLY

Frior Landfill Little Neck Rd mah, 6A, 31419 4912) 927-6113

Original Mcket# 1250786

Customer Name GEORGITT 1375200GAKRA GEORGI Carrier

Manual Ticket#

Ticket Date 05/03

FLORES TRUCKING LLC

Vehicle# J05 Volume

Payment Type Credit Account

Container

Driver

Hauling Ticketh Route

Check# Billing #

0001037

State Waste Code

Manifest 6677743

Gen EPA ID NR

Destination

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/03/2018 12:33:54 Inbound 1 Oct 05/03/2018 12:33:54

Scale

Operator LBEJARAN

LBEJARAN

Bross Tare

52480 1b 23280 lb

Net Tons 29200 1b

14.60

Product

LD% Oty

Rate

Тах

Amount

Origin

COAL ASH & COAL CO 100

a 14.60 Tons

PORTW

Total Tax Fotal Floket

403WM



| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA<br>N / A                           | 3-1-   | anifest Doc No                   | ).              | 2. Page 1 o   | f                            | À                          | :2         | -           |  |
|---|--|--|----------------------------------|-----------------|---|------------------------------|----------------------------|------------|-------------|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5         | Gener<br>GEO<br>BIN#10221 155                            | Generator's Site Address (If different than mailing):  GEORGIA POWER PLANT KRAFT  WMNA |                                  |                 |   |                              | 6677743 ate Generator's ID |            |             |  |
| 5. Transporter 1 Company Name  7. Transporter 2 Company Name  | rading   |  | D Number<br>D Number             | V V.            | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID F. Transporter's Phone |                              |                            |            |             |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                          | e Address  | 10. US EPA ID Number   |                                  |                 |   | acility ID                   | 912-927-6113               |            |             |  |
| G 11. Description of Waste Materials  |  |  | 12. Cont<br>No.                  | tainers<br>Type | 13. Total<br>Quantity   | 14. Unit<br>Wt./Vol.         | I. Mis                     | c. Comment | S           |  |
| a. COAL ASH& COAL CONTAN  |  | -  | 505                              | DI              | IT  |                              |                            |            |             |  |
| b.  | WM Profile #   | *  |                                  |                 |   |                              |                            |            |             |  |
|   | WM Profile #   |  | - X- W-0                         |                 |   |                              |                            |            |             |  |
| d.  | 4  | 1 × × ×  |                                  | *               | *   |                              |                            |            | The species |  |
| J. Additional Descriptions for Mate   | WM Profile #<br>erials Listed Above                      |  | K. Disposi                       | al Location     | 15201   | 79                           | Level                      | 61         |             |  |
| 15. Special Handling Instructions ar  | nd Additional Information                                |  |                                  |                 | Jo C  |                              |                            |            |             |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and | ribed materials are not h                                | per condition for trans  | fined by CFR P<br>portation acco | art 261 or      | any applicab<br>oplicable reg   | le state law, h<br>ulations. | nave been fu               | lly and    | Year        |  |
| Printed Name  T 17. Transporter 1 Acknowledgeme   | nt of Receipt of Materials                               | Signature On be  | nall of                          |                 |   |                              | 15                         | 3          | 18          |  |
| 7 17. Transporter 1 Acknowledgeme Printed-Name Printed-Name 18. Transporter 2 Acknowledgeme                                       |  | Signature  | Ale                              | 1/              |   |                              | Month                      | Day        | Year //     |  |
| Printed Name  |  | Signature  |                                  |                 | 12.   |                              | Month                      | Day        | Year        |  |
| 19. Certificate of Final Treatment/ I certify, on behalf of the above list applicable laws, regulations, permi                    | ed treatment facility, tha<br>its and licenses on the da | tes listed above.  |                                  |                 |   | was managed                  | in complian                | ce with a  | L           |  |
| 20. Facility Owner or Operator, Co  | ertification of receipt of n                             | on-hazardous material  | s covered by t                   | his manife      | st.   |                              | Month                      | Bay        | Year        |  |
| Printed Name  | \ V -  | S.B.O.S.   |                                  |                 |   | 'ellow- GENEF                | 5                          | )/         |             |  |

Pink- FACILITY USE ONLY



Original Ticket# 1250785

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/03/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677744

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/03/2018 12:32:14 Out 05/03/2018 12:32:14

Scale

LD%

Inbound 1

UOM

Operator LBEJARAN

LBEJARAN

Rate

Vehicle# JØ1

Gen EPA ID NR

0001037

Container Driver

Billing #

Check#

Gross Tare Net

56480 1b 23340 16 33140 lb

16.57 Tons

Comments

Product

Qty

COAL ASH & COAL CO 100

16.57 Tons

Amount

Origin

FORTW

Total Tax fotal ficket

Tax



|                       | NON-HAZARDOUS MANIFEST  | 1. Generator's US EF N /                              | N/A  | lanifest Doc N | No.          | 2. Page 1  | of  | 11                        | 4          | _    |  |  |
|-----------------------|---|---|--|----------------|--------------|--|---|---------------------------|------------|------|--|--|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5 | Ge<br>GE<br>BIN#10221 15                              | nerator's Site Address (If<br>CORGIA POWER PLAI<br>5 CROSSGATE RD.<br>DRT WENTWORTH, G | NT KRAFT       | ailing):     | 20.000000000000000000000000000000000000          | st Number  MNA  B. State G                                      | 6677744<br>Generator's ID |            |      |  |  |
|                       | 5. Transporter 1 Company Name 7. Transporter 2 Company Name   | rading  |  | D Number       |              | C. State Transporter's ID D. Transporter's Phone |   |                           |            |      |  |  |
|                       | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                  | e Address   | 10. US EPA   | ID Number      |              | F. Transpo                                       | ransporter's ID<br>orter's Phone<br>acility ID<br>acility Phone |                           | 27-6113    |      |  |  |
| _                     | 11. Description of Waste Materials  |   |  | 1              | ntainers     | 13. Total  | 14. Unit  | I. Mis                    | sc. Commen | es . |  |  |
| G<br>E<br>N<br>E      | a. COAL ASH& COAL CONTAN  |   |  | No.            | Туре         | Quantity   | Wt./Vol.  |                           |            |      |  |  |
| R<br>A<br>T<br>O      | b.  | e# 375200GAKRA  |  |                |              |  |   |                           |            |      |  |  |
| R                     | c.  | WM Profile #  |  |                |              |  |   |                           |            |      |  |  |
|                       | J. Additional Descriptions for Mate   | WM Profile #<br>erials Listed Above                   |  | K. Dispos      | sal Location | BL   | 776   | Level                     | 6          |      |  |  |
|                       | 15. Special Handling Instructions and Additional Information  |   |  |                |              |  |   |                           |            |      |  |  |
| 1                     | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc   | 学 ( ) 2 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (             |  |                |              |  |   |                           |            |      |  |  |
| 1.19                  | Printed Name  R + III Pourch  | packageu and are in pr                                | Signature "On bel  | nalf of"       | ording to ap | pheable reg                                      | arations.   | Month 5                   | Day        | Year |  |  |
| T<br>R<br>A<br>N<br>S | 17. Transporter 1 Acknowledgemen  | M   | Signature  | - (            | -            | 1  | /   | Month                     | Day        | Year |  |  |
| O<br>R<br>T<br>E<br>R | 18. Transporter 2 Acknowledgement Printed Name  | it of Receipt of Materia                              | Signature  |                |              |  |   | Month                     | Day        | Year |  |  |
| F<br>A<br>C           | 19. Certificate of Final Treatment/I<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit   | ed treatment facility, the<br>s and licenses on the d | ates listed above.   |                |              |  | was managed i   | n compliand               | e with all |      |  |  |
| L<br>I<br>T<br>Y      | 20. Facility Owner or Operator: Ce<br>Printed Name  |   |  | covered by t   | this manifes | t.   |   | Month                     | Day        | Year |  |  |
| 4                     | White- TREATMENT, STORAGE, DIS Pink- FACILITY USE   |   | Blue- GENERATO   |                | A            | Y  | ellow- GENERA   | ATOR #1 COI               | PY         |      |  |  |



(minima) Ticket# 1251323

Volume

Customer Name & ORGANIAN STREWNSHAM & ORGANIAN CONTROL TRUCK NEW TELESCOPER

Ticket Date 05/07/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

6677745 Manifest

Destination

1211

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/07/2018 07:52:54 Out 05/07/2018 07:52:54 Scale

Inbound 1

Operator

Vehicle# JØ6

Gen EPA ID NR

0001037

Container

Billing #

Driver

Check#

lbejaran lbejaran

Gross Tare

42340 lb 22980 lb

Net Tons 19360 lb 9.68

Comments

### WASTE MANAGEMENT

|         |      |     |            |      |                        |                                       |       |          |         |       | 192   | 744.7 4.2 4.   |
|---------|------|-----|------------|------|------------------------|---------------------------------------|-------|----------|---------|-------|---|--|
| Phone   | f    |     |            |      |                        | 1.10%                                 | (31.0 | 11(11/1  | Kecker. | 1(1)( | Om (+) (11).  | (Weight)   |
| P.L.III | nuri |     |            |      |                        | OF THE STATE OF                       | 22.6  | 7 10 200 |         |       | a grade water trains about private better thank there's marrie private better | A PART AND ADDRESS OF THE PART ADDRESS |
|         |      |     | . errer et |      | 41544 N. VAN WEIGH II. | time forms which does needs need; 140 |       |          |         |       |   | PORTW  |
| 1       | COAL | ASH | 8          | COAL | CO                     | 100                                   | 9,68  | Tons     |         |       |   | FURIW  |

J. CRosky

Total Tax robal ficket



# WAY NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |  |                      |                      |              |  | 1   |                 |                |            | 1    |
|--|--|----------------------|----------------------|--------------|--|---|-----------------|----------------|------------|------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA  | Action Charles       | Mar                  | nifest Doc N | 0.   | 2. Page 1 of 7 / 3                                      |                 |                |            |      |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEO  | erator's Site Addre  | PLANT                |              | iling):  | A. Manifes  | st Number       | 66777          | 45         |      |
| 241 RALPH MCGILL BLVD N<br>ATLANTA, GA 30308-3374  | The second state of the second | CROSSGATE RE         |                      | 31407        |  | *   | B. State G      | Generator's IE |            |      |
| 4. Generator's Phone 404 5. Transporter 1 Company Name   | 7-306-1303   | 6. US                | EPA ID               | Number       |  | C. State Tr   | ansporter's IE  |                |            |      |
| 7. Transporter 2 Company Name  | grading  | 8. US                | EPA ID               | Number       |  |   | orter's Phone   |                |            |      |
| 9. Designated Facility Name and  | Site Address   | 10. US               | S EPA II             | D Number     |  | F. Transporter's Phone                                  |                 |                |            |      |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD   |  |                      |                      |              | STATE OF THE PARTY | G. State Facility ID  H. State Facility Phone 912-927-6 |                 |                | 7-6113     | C    |
| Savannah, GA 31419   |  |                      | ugga e<br>milijakila | 12. Cor      | ntainers   | 13. Total   | 14. Unit        | I. Mise        | c. Comment | S    |
| G 11. Description of Waste Materia E a. COAL ASH& COAL CONT.   |  |                      |                      | No.          | Туре   | Quantity  | Wt./Vol.        |                |            | F    |
| N<br>E<br>R WM Pro   | ofile # 375200GAKRA  |                      | 7                    | 00           | 101  | 18  |                 |                |            |      |
| д <b>b</b> .<br>Т  |  |                      |                      |              |  |   |                 |                |            |      |
| R c.   | WM Profile #   |                      | - 301                |              | i de la compania del compania del compania de la compania del compa |   |                 |                |            |      |
|  | WM Profile #   |                      | ų.                   |              |  |   |                 |                | - 5        |      |
| d.   |  |                      |                      |              |  |   |                 |                |            |      |
| J. Additional Descriptions for N   | WM Profile #<br>laterials Listed Above   |                      |                      | K. Dispos    | sal Location   | 3 2019  | 19              | Level          | 67         |      |
| 15. Special Handling Instructions  | and Additional Informatio  | n                    |                      |              |  | MI  | 1670            |                |            |      |
| Purchase Order # GPC1076   | 50293  | EMERGEN              | ICY CO               | NTACT / PH   | IONE NO.:  |   |                 |                |            |      |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-d   | escribed materials are not   | hazardous wastes a   | ıs defir             | ned by CFR I | Part 261 or  | any applicab  | le state law, h | nave been ful  | ly and     |      |
| accurately described, classified a Printed Name  | nd packaged and are in pro   | Signature (10        | ranspo               | rtation acco | ording to a  | pplicable regi  | ulations.       | Month          | Day        | Year |
| 17. Transporter 1 Acknowledger Printed Name  | ment of Receipt of Materia   | ls<br>Signature      | 7/                   | 2/11         | 1  | /   |                 | Month          | Day        | Year |
| N S 18. Transporter 2 Acknowledge  | ment of Receipt of Materia   | ls 0                 | H                    | rov          | 70   |   |                 | 151            | 7          | 18   |
| Printed Name   |  | Signature            |                      | 1            |  |   |                 | Month          | Day        | Year |
| 19. Certificate of Final Treatmen  I certify, on behalf of the above applicable laws, regulations, per | listed treatment facility, th  | at to the best of my | / know               | ledge, the a | bove-desc  | ribed waste   | was managed     | in complianc   | e with al  | L    |
| applicable laws, regulations, per 20. Facility Owner or Operator:                                      | Certification of receipt of  | non-hazardous mat    | erials o             | covered by t | this manife  | est.  |                 | 1              | -5)        | 1 10 |
| Printed Name   | n  | Signature            | 1                    | W2 CODY      |  |   | 'ellow- GENER   | Month          | Day<br>PY  | Year |
| White-TREATMENT, STORAGE,  | DISPOSAL FACILITY COPY   | Blue- GENE           | KATOF                | (#2 COPY -   |  | Y   | CHOW- GENER     | ATON #1 COI    |            |      |

Pink- FACILITY USE ONLY

Superior Landfill 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

Original Ticket# 1251334

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Ticket Date 05/07/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code Manifest 6677746

Destination

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

TO 1 10

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/07/2018 08:08:09 Out 05/07/2018 08:08:09

Scale

Inbound 1

Operator lbejaran

Container

Driver

Check#

Vehicle# C26

Billing # 0001037

Gen EPA ID NR

lbejaran

Gross Tare Net

48920 lb 25980 lb 22940 1b

11.47 Tons

Comments

(1m (1) (3) 1. 110% tel.v 110% Product "

COAL ASH & COAL CO 100 11.47 Tons

PORTW

Total Ticket



#### **NON-HAZARDOUS MANIFEST**

| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA  N / A   |   | nifest Doc No.                    |             | 2. Page 1 c                   | of   |  |
|---|--|---|-----------------------------------|-------------|-------------------------------|--|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5   | Gener<br>GEO<br>BIN#10221 155 (  | rator's Site Address (Ifdi<br>RGIA POWER PLAN<br>CROSSGATE RD.<br>T WENTWORTH, GA | T KRAFT                           | og):        | A. Manifes                    | MNA  | 6677746<br>enerator's ID                             |
| 5. Transporter 1 Company Name  7. Transporter 2 Company Name  | frading.   | 6. US EPA ID  | Number  Number                    |             | D. Transpo                    | ansporter's ID<br>orter's Phone<br>ansporter's ID<br>orter's Phone |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | Address  | 10. US EPA  | ID Number                         |             | G. State Fa                   |  | 912-927-6113   |
| a. COAL ASH& COAL CONTAIN   | IINATED WASTE  | (   | 12. Contai<br>No.                 | Type        | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.   | I. Misc. Comments                                    |
| <b>b</b> .  | # 375200GAKRA  VM Profile #  |   |                                   |             |                               |  |  |
| d.  | VM Profile #   |   |                                   |             |                               |  |  |
| J. Additional Descriptions for Mate   | VM Profile #<br>rials Listed Above   |   | K. Disposal  Cell  Grid           | Location    | 37                            | V174   | Level  |
| 15. Special Handling Instructions an  | d Additional Information   |   |                                   | U           | yn.                           | W3 L   |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described accurately described, classified and Printed Name  | ibed materials are not ha  | azardous wastes as definer condition for transport                                | ned by CFR Par<br>ortation accord | rt 261 or a | any applicab<br>plicable regu | le state law, h  | ave been fully and    Month   Day   Year             |
| T 17. Transporter 1 Acknowledgemer Printed Name P 18. Transporter 2 Acknowledgemer Printed Name P 2 Printed Name  | 240  | Signature   | Pelj                              |             |                               |  | Month Day Year  Month Day Year                       |
| 19. Certificate of Final Treatment/E I certify, on behalf of the above liste applicable laws, regulations, permit 20. Facility Owner or Operator: Cer Printed Name  White-TREATMENT, STORAGE, DIS | ed treatment facility, that<br>is and licenses on the date<br>rtification of receipt of no | es listed above.  | covered by thi                    |             | t.                            |  | in compliance with all  Month Day Year  ATOR #1 COPY |

Pink- FACILITY USE ONLY

Superior Land(i)) Bondt Libbin Nock Dd Savannah, GA, 31419 Ph: (912) 927-6113

(minima) Flokokh (2011-324

Volume

COASTALGRADING COASTALGRADING

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier Ticket Date 05/07/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code 6677747 Manifest

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/07/2018 07:55:10 Dut 05/07/2018 07:55:10

Scale Inbound 1

Operator lbejaran lbejaran

49100 lb Gross 27040 lb Tare 22060 lb Net 11.03 Tons

Comments

#### WASTE MANAGEMENT

Vehicle# C25

0001037

Container Driver

Billing #

Gen EPA ID NR

Check#

| Prod               | uct  |     | 1         |      |    | LD% | Qty   | MOM  | Rate | Tax | Amount   | Origin  |
|--------------------|------|-----|-----------|------|----|-----|-------|------|------|-----|--|---|
| 1000 APRIL 1200 AR |      |     | berre 191 |      |    |     |       |      |      |     | of these desire states and as make excell states desire already states deadle desire | and the state and the same and the same and the same and the same and |
| 1                  | cnal | ASH | 8.        | COAL | CO | 100 | 11.03 | Tons |      |     |  | PORTW .   |

Total Tax Total Ticket

proches



## WAY NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |                              |  |  |            |              |                  |  |            | -              |
|--|------------------------------|--|--|------------|--------------|------------------|--|------------|----------------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA        | ***                                      | Manifest Doc No.   |            | 2. Page 1 c  |                  | 7:0  | 30         |                |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                               | 19055045                     | erator's Site Address<br>DRGIA POWER PLA |  | ):         | A. Manifes   | st Number<br>MNA | 66777  | 47         |                |
| 241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404 | ,                            | CROSSGATE RD.<br>RT WENTWORTH,           | GA 31407   |            |              | B. State G       | enerator's II  | )          |                |
| 5. Transporter 1 Company Name  | 0 .                          | 6. US EPA                                | A ID Number  |            | 101072       |                  |  |            |                |
| []000111   |                              | 77                                       |  |            |              | ransporter's ID  | THE PARTY OF THE P |            |                |
| 1042491  | 5 rading                     | 110.55                                   | A ID Number  |            | D. Transpo   | orter's Phone    | one  |            |                |
| 7. Transporter 2 Company Name  |                              | 8. US EP                                 | A ID Number  |            | E. State Tr  | ransporter's ID  |  |            |                |
|  | V                            |  |  | <u>.</u>   | F. Transpo   | orter's Phone    | Te. III  |            |                |
| 9. Designated Facility Name and S  | ite Address                  | 10. US E                                 | PA ID Number   |            |              |                  |  | HERE       |                |
| SUPERIOR LANDFILL  |                              |  |  |            | G. State F   | acility ID       |  |            |                |
| 3001 LITTLE NECK ROAD  |                              |  |  |            | H. State F   | acility Phone    | 912-92   | 27-6113    |                |
| Savannah, GA 31419   |                              |  |  |            |              |                  |  |            |                |
|  |                              |  | 12. Contain  | ners       | 13. Total    | 14. Unit         | I Mis  | c. Comment | s              |
| 11. Description of Waste Materia   |                              |  | No.  | Туре       | Quantity     | Wt./Vol.         | 1. 19113   | _ commen   |                |
| a. COAL ASH& COAL CONTA  | MINATED WASTE                |  | 1-   | MI         | 17           |                  |  |            |                |
|  | 275200CAKDA                  |  | (  |            | 10           |                  | riger popular  |            |                |
| 500300000  | file # 375200GAKRA           |  |  |            |              |                  |  |            |                |
| b.   |                              |  |  |            |              |                  |  |            |                |
|  | WM Profile #                 |  |  |            |              |                  |  |            |                |
| C.   | WIVI FIONIE #                |  | ATTIMIST DE COMPANIO DE COMP   |            | V T          |                  |  |            |                |
|  |                              |  |  |            |              |                  |  |            |                |
|  | WM Profile #                 |  | of the last of the last  |            |              |                  |  |            |                |
| d.   |                              |  |  |            |              |                  |  |            |                |
|  |                              |  |  |            | f.           |                  |  |            | ###\$\\$\##### |
|  | WM Profile #                 | "  | K. Disposal I  | Location   | July Marille |                  |  |            |                |
| J. Additional Descriptions for M   | ateriais Listed Above        |  | R. Disposari   | A          | 124          | 114              |  | (1         |                |
|  |                              |  | Cell   |            | V)10         | 10'              | Level  | 0          |                |
|  |                              |  | Grid   | 1          | TOIL         | 176              |  |            |                |
| 15. Special Handling Instructions  | and Additional Informatio    | n  |  | 0          | 410          | 0 ) -            |  |            |                |
|  |                              |  |  |            |              |                  |  |            |                |
| Purchase Order # GPC1076   | 1293                         | EMERGENCY                                | CONTACT / PHON   | IE NO.:    |              |                  | 1  |            |                |
| 16. GENERATOR'S CERTIFICATE:   | 3230                         |  | 70 5162  |            |              |                  |  |            |                |
| I haraby cartify that the above-de   | scribed materials are not    | hazardous wastes as o                    | defined by CFR Part  | t 261 or a | any applicat | ole state law, h | ave been ful   | ly and     |                |
| accurately described, classified ar  | nd packaged and are in pro   | oper condition for trai                  | isportation accordi  | ing to ap  | plicable reg | ulations.        | Month  | Day        | Year           |
| Printed Name   |                              | Signature On I                           | penair or  |            |              |                  | K  | 7          | 18             |
| 17. Transporter 1 Acknowledgen   |                              | ls                                       |  |            |              |                  | -  |            | . 0            |
| Printed Name   | icht of neceipt of materia   | 1 0000000000000000000000000000000000000  | . 10   |            |              |                  | Month  | Day        | Year           |
| michael f  | Fazier                       | V Mu                                     | in fry   | ~          |              |                  | 5  | 17         | 11             |
| 18. Transporter 2 Acknowledgen   |                              | ls                                       | TO BE STONE  |            |              |                  |  |            | 1              |
| Printed Name   |                              | Signature                                |  |            |              |                  | Month  | Day        | Year           |
|  |                              |  | V No. 1  |            |              |                  |  |            |                |
| 19. Certificate of Final Treatmen  | t/Disposal                   |  |  |            |              |                  |  |            |                |
| I certify, on behalf of the above I  | isted treatment facility, th | at to the best of my k                   | nowledge, the abov   | ve-descr   | ibed waste   | was managed      | in complian  | ce with a  | ļ.             |
| applicable laws, regulations, peri   | nits and licenses on the da  | ates listed above.                       |  |            |              | THE STATE        |  |            | ,              |
| 20. Facility Owner or Operator:  | Certification of receipt of  | non-hazardous mater<br>Signature         | lais covered by this   | maimes     |              | Carlo ta         | Month  | Day        | Year           |
| Printed Name   | AL                           | Signature                                |  |            |              |                  | )  | 1          | 0              |
| White- TREATMENT, STORAGE, I   | DISPOSAL FACILITY COPY       | Blue- GENERA                             | TOR #2 COPY  | -          |              | Yellow- GENER    | ATOR #1 CO   | PY         |                |
| WINTE- INCATIVIENT, STURAGE, I   | JUL DUNE LACIEIT COLL        |  | And the same of th |            |              |                  |  |            |                |

Pink- FACILITY USE ONLY



Superior Landid) 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

(manima) Ticket# 1251332

Volume

Constance Name of the Arthropolytical Blocks Carrier 11 (nd 5 1600) No 11 C

Ticket Date 05/07/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677748

Destination

Generator

()()

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/07/2018 08:05:13 Out 05/07/2018 08:05:13

Scale Inbound 1 Operator lbejaran Ibejaran

Vehicle# JØ1

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

Gross Tare Net Tons

46840 1b 23340 lb 23500 lb 11.75

Comments

#### WASTE MANAGEMENT

trinin IDS WAY DOM RECE TOO Maritin's Pruduct PORTW 11.75 Tons 1 COAL ASH & COAL CO 100

" Jen []

Teday Test Tobal Ticket



# WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   | 1. Generator's US EPA  | ID No. N   | Nanifest Doc N | lo.              | 2. Page 1 c           | of   |                       |                   |
|--|--|--|----------------|------------------|-----------------------|--|-----------------------|-------------------|
| NON-HAZARDOUS MANIFEST   | N /  |  |                |                  |                       |  | 7                     | FC                |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEC  | erator's Site Address (II<br>DRGIA POWER PLA<br>CROSSGATE RD.    |                | iling):          | A. Manifes            | MNA  | 66777                 | 48                |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | POF  | RT WENTWORTH,  | GA 31407       |                  |                       | B, State C   | Generator's ID        |                   |
| 4. Generator's Phone 404-5  5. Transporter 1 Company Name  | 06-1365  | 6. US EPA  | ID Number      |                  |                       |  |                       |                   |
| 100511   | -11-0  |  |                |                  |                       | ansporter's II   |                       |                   |
| CM74010  | radin 4  | O HIS EDA  | ID Number      | V 1              | D. Transpo            | orter's Phone  |                       |                   |
| 7. Transporter 2 Company Name  | C  | 8. US EPA  | ib Number      |                  | E. State Tr           | ansporter's II   | )                     |                   |
|  | 9  |  |                | 40               | F. Transpo            | orter's Phone  |                       | THE HILLSON STATE |
| 9. Designated Facility Name and Site   | Address  | 10. US EP  | A ID Number    |                  | C Chaha F             | ilib. ID   |                       |                   |
| SUPERIOR LANDFILL  |  |  |                |                  | G. State F            | acility Phone  | 912-92                | 7-6113            |
| 3001 LITTLE NECK ROAD  |  |  |                |                  | H. State F            | acility Phone  | J12-J2                | 7 0113            |
| Savannah, GA 31419   |  |  |                |                  |                       |  |                       |                   |
| 11. Description of Waste Materials   |  |  | 12. Co<br>No.  | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.   | I. Misc               | . Comments        |
| a. COAL ASH& COAL CONTAN   | IINATED WASTE  |  | TOI            | TY               | 17                    |  |                       |                   |
|  |  |  | 101            | DI               | 10                    |  |                       |                   |
|  | # 375200GAKRA  | E  |                |                  |                       |  |                       |                   |
| <b>b.</b>  |  |  |                |                  |                       |  |                       |                   |
|  | WM Profile #   |  |                |                  |                       |  |                       |                   |
| c.   |  |  |                |                  |                       |  |                       |                   |
|  |  |  |                |                  |                       | V.   |                       |                   |
|  | WM Profile #   |  |                |                  | I DANIEL CONTRACTOR   |  |                       |                   |
| d.   |  |  |                |                  | 1. *                  |  |                       |                   |
|  | WM Profile #   |  |                |                  |                       |  |                       |                   |
| J. Additional Descriptions for Mate  | STATE OF THE STATE |  | K. Dispo       | sal Location     | 1 00                  | /  |                       | 1-5               |
|  |  |  | Cell           |                  | 1366                  | 14   | Level                 | 0.                |
|  |  |  | Grid           | 1                | 20                    | 1,32   |                       |                   |
| 15. Special Handling Instructions ar   | nd Additional Informatio   | n  |                |                  | MI                    | w  |                       |                   |
| <u> </u>   |  | EMERCENCY  | CONTACT / PH   | JONE NO .        |                       | de la companya de la |                       |                   |
| Purchase Order # GPC107602   | 293  | EWERGENCY  | CONTACT/FI     | IONE NO.         |                       |  |                       |                   |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-description  | ribed materials are not  | hazardous wastes as de   | efined by CFR  | Part 261 or      | any applicab          | le state law,  | have been full        | y and             |
| accurately described, classified and   | packaged and are in pro  | oper condition for trans   | sportation acc | ording to a      | pplicable reg         | ulations.  | Month                 | Day               |
|  |  | Signature "On be   | ehalf of"      |                  |                       |  | 5                     | Day               |
| Printed Name   |  | RY   |                |                  |                       |  |                       | -1                |
| Printed Name   | nt of Receipt of Materia   | Is B FU  |                |                  |                       | 1  |                       | 71 - 5300         |
| Printed Name  37. Transporter 1 Acknowledgeme  | nt of Receipt of Materia   |  |                | >                |                       | 1  | Month                 | Day               |
| Printed Name  17. Transporter 1 Acknowledgeme  Printed Name  | roul   | Signature  |                | 2                |                       | 1  | Month                 | Day /             |
| Printed Name  17. Transporter 1 Acknowledgeme  Printed Name  | roul   | Is Signature   |                | 2                | -1,                   | 1  | 5                     | 7/                |
| Printed Name  17. Transporter 1 Acknowledgeme  Printed Name  | roul   | Signature  | ~              | 2                | -/,                   | 1  | Month Month           | Day Day           |
| Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name   | nt of Receipt of Materia   | Is Signature Signature   |                | 2                |                       | 1  | Month                 | Day               |
| Printed Name  17. Transporter 1 Acknowledgeme  Printed Name  18. Transporter 2 Acknowledgeme  Printed Name  19. Certificate of Final Treatment/ Lectify on behalf of the above list                                      | nt of Receipt of Materia  Disposal ed treatment facility, th   | Is Signature Signature at to the best of my kn                   | owledge, the   | above-desc       | ribed waste           | was managed  | Month                 | Day               |
| Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name   | nt of Receipt of Materia  Disposal ed treatment facility, the  | Is Signature Signature at to the best of my knates listed above. |                |                  |                       | yas managed  | Month d in compliance | Day e with all    |
| Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/ I certify, on behalf of the above list applicable laws, regulations, permi | nt of Receipt of Materia  Disposal ed treatment facility, the  | Is Signature Signature at to the best of my knates listed above. |                |                  |                       | )<br>was managed   | Month                 | Day               |



Superior Land(i)) .SWML Little Nock Rd Savannah, GA, 31419 Ph: (912) 927-6113 (winimi) Firstent# 1231.345

Volume

Customer Name Blikks) APOM 371290/BARKA Blokks) Carrier 11 OR S TRUCKINE 11 C

floket Oate WikW//RWU

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677749

Destination

(24)

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/07/2018 08:23:21

Out 05/07/2018 08:23:21

Scale

Operator Inbound 1

Ibejaran

lbejaran

Gross

Tare Net

Tons

52420 1b 23540 lb 28880 lb

14.44

Comments

#### WASTE MANAGEMENT

Unitiotal July

Billing # 0001037

Gen EPA ID NR

Container

Driver Check#

China tettinite 1 10条 (44.9 (基) Product

COAL ASH & COAL CO 100

14.44 Tons

PORTW

Tubal Tax fotal floket



#### **NON-HAZARDOUS MANIFEST**

|                  | WASTE MANAGEMENT  |                           |  | 40 100-61                                       |   | The second secon |                  |                |          |                      |  |  |
|------------------|---|---------------------------|--|---|---|--|------------------|----------------|----------|----------------------|--|--|
|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's US EP N /  |  | No.   | 2. Page 1   |  | 7                | 12             | 7        |                      |  |  |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER                            | GE                        | nerator's Site Address (If diff<br>ORGIA POWER PLANT |   | ailing):  |  | st Number<br>MNA | 667774         | 9        |                      |  |  |
|                  | 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                         |                           | 5 CROSSGATE RD.<br>RT WENTWORTH, GA                  | 31407   |   |  | B. State G       | enerator's ID  |          |                      |  |  |
|                  |   | 06-1365                   | T  |   |   |  |                  |                |          | e same               |  |  |
|                  | 5. Transporter 1 Company Name   | 1                         | 6. US EPA ID   | Number  |   | C. State T   | ransporter's ID  |                |          |                      |  |  |
|                  | [Das+9] E   | 5 rading                  | O HIS EDA ID   | Normal Press                                    |   | D. Transp  | orter's Phone    |                |          |                      |  |  |
|                  | 7. Transporter 2 Company Name   | 1                         | 8. US EPA ID   | Number  |   | E. State T   | ransporter's ID  |                |          |                      |  |  |
|                  |   | V                         |  |   |   | F. Transporter's Phone   |                  |                |          |                      |  |  |
|                  | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL                   | Address                   | 10. US EPA II  | ) Number  |   | G. State Facility ID   |                  |                |          |                      |  |  |
|                  | 3001 LITTLE NECK ROAD   |                           |  |   |   | H. State F   | -6113            |                |          |                      |  |  |
|                  | Savannah, GA 31419  |                           |  |   |   |  |                  | 11111111       |          |                      |  |  |
|                  |   |                           |  | 12. Co  | ontainers   | 13. Total  | 14. Unit         | I Misc         | Comments |                      |  |  |
| G<br>E           | 11. Description of Waste Materials  | AUNIATED VALACTE          |  | No.   | Туре  | Quantity   | Wt./Vol.         | J. Misc.       | Commence |                      |  |  |
| N                | a. COAL ASH& COAL CONTAN  | MINATED WASTE             |  | ng.   | DI  | 18   |                  |                |          |                      |  |  |
| E<br>R           | WM Profile  | # 375200GAKRA             |  |   |   |  |                  |                |          |                      |  |  |
| Α                | b.  |                           |  |   |   |  |                  |                |          |                      |  |  |
| T                |   | arra n. et . u            |  |   |   |  |                  |                |          |                      |  |  |
| R                | C.  | WM Profile #              |  |   | U ASSESSMY, DUBBS   |  | \$0-000 me       |                |          | DISTANCE DISTANCE OF |  |  |
|                  |   |                           |  |   |   | 100000000000000000000000000000000000000  |                  |                |          | F2 (1) (1) (1)       |  |  |
|                  | d.  | WM Profile #              |  |   |   | A STATE OF THE STA |                  |                |          |                      |  |  |
|                  |   |                           |  |   |   |  |                  |                |          |                      |  |  |
|                  |   | WM Profile #              |  |   |   |  | 140 (6)          |                |          |                      |  |  |
|                  | J. Additional Descriptions for Mate   | erials Listed Above       |  | K. Dispo  | sal Location  | 11.  | 174              |                | 11       | ~                    |  |  |
|                  |   |                           |  | Cell  | N   | 500  | 111              | Level          | 0        |                      |  |  |
|                  |   | I A A December 11 Process |  | Grid  | - 1   | M  | 636              |                |          |                      |  |  |
|                  | 15. Special Handling Instructions an  | id Additional Information | on   |   |   |  |                  |                |          |                      |  |  |
|                  |   |                           |  |   |   |  | T. T.            |                |          |                      |  |  |
|                  | Purchase Order # GPC107602  | .93                       | EMERGENCY CO   | NTACT / PH                                      | HONE NO.:   |  |                  | 1              |          |                      |  |  |
|                  | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-desc          | ribad materials are not   | hazardous wastes as defin                            | ed by CFR                                       | Part 261 or   | anv applicat   | ole state law, h | ave been fully | and      |                      |  |  |
|                  | accurately described, classified and  | packaged and are in pr    | oper condition for transpo                           | rtation acc                                     | cording to ap   | plicable reg   | ulations.        |                |          | Varia                |  |  |
|                  | Printed Name  B Filipovich  |                           | Signature "On beha                                   | If of"  |   |  |                  | Month          | Day      | /ear                 |  |  |
| Т                | 17. Transporter 1 Acknowledgemen  | nt of Receipt of Materia  | als  | 1   | 1   | 1  | 1                |                |          |                      |  |  |
| R<br>A<br>N<br>S | Printed Name  | West                      | Signature  | yl  | U   | lest   | )                | Month          | Day 7    | Year / Y             |  |  |
| P                | 18. Transporter 2 Acknowledgeme   | nt of Receipt of Materia  |  | 1   |   |  |                  | Month          | Day      | Year                 |  |  |
| R<br>T<br>E      | Printed Name  |                           | Signature  |   |   |  |                  | Worth          | buy      |                      |  |  |
| R                | 19. Certificate of Final Treatment/I  | Disposal                  |  |   | 5 10  | 4 1134   |                  |                |          |                      |  |  |
| F<br>A           | I certify, on behalf of the above list applicable laws, regulations, permit | ed treatment facility, th | nat to the best of my knowl<br>ates listed above.    | edge, the                                       | e, the above-described waste was managed in compliance with all |  |                  |                |          |                      |  |  |
| L                | 20. Facility Owner or Operator: Ce  | rtification of receipt of | non-hazardous materials o                            | overed by                                       | d by this manifest.   |  |                  |                |          | /v-                  |  |  |
| T                | Printed Name  | 1                         | Signature  |   |   |  |                  | Month          | Day /    | (Year                |  |  |
|                  | White TREATMENT STORAGE DIS   | PROSAL FACILITY CORY      | Blue- GENERATOR                                      | ue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY |   |  |                  |                | -        |                      |  |  |

Pink- FACILITY USE ONLY

Superior Landfill AND Likk to Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

(minima) 子证据的专作 【绝写上367

Contour Name of the first the Strometern of the Carrier (infilitern) by Volume Ticket Date 05/07/2018 Vehicle# C25 Payment Type Credit Account Container Manual Ticket# Driver Hauling Ticket# Check# Billing # 0001037 Route Gen EPA ID NR State Waste Code Manifest 6677750

Destination

Denorator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) TES DEBRO DEPREMO DESIRO DE PUBLIC. EN ONTERRANTE

Time In 05/07/2018 09:27:20

Out 05/07/2018 09:27:20

Scale Inbound 1

Operator rb

Gross Tare Net Tons

53220 lb 27040 lb 26180 lb 13.09

Comments

The late 100 Rate Tox Amount. Product

COAL ASH & COAL CO 100 13.09 Tons

PORTW

fobal ficket

micel for



# WW. NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |  |  |  |                   | The second second                   |  |                |                     |
|--|--|--|--|-------------------|-------------------------------------|--|----------------|---------------------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA  |  | nifest Doc N                             | No.               | 2. Page 1 of 7.5                    |  |                | 51                  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | The second secon | erator's Site Address (If dif<br>DRGIA POWER PLANT |  | ailing):          |                                     | st Number  | 66777          | 50                  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  |  | CROSSGATE RD.<br>RT WENTWORTH, GA                  | 31407                                    |                   |                                     | B. State G   | ienerator's ID |                     |
|  | 506-1365   |  |  |                   |                                     | AND THE CONTRACT OF THE PARTY O |                |                     |
| 5. Transporter 1 Company Name  | 1.   | 6. US EPA ID                                       | Number                                   |                   | C State T                           | ransporter's ID  |                |                     |
| 1120016  | radina   |  |  |                   |                                     | orter's Phone  |                |                     |
| 7. Transporter 2 Company Name  | 1. 6. 1  | 8. US EPA ID                                       | Number                                   |                   | E. State Transporter's ID           |  |                |                     |
|  | $\sim$   |  |  |                   | F. Transporter's Phone              |  |                |                     |
| 9. Designated Facility Name and Sit  | e Address  | 10. US EPA II                                      | Number                                   |                   |                                     |  |                |                     |
| SUPERIOR LANDFILL  |  |  |  |                   | G. State Facility ID                |  |                |                     |
| 3001 LITTLE NECK ROAD  |  |  |  | C-71-2-1-1        | H. State Facility Phone 912-927-613 |  |                | 7-6113              |
| Savannah, GA 31419   |  |  |  |                   |                                     |  |                |                     |
| 11. Description of Waste Materials   |  |  |  | ntainers          | 13. Total<br>Quantity               | 14. Unit<br>Wt./Vol.   | I., Misc       | . Comments          |
| a. COAL ASH& COAL CONTAI   |  | 0  | No.                                      | Туре              | Quantity                            | VV (. / VOI.   |                |                     |
| N  |  | (1   | 2  | DI                | 10                                  |  |                |                     |
| R WM Profil  | e# 375200GAKRA   | Ct   | $\times$                                 | 7                 |                                     |  | 3040-3111      | manage and a second |
| A b.   | •  |  |  |                   |                                     |  |                |                     |
| T<br>O   | vana na El- 4  |  |  |                   |                                     |  |                |                     |
| R c.   | WM Profile #   |  |  | II III EUR MODMIN |                                     |  |                |                     |
|  |  |  |  |                   |                                     |  |                |                     |
|  | WM Profile #   |  |  |                   |                                     |  |                |                     |
| d.   |  |  |  |                   |                                     | 7 - 4  |                |                     |
|  | WM Profile #   |  | E PER PER PER PER PER PER PER PER PER PE |                   |                                     |  |                |                     |
| J. Additional Descriptions for Mat   | The second secon |  | K. Dispo                                 | sal Location      |                                     | d I de la companya de  |                |                     |
|  |  |  | Cell s                                   | 177               |                                     | * 1× 1   | Level          | 225                 |
|  |  |  | Grid                                     | 156               | 0/6                                 | ( wy   | 1000           | 366                 |
| 15. Special Handling Instructions a  | nd Additional Information  | 1  | 1  |                   |                                     |  |                |                     |
|  |  |  |  |                   |                                     |  |                |                     |
| P. J. O. J. H. CDC107C01   | 202  | EMERGENCY COI                                      | NTACT / DE                               | IONE NO :         |                                     |  |                |                     |
| Purchase Order # GPC107602   | 293  | TIVIERGENCE CO                                     | VIACI/II                                 | IONE NO.:         |                                     |  |                |                     |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-design in the service of the servi | cribed materials are not h   | nazardous wastes as defin                          | ed by CFR                                | Part 261 or       | any applicab                        | le state law, h  | ave been fully | / and               |
| accurately described, classified and   | packaged and are in pro  | per condition for transpo                          | rtation acc                              | ording to ap      | oplicable regi                      | ulations.  |                |                     |
| Printed Name   |  | Signature "On beha                                 | lt ot"                                   |                   |                                     |  | Month          | Day Yea             |
| T 17. Transporter 1 Acknowledgeme  | ent of Receipt of Materials  |  |  |                   |                                     |  |                | 1 10                |
| Printed Name   |  | Signature*   | -  |                   |                                     |  | Month          | Day Yea             |
| M. charlos   |  | X mill   | try                                      | ~                 | 1                                   |  | 151            | 1 118               |
| 18. Transporter 2 Acknowledgeme  | ent of Receipt of Materials  | Signature  |  |                   |                                     |  | Month          | Day Yea             |
| T Printed Name   |  | Jigilatule   |  |                   |                                     |  |                |                     |
| R 40 C VIII to Established   | Disposal   |  |  |                   |                                     |  |                |                     |
| 19. Certificate of Final Treatment/  | uisposai<br>ed treatment facility tha  | it to the best of my knowl                         | edge, the a                              | bove-descr        | ibed waste                          | was managed  | in compliance  | with all            |
| applicable laws, regulations, permi  | ts and licenses on the dat   | tes listed above.                                  |  |                   |                                     |  |                |                     |
| 20. Facility Owner or Operator: Co   | ertification of receipt of n   | on-hazardous materials c                           | overed by                                | this manife       | st.                                 |  |                | Davis               |
| Printed Name   | 13   | Signature  |  |                   |                                     |  | Month          | Day Yea             |
| White- TREATMENT, STORAGE, DI  | SPOSAL FACILITY COPY   | Blue- GENERATOR                                    | #2 COPY                                  |                   | Y                                   | ellow- GENER   | ATOR #1 COP    | Y                   |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY

Superior Land(i)) 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

the himmed Ticket# 1251408

Eustimer Name Blinds Arbid SZERMAGAKRA BLUKB) Garrier - 11 URB S TRUCKING 11 C

Ficket Date - 05/07/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677751

Destination

(14)

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/07/2018 10:00:54

In Out 05/07/2018 10:00:54

Scale Inbound 1

rb

Operator

rb

Gross Tare

Untumn

48860 lb 22980 1b

Net

25880 1b

Tons

12.94

Comments

Product.

- (24. 0

HIM

Kat.c

Unhinted Just Container

Billing #

Gen EPA ID NR

Driver

Check#

0001037

(marille)

COAL ASH & COAL CO 100 12.94 Tons

PORTW

Testail Trans Intal ficket



## WW. NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |  |  |               | aren pre-ve                |   |  |                                  |  |
|--|--|--|---------------|----------------------------|---|--|----------------------------------|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EP N /                               |  | nifest Doc N  | lo.                        | 2. Page 1 of                                      |  |                                  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GE   | nerator's <mark>Site Address</mark> (If di<br>ORGIA POWER PLAN <sup>*</sup><br>5 CROSSGATE RD. |               | iling):                    | A. Manifes  | MNA  | 6677751                          |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-!                              |  | RT WENTWORTH, GA   | 31407         |                            |   | B. State G   | enerator's ID                    |  |
| 5. Transporter 1 Company Name  | × 1:20   | 6. US EPA ID   | Number        |                            |   | ansporter's ID   |                                  |  |
| 7. Transporter 2 Company Name  | gaing  | 8. US EPA ID   | Number        |                            | D. Transporter's Phone  E. State Transporter's ID |  |                                  |  |
| 9. Designated Facility Name and Sit  | e Address  | 10. US EPA   | D Number      |                            | F. Transporter's Phone G. State Facility ID       |  |                                  |  |
| 3001 LITTLE NECK ROAD Savannah, GA 31419   |  |  |               |                            | H. State Facility Phone 912-927-611               |  |                                  |  |
| 11. Description of Waste Materials   |  |  | 12. Co<br>No. | ntainers<br>Type           | 13. Total<br>Quantity                             | 14. Unit<br>Wt./Vol.   | I. Misc. Comments                |  |
| a. COAL ASH& COAL CONTAI   |  |  | 706           | DI                         | 18  |  |                                  |  |
| WM Profil<br>b.  | e# 375200GAKRA   | Principles   |               |                            |   |  |                                  |  |
|  | WM Profile #   |  |               |                            |   |  |                                  |  |
|  | WM Profile #   |  |               |                            |   | A CONTROL OF THE CONT | <b>↓</b>                         |  |
| d  |  | 1 - 1 - 1 ×  |               |                            | V .   | 8  | * *                              |  |
| J. Additional Descriptions for Mat   | WM Profile #<br>cerials Listed Above                   |  | K. Dispo      | sal Location               | า   |  |                                  |  |
|  | A  |  | Grid Grid     | ){(                        | 1291  | e8/1   | Level 3260                       |  |
| 15. Special Handling Instructions a  | nd Additional Informati                                | on-  | *             |                            | P   |  |                                  |  |
| Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE:   | 293  | EMERGENCY CO   | NTACT / PH    | IONE NO.:                  |   |  |                                  |  |
| I hereby certify that the above-des accurately described, classified and                                       | cribed materials are no<br>I packaged and are in p     | roper condition for transpo  | ortation acco | Part 261 or<br>ording to a | any applicab<br>pplicable regi                    | le state law, h<br>ulations.   | ave been fully and  Month Day Yo |  |
| Printed Name  B T Dovice  T 17. Transporter 1 Acknowledgeme  | ent of Receipt of Materi                               | Signature "On beha   | alt of        |                            | 1   |  | 5 7 0                            |  |
| Printed Name Ross  | 4  | Signature  | U             | 211                        | / ,   |  | Month Day Y                      |  |
| Printed Name   | ent of Receipt of Materi                               | Signature  | - /           | //                         |   |  | Month Day Y                      |  |
| 19. Certificate of Final Treatment/  I certify, on behalf of the above lis  applicable laws, regulations, perm | ted treatment facility, t<br>its and licenses on the c | lates listed above.  |               |                            |   | was managed  | in compliance with all           |  |
| 20. Facility Owner or Operator: C  | ertification of receipt of                             | Fnon-hazardous materials Signature   | covered by    | this manife                | est.  |  | Month Day                        |  |
| White- TREATMENT, STORAGE, DI  | SPOSAL FACILITY COPY                                   | Blue- GENERATO   | R#2 COPY      |                            | Y   | ellow- GENER   | ATOR #1 COPY                     |  |

Pink-FACILITY USE ONLY

Volume



Superior transfill 3001 Liktio Mock Rd Savannah, GA, 31419 Ph: (912) 927-6113

CHARLES THE STRUCKING THE CHARLES THE STRUCKING III Vehicle# JØ1

Ticket Date 05/07/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677752

Destination

(31)

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/07/2018 10:17:44 In

Out 05/07/2018 10:17:44

Scale

Inbound 1

rb

Operator

Container Driver

Billing # 0001037

Jan Cl.

Gen EPA ID NR

Check#

Gross Tare Net

23340 lb 30300 lb

53640 15

Tons

15.15

Comments

Omenuit. (heinin Rate : Tax 1 11% (41.9 世地 Prachat

1 COAL ASH & COAL CO 100 15.15 Tons

PORTW

Total Tax fobal floket



## WWW. NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                     |  | Mar            | nifest Doc N   | 0.           | 2. Page 1 c           | of   | 0                       | 101        | 7      |
|--|---|--|----------------|----------------|--------------|-----------------------|--|-------------------------|------------|--------|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE ATLANTA, GA 30308-3374  | GEO<br>, BIN#10221 155<br>PO                              | A<br>erator's Site Add<br>ORGIA POWER<br>CROSSGATE<br>RT WENTWOR | R PLANT<br>RD. | KRAFT          | iling):      | A. Manifes            | MNA  | 66777<br>Generator's II |            | D      |
| 4. Generator's Phone 404- 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | 506-1365<br>ading   |  | JS EPA ID      |                |              | D. Transpo            | ansporter's IC<br>orter's Phone<br>ansporter's IC<br>orter's Phone | ana project             | 1          |        |
| 9. Designated Facility Name and Si<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | ite Address   | 10.  | US EPA II      | O Number       |              | G. State F.           |  | 912-92                  | 27-6113    |        |
| G 11. Description of Waste Materials E a. COAL ASH& COAL CONTA   |   |  |                | 12. Cor<br>No. | Type         | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.   | I. Mis                  | c. Comment | S      |
| N E WM Profi   | ile# 375200GAKRA  |  |                | 0/             | PI           | 10                    |  |                         |            |        |
| O R C.   | WM Profile #  |  |                |                |              |                       |  |                         |            |        |
| d.  J. Additional Descriptions for Ma  | WM Profile #<br>Iterials Listed Above                     |  |                | K. Dispos      | sal Location |                       |  | Level 🤈                 |            | -0     |
| 15. Special Handling Instructions a  | and Additional Informatic                                 | on   |                | Grid           | ) } } ¢      | 1290                  | 43/11  | e 5C                    |            |        |
| Purchase Order # GPC10760  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-deaccurately described, classified an                  | scribed materials are not                                 | hazardous waste  | es as defin    | NTACT / PH     | Part 261 or  | any applicab          | le state law, h  | nave been ful           | ly and     |        |
| Printed Name  7 17. Transporter 1 Acknowledgem   |   | Signature  | "On beha       | If of"         |              |                       | 1  | Month                   | Day 7      | Year / |
| Printed Name  N S 18. Transporter 2 Acknowledgem   | aull  | Signature  |                | (              | 2            | in                    | 11   | Month                   | Day        | Year / |
| Printed Name   |   | Signature  |                |                |              |                       |  | Month                   | Day        | Year   |
| 19. Certificate of Final Treatment I certify, on behalf of the above list applicable laws, regulations, pern 20. Facility Owner or Operator: A | sted treatment facility, th<br>nits and licenses on the d | ates listed above  |                |                |              |                       | was managed  | in compliand            | ce with al |        |
| 20. Facility Owner or Operator: Compared Name  White- TREATMENT, STORAGE, D  | 13  | Signature  | 的              | t #2 COPY      |              |                       | 'ellow- GENEF  | Month                   | PY         | /Year) |

Pink- FACILITY USE ONLY



Superior (south)() 30001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/07/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677753

Destination

(31)

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/07/2018 09:50:36 In Out 05/07/2018 09:50:36

Scale Inbound 1

Operator rb rb

Billing # 0001037

Gen EPA ID NR

Gross Tare Net Tons

55080 lb 25980 15 29100 lb .. 14.55

Comments

INVASTE MANAGEMENT

Container

Driver

Check#

The cetters.

(Water)

Product.

COAL ASH & COAL CO 100

14.55 Tons

PORTH

Inkal Ticket



# WAND NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |  |                                  | THE WHILE | A STATE OF     |                  |  |                                  |                |                |             |  |
|---|--|----------------------------------|-----------|----------------|------------------|--|----------------------------------|----------------|----------------|-------------|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US  | EPA ID No.                       | Man       | ifest Doc N    | 0.               | 2. Page 1 of 9 1   |                                  |                |                |             |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                                |  | Generator's Site Addre           | PLANT     |                | iling):          | A. Manifes   | MNA                              | 6677           |                |             |  |
| 241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404- |  | 155 CROSSGATE R<br>PORT WENTWORT |           | 31407          |                  |  | B. State G                       | enerator's li  | 0              |             |  |
| 5. Transporter 1 Company Name   | 300-1303   | 6. US                            | EPA ID    | Number         |                  |  |                                  |                |                |             |  |
| 1/2004916   | radina   |                                  |           |                |                  | and the same of th | ransporter's ID<br>orter's Phone |                |                | 1           |  |
| 7. Transporter 2 Company Name   |  | 8, US                            | EPA ID    | Number         | 7                | E. State Transporter's ID F. Transporter's Phone   |                                  |                |                |             |  |
| 9. Designated Facility Name and Si  | te Address   | 10. U                            | S EPA II  | Number         |                  | C Caste Facility ID  |                                  |                |                |             |  |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD   |  |                                  |           |                |                  | G. State Facility ID  H. State Facility Phone 912-927-613  |                                  |                |                |             |  |
| Savannah, GA 31419  |  |                                  |           |                |                  | H. State Facility Phone 912-927-011  |                                  |                |                |             |  |
| 11. Description of Waste Materials  | 5  |                                  |           | 12. Cor<br>No. | ntainers<br>Type | 13. Total 14. Unit I. Misc. Commo  |                                  |                |                | S           |  |
| a. COAL ASH& COAL CONTA   |  |                                  | C         | No             | DI               | 18   |                                  |                |                |             |  |
| WM Profi  | le# 375200GAK  | RA                               |           |                |                  |  |                                  |                |                |             |  |
|   |  |                                  |           |                |                  |  |                                  |                |                |             |  |
| )<br>}  | WM Profile #   |                                  |           |                |                  |  |                                  | and the second |                | ar muliile  |  |
| <b>C.</b>   |  |                                  |           |                |                  |  |                                  |                |                |             |  |
|   | WM Profile #   |                                  |           |                |                  |  |                                  |                | Printer of the |             |  |
| d.  |  |                                  |           |                |                  |  |                                  | Link           |                |             |  |
|   | WM Profile #   |                                  |           |                |                  |  |                                  |                |                | 741141      |  |
| J. Additional Descriptions for Ma   | The state of the s |                                  |           | K. Dispos      | al Location      | 1  |                                  | (Amilyana)     | -              | Participant |  |
|   | 4  |                                  |           | Cell           | 320              | 1/20   | ing                              | Level          | 32             |             |  |
| 15. Special Handling Instructions a   | nd Additional Inform   | ation                            |           | 1              |                  |  | *                                |                | E              | 67          |  |
| Purchase Order # GPC10760   | 202  | EMERGE                           | NCY CON   | NTACT / PH     | ONE NO.:         |  |                                  |                |                |             |  |
| 16. GENERATOR'S CERTIFICATE:  | 233  |                                  |           |                |                  |  |                                  | V 1            |                |             |  |
| I hereby certify that the above-des   | cribed materials are   | not hazardous wastes             | as defin  | ed by CFR F    | art 261 or       | any applicab   | le state law, h                  | ave been ful   | ly and         |             |  |
| accurately described, classified and<br>Printed Name                            | d packaged and are ir  | Signature "C                     | on behal  | f of"          | Juling to a      | pplicable regi   | alacions.                        | Month          | Day            | Year        |  |
| BFILIDOUICH   |  | BP                               |           |                |                  |  |                                  | 15             | 7              | 18          |  |
| 17. Transporter 1 Acknowledgem  | ent of Receipt of Mat  | erials<br>Signature              |           | 7              | 01               |  |                                  | Month          | Day            | Year        |  |
| A Printed Name  | Cody   | 1 to                             | ns        | - 6            | 2/               |  |                                  | 5              | 7              | 18          |  |
| 18. Transporter 2 Acknowledgem  | ent of Receipt of Mat  |                                  |           |                | 0                |  |                                  | Month          | Day            | Year        |  |
| Printed Name  |  | Signature                        |           |                |                  |  |                                  | INIOITUI       | Day            | real        |  |
| 19. Certificate of Final Treatment  I certify, on behalf of the above lis       | /Disposal  | that to the best of m            | v knowl   | edge, the a    | bove-desc        | ribed waste  | was managed                      | in complian    | ce with all    |             |  |
| applicable laws, regulations, perm  | its and licenses on th   | e dates listed above.            |           |                |                  |  |                                  |                |                |             |  |
| 20. Facility Owner or Operator: C   | ertification of receipt  | t of non-hazardous ma            | terials c | overed by t    | his manife       | st.  |                                  | Month          | Day            | Year        |  |
| Printed Name  | 100  | Signature                        |           |                | 13               |  |                                  | )              | 1              | ( )         |  |
| White- TREATMENT, STORAGE, D  | ISPOSAL FACILITY COL   | PY Blue- GENI                    | FRATOR    | #2 COPY        |                  | Υ  | ellow- GENER                     | ATOR #1 CO     | PY             |             |  |

Pink- FACILITY USE ONLY



Superior (and(i)) 13 Ason stable towns. Savannah, GA, 31419 Ph: (912) 927-6113

Customer Name GEORGIAPOWE375200GAKRA GEDRGI Carrier FLORES TRUCKING LLC Ticket Date 05/07/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677754

Destination

(31)

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/07/2018 10:15:58

Out 05/07/2018 10:15:58

Comments

Product.

Scale Inbound 1

rb rb

Container

Billing #

Gen EPA ID NR

Driver Check#

> Gross Tare Net Tons

59160 lb 23540 16 35620 1b 17.81

Operator

(dt. y

田田

Rate

Term

Vehicle# J09 Volume

0001037

famount.

(William)

COAL ASH & COAL CO 100

17.81 Tons

PORTW

Test of Test Inhal ficket



# WW. NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |   |  |                         | A STATE OF THE STA | A PARTY OF THE STATE OF THE STA |               |  |             |  |
|--|---|--|-------------------------|--|--|---------------|--|-------------|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EI                    |  | nifest Doc No.          | 2. Page 1 d  | of   | 9             | 12                                       | )           |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                         | 1 | nerator's Site Address (If di<br>EORGIA POWER PLAN |                         | A. Manifes   | st Number  | 66777         | 54                                       | 1           |  |
| 241 RALPH MCGILL BLVD NE,  | BIN#10221 15                            | 55 CROSSGATE RD. 🏌                                 |                         |  | B. State G   | enerator's ID |  | 7           |  |
| ATLANTA, GA 30308-3374   | PC                                      | ORT WENTWORTH, GA                                  | 31407                   | 10 11 1  |  |               |  |             |  |
| 4. Generator's Phone 404-  | 506-1365                                | - C  |                         |  |  |               |  |             |  |
| 5. Transporter 1 Company Name  |   | 6. US EPA ID                                       | Number                  |  |  |               | ndini de la la                           | igge de     |  |
| 1201/1/2   | alian                                   |  |                         |  | ransporter's ID  |               |  |             |  |
| 101219 DI  | 901119                                  |  |                         | D. Transpo   | orter's Phone  |               |  |             |  |
| 7. Transporter 2 Company Name  |   | 8. US EPA ID                                       | Number                  | F State Ti   | E. State Transporter's ID  |               |  |             |  |
|  | 0                                       |  |                         | F. Transpo   |  |               |  |             |  |
| 9. Designated Facility Name and Sit                                      | e Address                               | 10. US EPA I                                       | D Number                |  |  |               |  | 1410        |  |
| SUPERIOR LANDFILL  |   |  |                         | G. State F   | acility ID   |               |  |             |  |
| 3001 LITTLE NECK ROAD  |   |  |                         | H. State F   | acility Phone  | 912-92        | 7-6113                                   |             |  |
| Savannah, GA 31419   |   |  |                         |  |  |               |  |             |  |
|  |   |  |                         | 10.71  | 10.000   |               |  |             |  |
| 11. Description of Waste Materials                                       |   |  | 12. Containers No. Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.   | I. Misc       | . Comment                                | É           |  |
| a. COAL ASH& COAL CONTAI   | MINATED WASTE                           |  | - ^ \ -                 | 17   |  | Ter Ter       |  | 100         |  |
|  |   |  | 14 DI                   | 18   |  |               |  |             |  |
| WM Profil  | e# 375200GAKR/                          | A  |                         |  |  |               |  |             |  |
| b.   |   |  |                         |  |  |               |  |             |  |
|  |   |  |                         |  |  |               | 1 1                                      |             |  |
|  | WM Profile #                            |  |                         |  |  |               |  |             |  |
| <b>C.</b>  |   |  |                         |  |  | 3             |  |             |  |
|  |   |  |                         |  |  |               |  | ACCOMMENSAS |  |
|  | WM Profile #                            |  |                         |  |  |               | A. A |             |  |
| d.   |   |  |                         |  |  |               |  |             |  |
|  | Total Park                              |  |                         |  |  |               |  |             |  |
|  | WM Profile #                            |  | K. Disposal Location    | <b>1</b>   |  |               |  |             |  |
| J. Additional Descriptions for Mat                                       | erials Listed Above                     |  | k, Disposal Locatio     | )II  |  |               |  |             |  |
|  | /                                       |  | Cell / \                | 0170   | 1,101  | Level         | 11-1                                     | 1           |  |
|  |   |  | Grid / Sof              | 0/27   | 4011   | PJO           | 100                                      | 01          |  |
| 15. Special Handling Instructions a                                      | nd Additional Informat                  | ion  |                         |  |  |               |  |             |  |
|  |   |  |                         |  |  |               |  |             |  |
|  |   |  |                         |  | 2  |               |  |             |  |
| Purchase Order # GPC10760  | 293                                     | EMERGENCY CO                                       | NTACT / PHONE NO.       |  |  |               |  |             |  |
| 16. GENERATOR'S CERTIFICATE:   |   | 1 - J 1  |                         |  |  |               | المسماد                                  |             |  |
| I hereby certify that the above-des accurately described, classified and | cribed materials are no                 | t hazardous wastes as defir                        | ned by CFR Part 261 o   | or any applicati   | ile state law, n   | ave been full | y anu                                    |             |  |
| Printed Name   | i packaged and are in p                 | Signature On beha                                  | of of"                  | аррисавие гев  | and thomas   | Month         | Day                                      | Year        |  |
| R F. Lippuich  |   | RX.  |                         | 17   | 1-31   | 5             | 7  | 1           |  |
| 17. Transporter 1 Acknowledgeme  | ent of Receipt of Mater                 | ials   |                         |  |  |               | 1  |             |  |
| Printed Name   | V                                       | Signature  | 1                       |  |  | Month         | Day                                      | Year        |  |
| BATTER BOOK OF   | 21                                      | (B) HOD  | X                       |  |  | 5             | 7  | 1           |  |
| 18. Transporter 2 Acknowledgement  | ent of Receipt of Mater                 |  | 1-1                     | ,  | 10   | T Marine T    | De                                       | 1           |  |
| Printed Name   | 11/                                     | Signature  | 1. 1/ 11                | 11.  |  | Month         | Day                                      | Year        |  |
| Dary/  | NP5                                     | TILL   | ud n                    | la   | 1  |               |  |             |  |
| 19. Certificate of Final Treatment/                                      | 'Disposal                               |  | 1                       |  |  |               |  |             |  |
| I certify, on behalf of the above lis-                                   | ted treatment facility, t               | that to the best of my know                        | ledge, the above-des    | cribed waste   | was managed  | in compliance | e with all                               |             |  |
| applicable laws, regulations, perm                                       | its and licenses on the                 | dates listed above.                                |                         |  |  |               |  |             |  |
| 20. Facility Owner or Operator: C  | ertification of receipt o               | f non-hazardous materials                          | covered by this manif   | est.   |  | 16            | _  | 1/4         |  |
| Printed Name   | 112                                     | Signature  | 1                       |  |  | Month         | Day                                      | Yea         |  |
| 1  | D                                       | ( V  | 1)                      |  | Callana Center   | ATOP #1 CCC   | /  | 0           |  |
| White-TREATMENT, STORAGE, DI   | SPOSAL FACILITY COPY                    |  |                         |  | ellow- GENER   | ATOK #1 COP   |  |             |  |
| Pink- FACILITY US  | ONLY                                    | Gold-TRANSPORT                                     | ER #1 COPY              |  |  |               |  |             |  |

Superior Landill) 3001 Little Neck Rd Savannish, Wh. 304050 Ph: (912) 927-6113

(minima) Ticket# 1251458

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING ficket Date 95/07/2010

DOTTONG Vehicles 1335

Payment Type Credit Account

Container

Manual Ticket# Hauling Ticket# Driver

Check# Billing # 0001037

State Waste Code Manifest 667/7065

Destination

(sea 119) DD NR

(21) Profile

Route

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/07/2018 11:19:00 Out 05/07/2018 11:19:00

Scale Inbound 1

Operator rb nb

57420 lb 27040 lb 30380 lb 15.19

Comments

In

WASTE MANAGEMENT

Prudud

1 11% (H. y

TION ROLE TOX

Charlettark

Gross

Tare

Net

Tons

COAL ASH & COAL CO 100 15.19 Tons

PORTW

fobal floket

Mind for



### **NON-HAZARDOUS MANIFEST**

|        | 1. Generator's US  | EPA ID No. Ma                   | nifest Doc No.   | 2. Page 1                 | of  |   |  |  |
|--------|--|---------------------------------|--|---------------------------|---|---|--|--|
|        | NON-HAZARDOUS MANIFEST N   | / A                             |  |                           |   | 10.30                                   |  |  |
|        | 3. Generator's Mailing Address:  | Generator's Site Address (If di | fferent than mailing):   | A. Manife                 | st Number   | 10-0                                    |  |  |
|        |  | GEORGIA POWER PLAN              | T KRAFT  | w                         | MNA   | 6677755                                 |  |  |
|        |  | L55 CROSSGATE RD.               |  |                           | Total Control of the | Generator's ID                          |  |  |
|        |  | ORT WENTWORTH, GA               | 31407  |                           | D, State C  | Jenerator 3 io                          |  |  |
|        | 4. Generator's Phone 404-506-1365  |                                 |  |                           |   |   |  |  |
|        | 5. Transporter 1 Company Name/   | 6. US EPA IE                    | Number   | English and               |   |   |  |  |
|        | 1 mola / / / / / / / / /   |                                 |  |                           | ransporter's IE   |   |  |  |
|        | 10034161901119   | A                               |  | D. Transp                 | D. Transporter's Phone  |   |  |  |
|        | 7. Transporter 2 Company Name  | 8. US EPA II                    | Number   | E. State Transporter's ID |   |   |  |  |
|        | J  |                                 |  | F. Transpo                | <b>)</b> ************************************   |   |  |  |
|        | 9. Designated Facility Name and Site Address   | 10. US EPA                      | D Number   | 7. Transpo                | orter 3 mone  |   |  |  |
|        | SUPERIOR LANDFILL  |                                 |  | G. State F                | acility ID  |   |  |  |
|        | 3001 LITTLE NECK ROAD  |                                 |  |                           | acility Phone   | 912-927-6113                            |  |  |
| 19     | Savannah, GA 31419   |                                 |  | Ti, State i               | deline) i mone  |   |  |  |
|        | Savarnian, divisi 113  |                                 |  |                           |   |   |  |  |
|        | 11. Description of Waste Materials   |                                 | 12. Containers   | 13. Total                 | 14. Unit<br>Wt./Vol.  | I. Misc. Comments                       |  |  |
| G<br>E |  |                                 | No. Type   | Quantity                  | Wt./VOI.  |   |  |  |
| N      | a. COAL ASH& COAL CONTAMINATED WASTE   | 1                               | 1 actor  | 17                        |   |   |  |  |
| E      | WM Profile # 375200GAKI  | ρ.Λ.                            | , XZI  |                           |   | CHARLES AND FAIR TO SELECT THE          |  |  |
| R      | b. WW Profile # 3/3200GAN  | nA C                            |  |                           |   |   |  |  |
| A<br>T | <b>b.</b>  |                                 |  |                           |   |   |  |  |
| o      |  |                                 |  |                           |   |   |  |  |
| R      | wm Profile #   |                                 |  |                           |   |   |  |  |
|        | <u> </u>   |                                 | A Table 1 San S  |                           |   |   |  |  |
|        | WM Profile #   |                                 | The Part of Part of the Part o |                           | 100000000000000000000000000000000000000   | 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |  |  |
|        | d.   | THE SHEET W                     |  |                           |   |   |  |  |
|        |  |                                 |  |                           |   |   |  |  |
|        | WM Profile #   |                                 |  |                           |   |   |  |  |
|        | J. Additional Descriptions for Materials Listed Above  |                                 | K. Disposal Locati   | on (                      | ulkessagtidianamatina   |   |  |  |
|        |  | No.                             |  | v                         |   |   |  |  |
|        |  |                                 | Cell   | 1291                      | NQ11  | Level LICH                              |  |  |
|        |  |                                 | Grid 12  | 110                       | 011   | PICCUT                                  |  |  |
|        | 15. Special Handling Instructions and Additional Informa   | ation                           |  |                           |   |   |  |  |
|        |  |                                 |  |                           |   |   |  |  |
|        |  | EMEDGENCY CO                    | NITACT / DHONE NO  |                           |   |   |  |  |
|        | Purchase Order # GPC10760293   | EIVIERGENCI CC                  | NTACT / PHONE NO.  | •                         |   |   |  |  |
|        | 16. GENERATOR'S CERTIFICATE:   |                                 | L CED Down 201   | ar any annlicah           | lo stato law h  | ave been fully and                      |  |  |
|        | I hereby certify that the above-described materials are n accurately described, classified and packaged and are in | not nazardous wastes as deli    | ortation according to  | applicable reg            | ulations.   | ave been runy and                       |  |  |
|        | Printed Name   | Signature "On beha              | alf of"  |                           | PARTY   | Month Day Year                          |  |  |
|        | BFILIPOUICH  | BP                              |  |                           | 41  | 5710                                    |  |  |
| Т      | 17. Transporter 1 Acknowledgement of Receipt of Mate   | erials                          |  |                           |   |   |  |  |
| R      |  | Signature                       | 05   | •                         |   | Month Day Year                          |  |  |
| N<br>S | 1 Pringed France   | 1 Mich                          | nd they  |                           |   | 15/18                                   |  |  |
| P      |  |                                 |  |                           |   |   |  |  |
| R      | Printed Name   | Signature                       |  |                           |   | Month Day Year                          |  |  |
| R      |  |                                 |  |                           |   |   |  |  |
|        | 19. Certificate of Final Treatment/Disposal  |                                 |  |                           |   |   |  |  |
| F      | Landiff, an habalf of the above listed treatment facility  | , that to the best of my know   | ledge, the above-des   | scribed waste             | was managed   | in compliance with all                  |  |  |
| C      | applicable laws, regulations, permits and licenses on the  | e dates listed above.           | 1  |                           |   |   |  |  |
| L      | 20. Facility Owner or Operators Certification of receipt   | of non-hazardous materials      | covered by this mani   | fest.                     |   |   |  |  |
| T      |  | Signature                       | (10)   |                           |   | Month Day Year                          |  |  |
| '      | (U   |                                 |  |                           |   | 1) 1 10                                 |  |  |
| _      | White TREATMENT STORAGE DISPOSAL FACILITY COP  | Y Blue- GENERATO                | R #2 COPY  | Y                         | ellow- GENER  | ATOR #1 COPY                            |  |  |

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Superson Land()) 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

(heighted) Ticket# 1251460

Volume

Costomer Name Elikerrich Zzarwerka bilder Garrier (2018-19 Ekunek Gunste Gronden

Ticket Date 05/07/2018

Vehicle# C26 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677756

Destination (4)

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time !

05/07/2018 11:22:27 In Out 05/07/2018 11:22:27

Comments

Scale Inbound 1

Operator

Container

Billing #

Gen EPA ID NR

Driver

Check#

Gross Tare Net

56660 16 25980 1b 30680 16

Tons

15.34

Product.

11(19)

0001037

flucture.

COAL ASH & COAL CO 100

15.34 Tons PORTW

Intal floket



# NON-HAZARDOUS MANIFEST

| ×                          | NON-HAZARDOUS MANIFEST 1. 0   | ID No.   | Mani            | fest Doc | No.   | 2. Page 1        | of   | 10:41                |             |              |      |  |
|----------------------------|---|--|-----------------|----------|---|------------------|--|----------------------|-------------|--------------|------|--|
|                            | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN# ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1  | rator's Site Addre<br>RGIA POWER I<br>CROSSGATE RI<br>T WENTWORT | KRAFT           | ailing): | A. Manifest Number  WMNA  B. State Generator's ID |                  |  |                      | to shirt    |              |      |  |
|                            | 7. Transporter 2 Company Name 7. Transporter 2 Company Name   | 6. US EPA ID Number  8. US EPA ID Number                         |                 |          |   |                  | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID F. Transporter's Phone |                      |             |              |      |  |
|                            | 9. Designated Facility Name and Site Addr<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | ress   | 10. U           | S EPA ID | Number  |                  | G. State F   |                      | 912-92      | 27-6113      |      |  |
| G                          | 11. Description of Waste Materials  |  |                 |          | 12. Co<br>No.                                     | ntainers<br>Type | 13, Total<br>Quantity  | 14. Unit<br>Wt./Vol. | I. Mis      | sc. Comments |      |  |
| E<br>N<br>E                | a. COAL ASH& COAL CONTAMINAT  | TED WASTE  |                 | (        | 26  | 16               | 17   |                      |             |              |      |  |
| R                          | b. WM Profile # 3   | 375200GAKRA  |                 |          |   |                  |  |                      |             |              |      |  |
| A<br>T<br>O<br>R           | WM Pr   | rofile#  |                 |          |   |                  |  |                      |             |              |      |  |
|                            | WM Pr   | rofile #   |                 |          |   |                  |  |                      |             |              |      |  |
|                            | d.  WM Pr  J. Additional Descriptions for Materials L   | \$20 W.E. (1.0) 20 0   |                 |          | K. Dispos   | sal Location     |  |                      |             |              |      |  |
|                            |   |  |                 |          | Cell<br>Grid                                      | N32              | 01)9   | 421                  | /Level 3    | 26           | H    |  |
|                            | 15. Special Handling Instructions and Addi  | itional Information  |                 |          |   |                  |  |                      |             |              |      |  |
|                            | Purchase Order # GPC10760293  | 100  | EMERGEN         | CY CONT  | ACT / PH  | ONE NO.:         |  |                      |             |              |      |  |
|                            | I hereby certify that the above-described naccurately described, classified and package Printed Name.   |  |                 | ansporta | ition acco  |                  |  |                      | we been ful | ly and       | Year |  |
|                            | B FIC. POVICE   |  | Belleville      | Deliail  |   |                  |  |                      | 5           | 71           | 18   |  |
| TRANS                      | 17. Transporter 1 Acknowledgement of Reprinted Name   |  | Signature       | _ (      | 00/   |                  |  |                      | Month       | Day          | Year |  |
| P<br>O<br>R<br>T<br>E<br>R | 18. Transporter 2 Acknowledgement of Re<br>Printed Name   | eceipt of Materials /  | Signature       |          | ation of the same                                 |                  |  |                      | Month       | Day          | Year |  |
| FACIL                      | 19. Certificate of Final Treatment/Disposal Certify, on behalf of the above listed treatapplicable laws, regulations, permits and light 20. Facility Owner or Operator: Certification | tment facility, that t<br>icenses on the dates                   | s listed above. |          |   |                  |  | vas managed i        | n complianc | e with all   |      |  |
| I<br>T<br>Y                | Printed Name  |  | Signature       | g)       |   |                  |  | ellow- GENERA        | Month       | Day          | Year |  |

Pink- FACILITY USE ONLY

Volume



Superior Landfill 3001 Little Neck Rd Savaunida, 60, 31419 Ph: (912) 927-6113

Original Ticket# 1251473

Constance Name BLORES AFONE SZEPONESIKKO BLORES CAPPERS - TEORIS TRUCKS NO 1115

ficket Oake W3/0//2010

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 667/757

Destination

Promise

SZEPONONICKA (CONFORM SEE ETRE CONTONOMOTED WHILE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/07/2018 11:44:59

Out 05/07/2018 11:44:59

Scale Inbound 1

Operator rb rb

Gross Tare

52800 lb 22980 lb 29820 1b

Net Tons

14.91

Comments

Product

(21. 1

11111

Vehicete# JWG

Gen EPA ID NR

Container

Driver

Check# Billing #

Trin

0001037

Americant.

(William)

CHAN THAT & CALL CALL

14.50 Tens

THEFT

Tutal Tax Cobal Chelent



# WAY NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |   | Market Strategy and Strategy and Strategy                                 |                         | Control of the Control   |              |                             |              |              |      |
|--|---|---|-------------------------|--------------------------|--------------|-----------------------------|--------------|--------------|------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EI  |   | 2. Page 1               | of                       | 10:47        |                             |              |              |      |
| 3. Generator's Mailing Address: GEORGIA POWER  | Ge<br>GE  | The second  | st Number               | 6677757                  |              |                             |              |              |      |
| 241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-                                |   | .5 CROSSGATE RD.<br>DRT WENTWORTH, GA                                     | B. State Generator's ID |                          |              |                             |              |              |      |
| 5. Transporter 1 Company Name  |   |   |                         | 6. US EPÁ ID Number      |              |                             |              |              |      |
| 7. Transporter 2 Company Name  | 8. US EPA ID  | D. Transporter's Phone  E. State Transporter's ID  F. Transporter's Phone |                         |                          |              |                             |              |              |      |
| 9. Designated Facility Name and Si<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD                               | te Address  | 10. US EPA I  | D Number                |                          | G. State F   | acility ID<br>acility Phone |              |              |      |
| Savannah, GA 31419   |   |   | 12. Cor                 | ntainers                 | 13. Total    | 14. Unit                    |              |              |      |
| G 11. Description of Waste Materials   |   |   | No.                     | Туре                     | Quantity     | Wt./Vol.                    | I. Mis       | sc. Comment: | S    |
| a. COAL ASH& COAL CONTA  | MINATED WASTE   |   | 06                      | DT                       | 18           |                             |              |              |      |
| R WM Profit  | IE# 3/3200GARRA   | *   |                         |                          |              |                             |              |              |      |
| C.   | WM Profile #  | <u> </u>  |                         |                          |              |                             |              |              |      |
|  | WM Profile #  |   |                         |                          |              |                             |              |              |      |
| d.   | Carlo | - K   | 25                      | 12                       | e d          | 10                          |              |              |      |
|  | WM Profile #  |   | L D                     | 11                       |              |                             |              |              |      |
| J. Additional Descriptions for Ma  | terials Listed Above  |   | Cell Grid               | Ral Location             | 1129         | WALL                        | Level        | Eb           | SCI  |
| 15. Special Handling Instructions a  | nd Additional Informati   | on  |                         | <i>y</i> 0.              |              |                             |              |              |      |
| Purchase Order # GPC10760  | 293   | EMERGENCY CO  | NTACT / PH              | ONE NO.:                 |              |                             |              |              |      |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-des accurately described, classified and         | cribed materials are not  | t hazardous wastes as defir   | ed by CFR P             | Part 261 or ording to an | any applicab | le state law, ha            | ave been ful | lly and      |      |
| Printed Name   |   | Signature "On beha  | lf of"                  |                          |              |                             | Month        | Day          | Year |
| T 17. Transporter 1 Acknowledgeme  | ent of Receipt of Materi  | Signature   | 1/1                     | 1                        | /            |                             | Month        | Day          | Year |
| 18. Transporter 2 Acknowledgem   | ent of Receipt of Materi  | HV.   | 9                       |                          |              | Month                       | Day          | Year         |      |
| T Frilled Name   |   | Signature   |                         |                          |              |                             |              |              |      |
| 19. Certificate of Final Treatment,  I certify, on behalf of the above lis  applicable laws, regulations, perm | ted treatment facility, the its and licenses on the c   | lates listed above.   |                         |                          |              | was managed i               | in compliand | ce with all  |      |
| 20. Facility Owner or Operator: C  |   |   | overed by t             | his manifes              | it.          |                             |              | J.           |      |
| Printed Name   | 23  | Signature   | 19)                     |                          |              | III AFIJE                   | Month        | Day          | Year |
| White-TREATMENT, STORAGE, D  | SPOSAL FACILITY COPY  | Blue- GENERATOR   | #2 COPY                 |                          | Υ            | ellow- GENERA               | ATOR#1 CO    | PY           |      |

Pink- FACILITY USE ONLY



Superior Land())) 3001 Little Neck Rd Savannidh, 60, 31419 Ph: (912) 927-6113

(minima) Ticket# 1251495

Votume

Customer Name BLURGIAPON 37489066KRA BLURBI Carrier - ILORES TRUCKING ILC

Ticket Date Wi70//2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Wante Cade

Manifest 6677758

Destination

(4)

TENGTO STANDARDER (CONTROL CONTROL CONTROL DESCRIPTION OF THE PROPERTY OF THE

Time

In 05/07/2018 12:19:41 Out 05/07/2018 12:19:41

Scale Inbound 1

Operator rb rb

Gross Tare Net

Tons

51780 16 23340 lb 28440 1b 14.22

Comments

Product

130% (869

(战功)

Mist.

Volvieto# JMI

General (1911) NK

Billing # 0001037

Container Driver

Check#

THE

Mistrellini.

Induin

COAL ASH & COAL CO 100

14.22 Tons

PORTW

Telas Tax fobal fleket



### **NON-HAZARDOUS MANIFEST**

| NON-HAZARDOUS MANIFEST   | 1. Generator's US E                                      | PA ID No.          | Ma  | nifest Doc I | No.  | 2. Page 1 c                               | of                               | 11.            | 1               |  |
|--|--|--------------------|---|--------------|--|---|----------------------------------|----------------|-----------------|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, I ATLANTA, GA 30308-3374 4. Generator's Phone 404-50 | enerator's Site<br>EORGIA POV<br>55 CROSSGA<br>ORT WENTV | WER PLAN<br>TE RD. | T KRAFT   | ailing):     | A. Manifest Number WMNA  B. State Generator's ID |   |                                  |                |                 |  |
| 5. Transporter 1 Company Name  | ading  | 6.                 | US EPA IC                                       | Number       |  | N. C. | ransporter's II<br>orter's Phone |                |                 |  |
| 7. Transporter 2 Company Name  |  | 8.                 | US EPA II                                       |              |  | 6   | ransporter's II<br>orter's Phone |                |                 |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                     | Address  | 10.                | US EPA  | D Number     |  | G. State F                                | acility ID<br>acility Phone      | 912-92         | 7-6113          |  |
|  |  |                    |   |              | ontainers  | 13. Total                                 | 14. Unit                         | I. Misc        | . Comments      |  |
| Description of Waste Materials     COAL ASH& COAL CONTAM   |  |                    | ~   | No.          | Туре   | Quantity                                  | Wt./Vol.                         |                |                 |  |
| b.   | # 375200GAKR   | A                  |   |              |  |   |                                  | D D            |                 |  |
| C  | VM Profile #   |                    |   |              |  |   |                                  |                |                 |  |
| d.   | WM Profile #  WM Profile #                               |                    |   |              |  |   |                                  |                |                 |  |
| J. Additional Descriptions for Mate  |  |                    |   | K. Dispo     | osal Location                                    | ngu                                       | 116                              | Level 7        | 1)SF            |  |
| 15. Special Handling Instructions and Additional Information   |  |                    |   |              |  |   |                                  |                |                 |  |
| Purchase Order # GPC107602   | 93   | EN                 | MERGENCY CO                                     | ONTACT / P   | HONE NO.:  |   | AN .                             |                |                 |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name           | ribed materials are no<br>packaged and are in            | proper condition   | vastes as defi<br>on for transp<br>ture "On beh | ortation ac  | Part 261 or<br>cording to a                      | any applicat<br>oplicable reg             | ole state law,<br>ulations.      | have been full | y and  Day  Yea |  |
| 17. Transporter 1 Acknowledgemen   | nt of Receipt of Mate                                    | rials              | ture  |              |  | 10  |                                  | Month          | Day Yea         |  |
| 18. Transporter 2 Acknowledgement Printed Name   | nt of Receipt of Mate                                    | rials Signa        | ture  |              |  | 7   |                                  | Month          | Day Ye          |  |
| 19. Certificate of Final Treatment/I<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit      | ed treatment facility,<br>ts and licenses on the         | dates listed at    | oove.   |              |  |   | was managed                      | d in complianc | e with all      |  |
| 20. Facility Owner or Operator: Ce   | rtification of receipt                                   |                    | ous materials<br>ature                          | covered by   | rnis manife                                      | SC.                                       |                                  | Month          | _Day ye         |  |

Pink- FACILITY USE ONLY



Superior Landfill SWWI Little Mock Rd Savannah, 60, 31419 Phis (9)(2) 967 (3)(3)

Original Fickest# (3051696

1251494

Customer Name B DRSDAFOM 375 WORDKRA B ORS Carrier 11 DRS TRUCKING 41 C

flekek Dake 96/07/2013

Payment Type Credit Account

Manual Ticketh

Hauling Ticket#

Route -

State Waste Cade

Man ( First 667/73)

Destination

(10)

Generator

SYSTEMMENTALS) SCHOOL FROM IN CONTROL OF THE PROPERTY OF THE STATE OF

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/07/2018 12:17:52

Out 05/07/2018 12:17:52

Scale Inbound 1

Operator rb rb

Gross Tare Net Tons

Volume

58340 1b 23540 lb 34800 1b 17.40

Comments

Pradict.

(44.0

Helita (ell Jur)

Container

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Check#

Billing #

Sen 119(1)) WK

tilling Radie Tank

0001037

Omount

1 (300) 7831 & (300) (31 100) 17, 40 Tents

PURIN

Tuber Test fokal fleket



## WATER NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   | 1. Generator's US EP                                 | Ma ID No.  | nifest Doc N   | lo.  | 2. Page 1 c                                      | of                          |                                   |  |
|--|--|--|----------------|--|--|-----------------------------|-----------------------------------|--|
| NON-HAZARDOUS MANIFEST   | N /  |  | IIII CSC DOC I |  | 2380   |                             | 11.25                             |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | GE<br>BIN#10221 15                                   | nerator's Site Address (If d<br>ORGIA POWER PLAN<br>5 CROSSGATE RD.<br>DRT WENTWORTH, G. | T KRAFT        | siling):   | A. Manifes                                       | MNA                         | 6677759<br>Generator's ID         |  |
| AND THE RESIDENCE OF THE PROPERTY OF THE PROPE | 06-1365  | NOT WENT WORTH, G  | (31,0)         |  |  |                             |                                   |  |
| 5. Transporter 1 Company Name  | radino   | ĵ  | ) Number       |  | C. State Transporter's ID D. Transporter's Phone |                             |                                   |  |
| 7. Transporter 2 Company Name  |  | Number   |                | E. State Transporter's ID F. Transporter's Phone |  |                             |                                   |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD   | e Address  | 10. 03 67 A  |                |  | G. State F                                       | acility ID<br>acility Phone | 912-927-6113                      |  |
| Savannah, GA 31419   |  |  |                |  |  |                             |                                   |  |
| 11. Description of Waste Materials   |  |  | 12. Co<br>No.  | ontainers<br>Type                                | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.        | I. Misc. Comments                 |  |
| a. COAL ASH& COAL CONTAIN  |  | -  | 509            | DT   | 18   |                             |                                   |  |
| WM Profile.  | e# 375200GAKRA                                       | 1  |                | ALL COMM   |  |                             |                                   |  |
|  | WM Profile #   |  |                |  |  |                             |                                   |  |
| C.   |  |  |                |  |  |                             |                                   |  |
| 100000   | WM Profile #   |  |                |  |  |                             |                                   |  |
| d.   |  |  |                |  | 100  |                             |                                   |  |
|  | WM Profile #   |  |                |  |  |                             |                                   |  |
| J. Additional Descriptions for Mat   | erials Listed Above                                  |  | K. Dispo       | sal Location                                     | n  |                             | *                                 |  |
|  |  |  | Cell /         | 1320   | 1391   | NOH                         | Level S                           |  |
| 15. Special Handling Instructions at   | nd Additional Informati                              | ion  |                |  |  |                             | 322                               |  |
| 00040700   | 202  | EMERGENCY C  | ONTACT / PI    | HONE NO :  |  |                             |                                   |  |
| Purchase Order # GPC10760:<br>16. GENERATOR'S CERTIFICATE:   |  |  |                |  |  |                             |                                   |  |
| I hereby certify that the above-des-<br>accurately described, classified and   | cribed materials are no<br>I packaged and are in p   | roper condition for transp   | ortation acc   | Part 261 or<br>cording to a                      | any applicat<br>pplicable reg                    | ole state law,<br>ulations. | have been fully and  Month Day Ye |  |
| Printed Name   |  | Signature "On bel  | ian or         |  | 1  |                             | 571                               |  |
| 17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement  | Nest   | Signature  | buy            | U  | les  | 0                           | Month Day Yo                      |  |
| Printed Name   |  | Signature  | 117            |  |  |                             | Month Day Y                       |  |
| 19. Certificate of Final Treatment, I certify, on behalf of the above lis applicable laws, regulations, perm   | ted treatment facility, t<br>its and licenses on the | dates listed above.  |                |  |  | was manage                  | d in compliance with all          |  |
| 20. Facility Owner or Operator: C  | ertification of receipt o                            | of non-hazardous materials   | covered by     | this manife                                      | est.   |                             | Month Day Y                       |  |
| 100  |  | (1.3)  | ND #3 CODY     |  |  | Vellow- GENE                | RATOR #1 COPY                     |  |
| White-TREATMENT, STORAGE, DI   |  | Blue- GENERATO<br>Gold- TRANSPOR   |                | 7-   |  | Tellow- GENE                | MATON #1 COT                      |  |

Pink- FACILITY USE ONLY



Superior Landfill SMMI Little Needs Hil Savannah, GA, 31419 Pho (914) 989 6113

Original fickath (25) (53)

Votume

1251522

Caustomer Name (4 (NG) OPTHU 2712/00/60/KA) (5 (NG) Carrier (DOSTO GRODING CONSTOLERODING

Linkok Dako wii/w//2013

Payment Type Credit Account

Manual Ficketh Hauling Ticket#

Route

State Waste Code

Manifest 6677760

Destination

(14)

Phonis,

Denoration

SAFAMPARKED COM URIL & COM CONTURDINGO D MURITO 126 HEUROTOPRICHOT GEORGEO DERRET - DEDMET KRAFFE

Time

05/07/2018 13:03:22 In

Out 05/07/2018 13:03:22

Scale Inbound 1

Operator rb rb

Gross Tare Net

Tons

58100 16 27040 lb 31060 16

15.53

Comments

Premius.

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(1)

111時

Volumeto# 1225

Container

Billing #

Gen EPA ID NR

Driver

Check#

WWW.10.37

Mate and

the him

COAL ASH & COAL CO 100

15.53 Tons

PORTW

Total True fotal floket

Michel for



### WAY NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   | •  |   | Maria Salah  | 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |              |                         |                                 |   |            |      |  |
|--|--|---|--|--|--------------|-------------------------|---------------------------------|---|------------|------|--|
| NON-HAZARDOUS MANIFEST   | S EPA ID No.<br>N / A  | fest Doc N  |  | 2. Page 1 o                            | t            | 18:17                   |                                 |   |            |      |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEORGIA POWER  | enerator's Site Address (If different than mailing):<br>EORGIA POWER PLANT KRAFT          |  |  |              |                         | 6677760                         |   |            |      |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-   | BIN#10221<br>506-1365  | 155 CROSSGATE I<br>PORT WENTWOR   |  | 31407                                  |              | B. State Generator's ID |                                 |   |            |      |  |
| 5. Transporter 1 Company Name  | 6. U   | S EPA ID N  | lumber   |  |              |                         |                                 |   |            |      |  |
| 1 mala (-1)  | I would be walled  |   |  |  |              |                         | ansporter's ID<br>orter's Phone | X   |            |      |  |
| 7. Transporter 2 Company Name  | 8. U   | S EPA ID N  | lumber   |  |              |                         |                                 |   | 9/19/19    |      |  |
|  | _  |   |  |  |              |                         | ansporter's ID<br>rter's Phone  |   |            |      |  |
| 9. Designated Facility Name and Sit  | te Address   | 10.   | US EPA ID  | Number                                 |              |                         |                                 |   |            |      |  |
| SUPERIOR LANDFILL  |  |   |  |  |              | G. State Fa             |                                 | 912-92  | 7 6112     |      |  |
| 3001 LITTLE NECK ROAD  |  |   |  |  |              | H. State Fa             | acility Phone                   | 912-92  | \-0112     | Y    |  |
| Savannah, GA 31419   |  |   |  |  |              |                         |                                 |   |            |      |  |
| 11. Description of Waste Materials   |  |   |  | 12. Cor<br>No.                         | Type         | 13. Total<br>Quantity   | 14. Unit<br>Wt./Vol.            | I. Misc   | . Comments |      |  |
| a. COAL ASH& COAL CONTAI   | MINATED WAST   | Ē   | 1  | 0 -                                    | 1            | 17                      |                                 |   |            |      |  |
|  | 27520064   | VD A  | (-   | 92                                     | 101          | 1 0                     |                                 |   |            |      |  |
| b. WM Profi  | le# 375200GA   | KKA   |  |  |              |                         |                                 | 250 11 250 11 11 11 11 11 11 11 11 11 11 11 11 11 |            |      |  |
|  |  |   |  |  | 4            |                         |                                 |   |            |      |  |
| KILLING TO THE TOTAL OF  | WM Profile #   |   |  |  |              |                         |                                 |   |            |      |  |
| C.   |  |   |  |  |              |                         |                                 |   |            |      |  |
|  | WM Profile #   |   |  |  |              |                         | on supplied                     |   |            |      |  |
| d.   |  |   |  |  |              |                         |                                 |   |            |      |  |
|  |  |   |  |  |              |                         |                                 |   |            |      |  |
| J. Additional Descriptions for Ma  | WM Profile #<br>terials Listed Above   | <u> </u>  |  | K. Dispos                              | sal Location |                         |                                 | I January and                                     |            |      |  |
| 3. Additional Description  |  |   |  | Cell                                   | 20           | 0 0                     | 12 1                            | /Level  |            | -1   |  |
|  |  |   |  | Grid                                   | 5201         | 290                     | N9/1                            | 652   | E G        | 54   |  |
| 15. Special Handling Instructions a  | and Additional Infor   | mation  |  | 1                                      |              |                         |                                 |   |            |      |  |
|  |  |   |  |  |              |                         |                                 |   |            |      |  |
| Purchase Order # GPC10760  | 1203   | EMERG   | ENCY CON   | ITACT / PH                             | IONE NO.:    |                         |                                 |   |            |      |  |
| 16 CENERATOR'S CERTIFICATE   |  | ***********   | W  |  |              |                         |                                 |   | geries     |      |  |
| I be a but a setifut hat the above dos   |  | e not hazardous waste   | s as define  | ed by CFR                              | Part 261 or  | any applicab            | ile state law, h<br>ulations.   | nave been ful                                     | y and      |      |  |
| Thereby certify that the above det   | scribed materials ar   | · distanta  |  |  |              | plicable reg            |                                 | T.  | Day        | Year |  |
| accurately described, classified an  | d packaged and are   | in proper condition fo<br>Signature   | r transpor   | f of"                                  |              | 1                       |                                 | Month   | Panery     |      |  |
| Printed Name   | d packaged and are   | Signature   | r transpor   | f of"                                  | B            | 1                       |                                 | Konth   | 7          | 1    |  |
| Printed Name  17. Transporter 1 Acknowledgem   | d packaged and are   | Signature Signature   | r transpor   | f of"                                  | B            | 1                       |                                 | Month   | Day        | Yea  |  |
| accurately described, classified an Printed Name  17. Transporter 1 Acknowledgem Printed Name  | d packaged and are   | Signature   | r transpor   | f of "                                 | B            | -                       | ung                             | 5   | 7          | Yea  |  |
| Printed Name  17. Transporter 1 Acknowledgem  Printed Name   | ent of Receipt of M  | Signature aterials Signature  | "On behal  | fof"                                   | B            | <u></u>                 | andy .                          | Month 5   | Day        | 15   |  |
| Printed Name  17. Transporter 1 Acknowledgem  Printed Name  18. Transporter 2 Acknowledgem  Printed Name   | ent of Receipt of M  | Signature Signature Signature   | "On behal  | fof"                                   | B            |                         | -                               | 5   | 7          | 15   |  |
| Printed Name  17. Transporter 1 Acknowledgem Printed Name  18. Transporter 2 Acknowledgem Printed Name   | ent of Receipt of M  | Signature aterials Signature  | "On behal  | fof"                                   | Bi           | ~*                      | -                               | Month 5   | Day        | 18   |  |
| Printed Name  17. Transporter 1 Acknowledgem Printed Name  18. Transporter 2 Acknowledgem Printed Name  19. Certificate of Final Treatment Legify, on behalf of the above list   | ent of Receipt of M  Crazic  ent of Receipt of M  characteristics  charact | aterials  Signature  aterials  Signature  Signature  ity, that to the best of             | my knowl   | hA 1                                   | Bo           | `                       |                                 | Month 5   | Day        | Yea  |  |
| accurately described, classified an Printed Name  17. Transporter 1 Acknowledgem  Printed Name  18. Transporter 2 Acknowledgem  Printed Name  19. Certificate of Final Treatment I certify, on behalf of the above lise applicable laws, regulations, perm | ent of Receipt of M  Crace  ent of Receipt of M  ent of Receipt of M  c/Disposal  sted treatment facil nits and licenses on  | aterials  Signature  aterials  Signature  ity, that to the best of the dates listed above | Micoma was a superior of the s | half                                   | B)           | ibed waste              |                                 | Month 5   | Day        | Yea  |  |
| accurately described, classified an Printed Name  17. Transporter 1 Acknowledgem Printed Name  18. Transporter 2 Acknowledgem Printed Name  19. Certificate of Final Treatment Legify, on behalf of the above list   | ent of Receipt of M  Crace  ent of Receipt of M  ent of Receipt of M  c/Disposal  sted treatment facil nits and licenses on  | aterials  Signature  aterials  Signature  ity, that to the best of the dates listed above | my knowl   | half                                   | B)           | ibed waste              |                                 | Month 5   | Day        | Year |  |

White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY



Superior Landilli 3001 Little Neck Rd Savannah, Eh. 31419 Ph: (912) 927-6113

(wingma) Ticket# 1251532

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier | CDASTALGRADING COASTALGRADING

Ticket Date 05/07/2018

Payment Type Credit Account

Manual Ticket# Hauling Tickeds

Route

State Waste Code

Mantifest 6677761

Dettimation

(21)

Fredite Generator

STANDERSON (THE EAST TON CONTENT OF THE PARTY OF THE PART 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

(n - 955/96/739010) (351331397) Out 05/07/2003 18123108

Commission

Communical

Vehicle# C26

Container

Driver

Ulreaded a

Billing #

Gen HOWIN NIV

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this in the Rightly 15 \$4911.400 THE 14,57

14.57

Proubled.

11(16)

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Chatten Chil.

COAL ASH & COAL CO 100

14.57 Tons

PORTW

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# WAY NON-HAZARDOUS MANIFEST

|                  | WASTE MANAGEMENT   |   |               |                      | -00-2    |                |                  |                           |                                | 10-61         |            | 1    |  |
|------------------|--|---|---------------|----------------------|----------|----------------|------------------|---------------------------|--------------------------------|---------------|------------|------|--|
|                  | NON-HAZARDOUS MANIFEST   | 1. Generator's l  | lo.           | 2. Page 1 c          | f        | 12:            | 16               |                           |                                |               |            |      |  |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER   | Generator's Site Address (If different than mailing): GEORGIA POWER PLANT KRAFT |               |                      |          |                |                  | A. Manifest Number 667776 |                                |               | 61         |      |  |
|                  | 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | PORT WENTWORTH, GA 31407  |               |                      |          |                |                  |                           | B. State G                     | enerator's ID | )          |      |  |
|                  | Generator's Phone 404-506-1365  Fransporter 1 Company Name 6. US EPA ID  |   |               |                      |          |                | 100              | C State Tr                | ansporter's ID                 |               |            |      |  |
|                  | 7. Transporter 2 Company Name  9. Designated Facility Name and Site Address SUPERIOR LANDFILL  |   |               | 8. US EPA ID Number  |          |                |                  | The second second         | orter's Phone                  |               |            |      |  |
|                  |  |   |               |                      |          |                |                  |                           | ansporter's ID<br>rter's Phone |               |            |      |  |
|                  |  |   |               | 10. US EPA ID Number |          |                |                  | G. State Fa               | acility ID                     |               |            |      |  |
|                  | 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |   |               |                      |          |                |                  | H. State Fa               | acility Phone                  | 912-92        | 7-6113     |      |  |
| G                | 11. Description of Waste Materials   |   |               |                      |          | 12. Cor<br>No. | ntainers<br>Type | 13. Total<br>Quantity     | 14. Unit<br>Wt./Vol.           | I. Mise       | c. Comment | s    |  |
| E<br>N           | a. COAL ASH& COAL CONTAMINATED WASTE   |   |               |                      | $\wedge$ | Va             | DT               | 17                        |                                |               |            |      |  |
| E<br>R<br>A      | WM Profile   | -(  | H             |                      |          |                | pasadii C        |                           |                                |               |            |      |  |
| T<br>0           | WM Profile #   |   |               |                      |          |                |                  |                           |                                |               |            |      |  |
| R                | c.   |   |               |                      |          |                |                  |                           |                                |               |            |      |  |
|                  | WM Profile #   |   |               |                      |          |                |                  |                           |                                |               |            |      |  |
|                  | u.   |   |               |                      |          | 1              |                  |                           |                                |               |            |      |  |
|                  |  | WM Profile #  |               |                      |          |                |                  |                           |                                |               |            |      |  |
|                  | J. Additional Descriptions for Mate  | Cell A  | 32 //         | 7 g W                | 3/16     | Tevel /        | 659              | CF-                       |                                |               |            |      |  |
|                  | 15. Special Handling Instructions and Additional Information   |   |               |                      |          |                |                  |                           |                                |               |            |      |  |
|                  | Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  |   |               |                      |          |                |                  |                           |                                |               |            |      |  |
|                  | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and   |   |               |                      |          |                |                  |                           |                                |               |            |      |  |
|                  | accurately described, classified and packaged and are in proper condition for transportation according to applicable   |   |               |                      |          |                |                  |                           |                                | Month         | Day        | Year |  |
| Ŀ                | Printed Name B + 1 Povid   | On benan  | OI            |                      |          |                | 5                | 7                         | 18                             |               |            |      |  |
| Т                | 17. Transporter 1 Acknowledgemen   | nt of Receipt of Ma   |               | 1                    |          | 20             |                  |                           |                                |               |            |      |  |
| R<br>A<br>N<br>S | Y Printed Name   | idx   | X             | Signature            | ms       | Golf Month 1   |                  |                           |                                |               | Day        | Year |  |
| P<br>O<br>R      | Programme and the second secon | nt of Receipt of Ma   |               | Signature            | -        |                |                  |                           |                                | Month         | Day        | Year |  |
| T<br>E<br>R      | Printed Name   |   |               | algriature           |          |                |                  |                           |                                |               |            |      |  |
| F                | 19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all   |   |               |                      |          |                |                  |                           |                                |               |            |      |  |
| C                | applicable laws, regulations, permit 20. Facility Owner or Operator: Ce  | s and licenses on t   | he dates list | ted above.           |          |                |                  |                           |                                |               |            | 1    |  |
| I T              | 20. Facility Owner or Operator: Ce Printed Name  | )   | or or non-na  | Signature            | - / -    | )A             | and mannes       |                           |                                | Month         | Day        | Year |  |
| Y                | 1/3  | DOCAL FACILITY OF   | DDV.          | Pluc GEN             | NERATOR  | #2 COPY        |                  | ψ. <b>Y</b> .             | ellow- GENER                   | ATOR #1 COF   | PY         |      |  |
|                  | White TREATMENT STORAGE DIS  | POSAL FACILITY CO   | JPY           | BILLE- GET           | NERAIUK  | HZ CUPI        |                  | T.                        | THOU OF MEIN                   | .,            | 1/2/-      |      |  |

Pink- FACILITY USE ONLY

COAL ASH & COAL CO 100

14.56

Tons

Original flekold (251547

PORTW

Constance Name of Oktobiologics/Armonologics (Correct Property of Oktobiological Correct Property of Control o Ticket Date 05/07/2018 Vehicle# JØ6 Volume Payment Type Great Checount Container Manual fleketh Or 1922 Hauling Tickets Cheedell Route Billing # 0001037 State Waste Code Gen EPA ID NR Manifest 6677762 Destination [利] SVETOMETRICAL CORP. DELL & CORP. CONTROL MARCOLD Profile Donorakan 126 OCHRETOPRICADE DEBROOD POWER - PLANT KROET Million . Gran. tir some the 05/07/2018 13:48:11 In Inbound 1 rb Tare 22980 16 Out Bur W/ / Phila TX / / E 1 1 Mr. 多等的多物。 计标 14.58 Commissions Product 121.0 11(18) 1000 (m-juju francisco.

> Total Tas fobil ficket

J. CROSHY TRK 16)



### **NON-HAZARDOUS MANIFEST**

| WASTE MANAGEMENT  | 1. Generator's US                                 | EPA ID No Ma   | nifest Doc N               | lo.                 | 2. Page 1                     | of                       |  |
|---|---|--|----------------------------|---------------------|-------------------------------|--------------------------|--|
| NON-HAZARDOUS MANIFEST  |   | / A  | illiest boc                |                     | 2.,, 980.2                    |                          | 13:50  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374 | BIN#10221 1                                       | enerator's Site Address (Ifdi<br>EORGIA POWER PLAN<br>55 CROSSGATE RD.<br>ORT WENTWORTH, G | T KRAFT                    | ailing):            | A. Manife                     | 6677762<br>enerator's ID |  |
|   | 06-1365   |  |                            |                     |                               |                          |  |
| 5. Transporter 1 Company Name   |   | 6. US EPA II   | Number                     | 4                   |                               |                          |  |
| (120-1-1)   | 10100   |  |                            |                     |                               | ransporter's ID          |  |
| CO12141 61  | 91110   | NE FRA II  | Number                     |                     | D. Transp                     | orter's Phone            |  |
| 7. Transporter 2 Company Name   |   | 8. US EPA II   | Number                     |                     | F. State T                    | ransporter's ID          |  |
|   |   |  |                            |                     |                               | orter's Phone            |  |
| 9. Designated Facility Name and Sit   | e Address   | 10. US EPA   | ID Number                  | - 12-01             |                               |                          |  |
| SUPERIOR LANDFILL   |   |  |                            |                     | G. State F                    | acility ID               |  |
| 3001 LITTLE NECK ROAD   |   |  |                            |                     | H. State F                    | acility Phone            | 912-927-6113   |
| Savannah, GA 31419  |   |  |                            |                     |                               |                          |  |
|   |   |  | 12. Co                     | ntainers            | 13. Total                     | 14. Unit                 | Miss Comments  |
| 11. Description of Waste Materials  |   | 100  | No.                        | Туре                | Quantity                      | Wt./Vol.                 | I. Misc. Comments  |
| a. COAL ASH& COAL CONTAIN   | INATED WASTE                                      |  | DC-                        | NT                  | N                             |                          | The state of the s |
|   |   |  | NO.                        | DI                  | 110                           |                          |  |
| WM Profile  | e# 375200GAKF                                     | RA   |                            | Log Logical Company |                               |                          |  |
| b.  |   |  | 1                          |                     |                               | 11.7                     |  |
|   |   |  |                            |                     |                               | THE STATE                |  |
| C.  | WM Profile #                                      |  | TOTO A CONTRACTOR          |                     |                               |                          |  |
| 1   |   |  |                            |                     |                               | Y                        | <b>F</b>   |
|   | WM Profile #                                      |  |                            |                     |                               |                          |  |
| d.  |   |  | 7                          | 4                   |                               | 9                        |  |
| * * * * *   |   |  |                            |                     |                               |                          |  |
|   | WM Profile #                                      |  | V. Dieno                   | sal Location        |                               |                          |  |
| J. Additional Descriptions for Mat  | eriais Listed Above                               |  | K. Dispo                   | sai Locatioi        | 3                             |                          |  |
|   |   |  | Cell                       |                     | 112201                        | 70                       | Level  |
|   |   |  | Grid                       |                     | NOCUL                         | 9                        | 100000   |
| 15. Special Handling Instructions at  | nd Additional Informa                             |  |                            |                     |                               |                          | 65 ft  |
| Purchase Order # GPC107602  | 293   | EMERGENCY CO   | ONTACT / PH                | HONE NO.:           |                               |                          | No. 10   10   10   10   10   10   10   10  |
| 16. GENERATOR'S CERTIFICATE:  |   |  | 11                         | D- + 261            |                               | olo eteto leve l         | ave been fully and   |
| I hereby certify that the above-desc<br>accurately described, classified and                            | cribed materials are n                            | ot hazardous wastes as defi  | ned by CFR<br>ortation acc | ording to a         | any applicat<br>oplicable reg | ulations.                | ave been fully and   |
| Printed Name  | puckaged and are m                                | Signature "On beh  | alf of"                    | 7                   |                               |                          | Month Day Year   |
| BFILIDOUICL   | _   | BR   | •                          |                     |                               |                          | 15/1/1   |
| 17. Transporter 1 Acknowledgeme   | nt of Receipt of Mate                             |  |                            |                     |                               |                          |  |
| Printed Name  |   | Signature  | MP                         | 12h                 |                               |                          | Month Day Year   |
|   | 1   | wiple /  | 117 0                      | 11                  |                               |                          | 9 /18  |
| 18. Transporter 2 Acknowledgeme   | ent of Receipt of Mate                            | Signature  |                            | -                   |                               |                          | Month Day Year   |
| Printed Name  |   | Jignature  |                            |                     |                               |                          |  |
| R   | eraco - Tra                                       |  |                            |                     |                               |                          |  |
| 19. Certificate of Final Treatment/  I certify, on behalf of the above list                             | Disposal  | that to the best of my know  | vledge the                 | ahove-desc          | ribed waste                   | was managed              | in compliance with all   |
| I certify, on behalf of the above list applicable laws, regulations, permi                              | ed treatment facility,<br>its and licenses on the | e dates listed above.  | vicuge, tile               |                     |                               |                          |  |
| 20. Facility Owner or Operator: Co  | ertification of receipt                           | of non-hazardous materials   | covered by                 | this manife         | st.                           | 11                       |  |
| Printed Name  | MAN   | Signature  | 201                        |                     | 18-1                          | 1000                     | Month Day Year   |
| Y   | RO  | VC   | -()                        |                     |                               | TE Ante                  | 10907/9  |
| White- TREATMENT, STORAGE, DI   | SPOSAL FACILITY COP                               | Y Blue- GENERATO   | R #2 COPY                  |                     | + Y -                         | Yellow- GENER            | ATOR #1 COPY   |

Pink- FACILITY USE ONLY



Superior Land()) 3001 Little Neck Rd Savannah, EO, 30419 Phr (907) 9877 (303 (hrigina) Ticket# 1251573

Volume

Caustomer Name BLURE OFFINE STSPONSORRY BLURE) Carrier 11 (RES TRUCK) NB 11 C

Ticket Date 05/07/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Routen

State Waste Code

Manifest 6677763 Destination

(21)

Profite Generator

SMERMORDRING (CODE OS) & CODE CONTINUADED WOSTE)

126 DEORG (GEORGIAT DEORG IA POMER - PLANT KRAFT

Time

(n - 0.5/07/2013 14:34:30 Out - 0.7/07/2013 14:34:36

Scale

Mint L

Wh.

Gross

52840 1b

Net.

355,000 11: 14.75

Comments

#### **WASTE MANAGEMENT**

Operator

Vehicle# JØ1

(8(m 114) ))) NK

Ditting # DOUGLO.37

Container

Driver

Check#

Product 10% (Ry 10% Rate You Omen't Drigin

COAL ASH & COAL CO 100

14.75 Tons

POOLER

fotal ficket

an Cerl



# WATER NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |   |   |              | The same of the sa |                                |                                  |                        |  |  |
|---|---|---|--------------|--|--------------------------------|----------------------------------|------------------------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA                                 |   | nifest Doc I | No.  | 2. Page 1                      | of                               | 1:20                   |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,   | GEC   | erator's Site Address (If dif<br>DRGIA POWER PLANT<br>CROSSGATE RD, |              | ailing):   | 10.00                          | st Number                        | 6677763                |  |  |
| ATLANTA, GA 30308-3374  |   | T WENTWORTH, GA   | 31407        |  |                                | B. State C                       | Generator's ID         |  |  |
| 5 Transporter 1 Company Name  | ading   | 6. US EPA ID  | Number       |  |                                | ransporter's II<br>orter's Phone | )                      |  |  |
| 7. Transporter 2 Company Name   |   | 8. US EPA ID  | Number       |  |                                | ransporter's II<br>orter's Phone |                        |  |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419                             | Address   | 10. US EPA I  | D Number     |  | G. State F                     | acility ID<br>acility Phone      | 912-927-6113           |  |  |
| 11. Description of Waste Materials  |   |   | 12. Co       | ontainers<br>Type  | 13. Total<br>Quantity          | 14. Unit<br>Wt./Vol.             | I Misc Comments        |  |  |
| a. COAL ASH& COAL CONTAM  | INATED WASTE # 375200GAKRA                            | J   | 01           | DT   | 18                             |                                  |                        |  |  |
| b.  | /M Profile #  |   |              |  |                                |                                  |                        |  |  |
| c.  | NWI Profile #   |   |              |  |                                | Marine Statement                 |                        |  |  |
| d.  | /M Profile #  |   |              |  |                                |                                  |                        |  |  |
|   |   |   |              |  | # (*)                          |                                  |                        |  |  |
| J. Additional Descriptions for Mate   | /M Profile #<br>rials Listed Above                    |   | K. Dispo     | sal Location   | n                              |                                  |                        |  |  |
|   |   |   | Cell<br>Grid |  | N320                           | 129                              | Level (1) 32           |  |  |
| 15. Special Handling Instructions and   | l Additional Information                              |   |              |  |                                |                                  | 15-G                   |  |  |
| Purchase Order # GPC1076029   | 93  | EMERGENCY CO  | NTACT / PH   | IONE NO.:  | Y                              |                                  |                        |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and p                   | bed materials are not hackaged and are in prop        | per condition for transpor  | tation acco  | Part 261 or a<br>ording to ap  | any applicabl<br>plicable regu | le state law, h<br>Ilations.     |                        |  |  |
| Printed Name  17. Transporter 1 Acknowledgement   | of Receipt of Materials                               |   | TOI          |  | ,                              |                                  | Month Day Year         |  |  |
| Printed Name 18. Transporter 2 Acknowledgement  | t of Receipt of Materials                             | Signature   | -            | beer   | M                              |                                  | Month Day Year         |  |  |
| Printed Name  |   | Signature   |              |  |                                |                                  | Month Day Year         |  |  |
| 19. Certificate of Final Treatment/Dig<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | d treatment facility, that<br>and licenses on the dat | es listed above.  |              |  |                                | vas managed                      | in compliance with all |  |  |
| 20. Facility Owner or Operator: Cert  | rification of receipt of no                           | on-hazardous materials co<br>Signature                              | overed by t  | tnis manifes   | T.                             | ¥                                | Month Day Year         |  |  |

Pink- FACILITY USE ONLY

Gold-TRANSPORTER #1 COPY

Candidoner Name Bloks) OPONE 37620050KBO BLOKS) Carreter 11 ORLS TRUCKONS 11 C Unificially (W)

fichet Date Wi/07/2013

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Wante Code

Manifest 8677764

Destination

1311 Profile Generator

RECEIVED REAL & COOL CONTONORMED WORTED

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/07/2018 14:58:02

DOL MONTH WILL A LANGE

Scale Inbound 1

Operator 101 6# 1

Container

Ditting B WWW.18.37

Sen 1191 10 NR

Driver Check#

> Bross Tare Net

Villama

55920 1b 23540 1b SPRIM Th 16.19

Tons

Dominion 63

[](国

Product.

1 11%

14.7

Characterist.

theinin

COAL ASH & COAL CO 100

16,19 Tons

POOLER

Total Tax fabrit fleket



|             | NON-HAZARDOUS MANIFEST 1. (   | Generator's US EPA   |   | anifest Doc I | No.          | 2. Page 1             | of                               | IFX                   |
|-------------|---|----------------------|---|---------------|--------------|-----------------------|----------------------------------|-----------------------|
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER  | GEC                  | erator's Site Address (If<br>DRGIA POWER PLAN |               | ailing):     |                       | st Number                        | 6677764               |
|             | 241 RALPH MCGILL BLVD NE, BIN#<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-506-1  | POR                  | CROSSGATE RD.<br>RT WENTWORTH, G              | A 31407       |              |                       | B. State G                       | enerator's ID         |
|             | 5. Transporter 1 Company Name   | adina                | 6. US EPA I                                   | D Number      |              |                       | ransporter's ID<br>orter's Phone |                       |
|             | 7. Transporter 2 Company Name   |                      | 8. US EPA I                                   | D Number      |              | E. State T            | ransporter's ID<br>orter's Phone |                       |
|             | 9. Designated Facility Name and Site Add<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  | ress                 | 10. US EPA                                    | ID Number     |              | G. State F            |                                  | 912-927-6113          |
|             | Savannah, GA 31419  | 7                    |   | 12.60         | ntainers     | acility Phone         | 912-927-0113                     |                       |
| G           | 11. Description of Waste Materials  |                      |   | No.           | Туре         | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | I. Misc. Comments     |
| E<br>N<br>E | a. COAL ASH& COAL CONTAMINA   | TED WASTE            | *   | 5.89          | DT           | 18                    |                                  |                       |
| R<br>A      | b.  | 373200GARRA          |   |               |              |                       |                                  |                       |
| T<br>O<br>R |   | rofile#              |   |               |              |                       |                                  |                       |
|             | C.  |                      |   |               |              |                       |                                  |                       |
| 1           | WM P  | rofile #             |   |               |              |                       |                                  |                       |
|             | d.  | rofile #             |   |               |              |                       |                                  |                       |
|             | J. Additional Descriptions for Materials L  | isted Above          |   | K. Dispos     | sal Location | (00                   | >/\                              | Level                 |
|             | 15. Special Handling Instructions and Add   | itional Information  | *   | Grid          | 7            | W 66                  | 1 2 - 1                          | 65-51                 |
|             | Purchase Order # GPC10760293  |                      | EMERGENCY CO                                  | NTACT / PH    | ONE NO.:     |                       |                                  |                       |
|             | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described raccurately described, classified and package.              |                      |   |               |              |                       |                                  | ve been fully and     |
|             | Printed Name  B Filipouich  | 112.77.11.11.11      | Signature "On beh                             |               | )            | - regu                |                                  | Month Day Year        |
| T R A N S P | 17. Transporter 1 Acknowledgement of RePrinted Name   | est.                 | Signature a                                   | y             | W            | est                   | 0                                | Month Day Year        |
| O R T E R   | 18. Transporter 2 Acknowledgement of Re<br>Printed Name   | eceipt of Materials  | Signature                                     | 1             |              |                       |                                  | Month Day Year        |
| FAC         | 19. Certificate of Final Treatment/Disposal Certify, on behalf of the above listed trea applicable laws, regulations, permits and I | tment facility, that |   | ledge, the al | bove-descri  | bed waste w           | vas managed ir                   | n compliance with all |
| L           | 20. Facility Owner or Operator: Certificat  |                      |   | covered by t  | his manifes  | t.                    |                                  |                       |
| T           | Printed Name  |                      | Signature                                     |               |              | W. II                 |                                  | Month Day Year        |
|             | White-TREATMENT, STORAGE, DISPOSAL  | FACILITY COPY        | Blue- GENERATOI                               |               |              | Υe                    | ellow- GENERA                    | TOK#I COPY            |



Superior Land(i)) 3001 Little Mack Rd Savannah, GA, 31419 Phi (507) 577 (313

Constrainer Name ist und nerval systemachine is ture to the Constant is tured by the Constant is the Constant

Floket Date 45/47/2010
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest

6677765

Destination

Profite Generator SZGEMBERKEN (CODE (1831 & CODE CONTAMONETED BURELL)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

in wi/w//will biodis?

Scale (almound Operator WASS Gross Fare Net Fores

57820 1b 37/440 1b 367/36 1b 15, 39

Committees

Product.

"MASTE MANA

AGENIENT Rate

Validate tati

0001037

Container

Billing #

Gen EPA ID NR

Driver Check#

Omound.

(winin

COAL ASH & COAL CO 100

15.39 Tons

POOLER

Total Tax

Minch fry



|          | NON-HAZARDOUS MANIFEST   | 1. Generator's US E                             |   | anifest Doc No  | o.          | 2. Page 1              | of   | - 10                | - nagintar-m |  |  |
|----------|--|---|---|-----------------|-------------|------------------------|--|---------------------|--------------|--|--|
| 1        |  | N .   | / A   |                 |             |                        |  | 2 ()                | X            |  |  |
|          | Generator's Mailing Address:   |   | enerator's Site Address (If d                   |                 | ing):       | A. Manife              | est Number                                     | - CX . C            | V            |  |  |
| DO LUCK  | EORGIA POWER   |   | EORGIA POWER PLAN                               | T KRAFT         |             | w                      | MNA  | 6677765             |              |  |  |
| 100      | 1 RALPH MCGILL BLVD NE, E  | 3IN#10221 1                                     | 55 CROSSGATE RD.                                |                 |             |                        | (U.S. 2010)                                    | Generator's ID      |              |  |  |
| A7       | TLANTA, GA 30308-3374  | P   | ORT WENTWORTH, GA                               | A 31407         |             | 7                      | D. State (                                     | Delierator STD      |              |  |  |
|          |  | 06-1365   |   |                 |             | 1                      |  |                     |              |  |  |
| 5.       | Transporter 1 Company Name   |   | 6. US EPA II                                    | Number          |             |                        |  |                     |              |  |  |
| 1        | Doc1-111-  | - 1.0 -   |   |                 |             | C. State T             | ransporter's II                                | )                   |              |  |  |
| 7        | Transporter 2 Company Name   | adil 9  |   | Van Tribe       |             | D. Transp              | orter's Phone                                  | 3                   |              |  |  |
| 4.       | rransporter 2 company Namer  |   | 8. US EPA ID                                    | Number          |             |                        |  |                     |              |  |  |
| 1        |  |   |   |                 |             |                        | ransporter's II                                | )                   |              |  |  |
| 9.1      | Designated Facility Name and Site  | Address   | 10. US EPA I                                    | D Number        |             | F. Transporter's Phone |  |                     |              |  |  |
| SU       | IPERIOR LANDFILL   |   |   |                 |             | G. State Facility ID   |  |                     |              |  |  |
| 30       | 01 LITTLE NECK ROAD  |   |   |                 |             |                        | acility Phone                                  | 912-927-6113        | 2            |  |  |
| Sa       | vannah, GA 31419   |   |   |                 |             | Ti. State (            | acincy i florie                                | 512-527-0113        | ,            |  |  |
|          |  |   |   |                 |             | l de la                |  |                     |              |  |  |
| G 11.    | Description of Waste Materials   |   |   | 12. Conta       |             | 13. Total              | 14. Unit                                       | I. Misc. Commen     | ts           |  |  |
| E a.     | COAL ASH& COAL CONTAMI   | NATED WASTE                                     |   | NO.             | Туре        | Quantity               | Wt./Vol.                                       |                     |              |  |  |
| N        |  | WILD WISTE                                      |   | 100             | T           | 17                     |  |                     |              |  |  |
| E<br>R   | WM Profile   | 375200GAKRA                                     |   | 11/2/           |             | 10                     |  |                     |              |  |  |
| A b.     | THE POINT OF THE P | 373200GAKK                                      |   |                 |             |                        |  |                     |              |  |  |
| T        |  |   |   |                 |             |                        |  |                     |              |  |  |
| 0        | VAC  | M Profile #                                     |   |                 |             |                        |  |                     |              |  |  |
| R c.     | ý ·  | vi Frome #                                      |   |                 |             |                        |  |                     |              |  |  |
|          |  |   |   |                 |             |                        | N. Prof. of                                    |                     |              |  |  |
|          | W  | VI Profile #                                    |   |                 |             |                        |  |                     |              |  |  |
| d.       | The state of the s |   |   |                 |             |                        |  | MINISTER STATE      |              |  |  |
|          |  |   |   |                 | 1           |                        | 1000   |                     |              |  |  |
|          | W  | VI Profile #                                    |   |                 |             |                        |  |                     |              |  |  |
| J        | Additional Descriptions for Materi   |   |   | K. Disposal     | Location    |                        |  |                     | 7            |  |  |
|          |  |   |   | The Brisposur   | Location    | 1 1                    |  | 4                   | 7            |  |  |
| × III    |  |   |   | Cell            |             | 100                    | 100  | Level               | #            |  |  |
| 15       | 6  |   |   | Grid            |             | 000                    | 124  | wear                | 32           |  |  |
| 15.      | Special Handling Instructions and  | Additional Information                          | on.   |                 |             |                        | 1  |                     |              |  |  |
|          |  |   |   |                 |             |                        |  | 156                 | -1           |  |  |
| -        |  |   |   |                 |             |                        |  | 100 F               | 1            |  |  |
|          | chase Order # GPC10760293  |   | EMERGENCY CON                                   | ITACT / PHON    | IE NO.:     |                        |  |                     |              |  |  |
| 1 54.50  | GENERATOR'S CERTIFICATE:   |   |   |                 |             |                        |  |                     |              |  |  |
| The      | reby certify that the above-describ  | ed materials are not                            | hazardous wastes as define                      | d by CFR Part   | t 261 or ar | ny applicable          | e state law, ha                                | ve been fully and   |              |  |  |
|          | urately described, classified and pa<br>nted <u>Name</u>   | ckaged and are in pro                           | Signature "On behalf                            |                 | ing to app  | licable regul          | ations.  | T 1000 T 8 T        |              |  |  |
|          | B FiliDouid  |   | Signature Off Defial                            | OI .            |             |                        |  | Month Day           | Year         |  |  |
| т 17.    | Transporter 1 Acknowledgement of   | of Receipt of Materia                           | S   | - Walden -      |             |                        |  |                     | 1 1          |  |  |
| R<br>A F | Printed Name   |   | Signature                                       | 00              |             |                        | * T 1  | Month Day           | Year         |  |  |
| N V      | michael fratie   |   | 1 must  | fre             |             |                        |  | 57                  | X            |  |  |
| P 18.    | Transporter 2 Acknowledgement of   | f Receipt of Materia                            |   | 9               |             |                        |  |                     | 10           |  |  |
| R<br>T   | Printed Name   |   | Signature                                       |                 |             |                        |  | Month Day           | Year         |  |  |
| E<br>R   |  |   |   |                 |             |                        |  |                     | 1774         |  |  |
| 10       | Cartificate of Final Treatment /Di-  | ocal  |   |                 |             |                        |  |                     |              |  |  |
| r        | Certificate of Final Treatment/Disp  |   | ut to the book of                               | 1. 1            |             | ced accessor           | A) - 25 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1 |                     | N III        |  |  |
| apn      | rtify, on behalf of the above listed t<br>dicable laws, regulations, permits a   | reaument racility, tha<br>nd licenses on the da | it to the best of my knowle<br>tes listed above | uge, the abov   | e-describe  | ea waste wa            | as managed in                                  | compliance with all | S-1          |  |  |
|          | Facility Owner or Operator: Certifi  |   |   | vered by this   | manifest    |                        |  |                     | - 1          |  |  |
| 6.0      | Printed Name   |   | Signature                                       | . CICU DY LIIIS | mannest.    |                        |  | Month David         | Max          |  |  |
| Y        |  |   | Signature                                       |                 |             |                        |  | Month Day           | Tear         |  |  |
| Wh       | ite- TREATMENT, STORAGE, DISPOS  | AL FACILITY COPY                                | Blue- GENERATOR #                               | 2 COPY          |             | Vel                    | low- GENERAT                                   | OP #1 COPY          | 1            |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY

Untumo



Superior Land(1)) WWW Little Nock Rd Savarnidi, 60, 30409 Ph.: (\$52) 527-1313

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

ficket Date | MS/M7/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677766

Deitination 13()

Profile Ommakar - 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Cas decido comercinar decimento entidere en una especi-

Time

05/07/2018 15:07:37

自成 保证的经验的 化共同原注系

Scale Inbound 1

141 MI 1

Operator

Vehicle# 1336

(Sen (14) ))) MK

Billing # 0001037

Container

Driver

Check#

Gross Tare

57300 -1b 25980 lb

Comments

Product

Amount

Origin

1 COAL ASH & COAL CO 100

15.66 Tons

POOLER

finhat Placket



|                            | NON-HAZARDOUS MANIFEST   | 1, Generator's US EP N /                             |   | nifest Doc N             | 0.   | 2. Page 1                     | of  | 2:18                      |       |  |
|----------------------------|--|--|---|--------------------------|--|-------------------------------|---|---------------------------|-------|--|
|                            | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, I<br>ATLANTA, GA 30308-3374  | GE<br>BIN#10221 155<br>PO                            | erator's Site Address (If dif<br>ORGIA POWER PLANT<br>5 CROSSGATE RD.<br>RT WENTWORTH, GA | KRAFT                    | iling):                                      |                               | st Number MNA  B. State G                           | 6677766<br>Generator's ID |       |  |
|                            | 4. Generator's Phone 404-50  Transporter 1 Company Name  7. Transporter 2 Company Name   | ading  | 6. US EPA ID  8. US EPA ID  |                          |  | D. Transp  E. State Tr        | ransporter's ID<br>orter's Phone<br>ransporter's ID |                           |       |  |
|                            | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | Address  | 10. US EPA II   | O Number                 |  | G. State F                    | acility ID acility Phone                            | one 912-927-6113          |       |  |
| G<br>E<br>N                | 11. Description of Waste Materials a. COAL ASH& COAL CONTAM  | INATED WASTE   | 0   | 12. Con<br>No.           | tainers Type                                 | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.                                | I. Misc. Com              | ments |  |
| E<br>R<br>A<br>T<br>O<br>R | b  | # 375200GAKRA<br>/M Profile #                        |   | XP                       |  |                               |   |                           |       |  |
|                            | c.<br>M  | /M Profile #   |   |                          | <u>,                                    </u> |                               |   |                           |       |  |
|                            | J. Additional Descriptions for Mater   | /M Profile #<br>rials Listed Above                   |   | K. Disposa  Cell  Grid   | al Location                                  | 1370                          | - 27  |                           |       |  |
|                            | 15. Special Handling Instructions and  | Additional Informatio                                | n.  | Glid                     | 9 \  | 1000                          |   | 65 9                      | -     |  |
| Tr.                        | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and perinted Name                                 | bed materials are not                                | hazardous wastes as define<br>pper condition for transpor<br>Signature "On behal          | ed by CFR Patation accor | art 261 or a                                 | any applicab<br>plicable regu | le state law, ha                                    | ave been fully and        |       |  |
| T R A N S P O R            | 17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name   | Edy  | Signature (   | od                       |  |                               |   | Month Day                 | 718   |  |
| F A C I L I T Y            | 19. Certificate of Final Treatment/Di<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits<br>20. Facility Owner or Operator: Cert<br>Printed Name | I treatment facility, that<br>and licenses on the da | at to the best of my knowle<br>tes listed above.  | overed by th             |  | t.                            | vas managed i                                       | Month Da                  |       |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY

Original Ticket# 1251612

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Vehicle# J06 Volume

Ticket Date 05/07/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677767

Destination

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

In 05/07/2018 15:44:39 Out 05/07/2018 15:44:39

Scale Inbound 1

Operator RENEE RENEE

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Gross Tare Net Tons

22980 lb 28680 16 14.34

51660 lb

Comments

Product

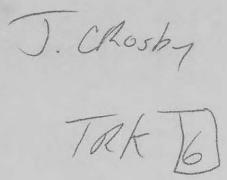
WASTE LD% UOM . Rate Qty Tax Amount

Origin

COAL ASH & COAL CO 100 14.34 Tons

PORTW

Total Tax Total Ticket





|     | NON-HAZARDOUS MANIFEST                      | 1. Generator's US EF    | PA ID No. N  | lanifest Doc      | No.                                     | 2. Page 1                               | of                       |              |                   | 1         |  |
|-----|---|-------------------------|--|-------------------|---|---|--------------------------|--------------|-------------------|-----------|--|
|     |   | N /                     | Α  |                   |   |   |                          | 2            | 15                | 4         |  |
|     | 3. Generator's Mailing Address:             | Ger                     | nerator's Site Address (If   | different than m  | nailing):                               | A. Manife                               | est Number               |              |                   | -1        |  |
| 197 | GEORGIA POWER                               | GE                      | ORGIA POWER PLAT   |                   |   | 110000000000000000000000000000000000000 | MNA                      | 667          | 7767              |           |  |
|     | 241 RALPH MCGILL BLVD NE, E                 | 3IN#10221 15            | 5 CROSSGATE RD.  |                   |   | , vi                                    | Mark W 22 B              | 6            | 10                | 1/2/      |  |
|     | ATLANTA, GA 30308-3374                      | PO                      | ORT WENTWORTH, G   | A 31407           |   |   | B. State                 | Generator's  | s ID              |           |  |
|     |   | 06-1365                 |  |                   |   | 11.                                     |                          |              |                   |           |  |
|     | 5 Transporter 1 Company Name                | 1                       | 6. US EPA I  | D Number          |   |   |                          |              |                   |           |  |
|     | 1 mal = 1 (-1)                              | of in                   |  |                   |   | C. State T                              | ransporter's             | ID           | ALC: U            | ALE STATE |  |
| 1   | 7. Transporter 2 Company Name               | 991110                  |  |                   |   | D. Transp                               | D. Transporter's Phone   |              |                   |           |  |
|     | 7. Transporter 2 company Name (             |                         | 8. US EPA I  | D Number          |   |   |                          |              |                   |           |  |
|     |   | 9                       |  |                   |   | E. State Transporter's ID               |                          |              |                   |           |  |
|     | 9. Designated Facility Name and Site        | Address                 | 10. US EPA   | ID Number         |   | F. Transporter's Phone                  |                          |              |                   |           |  |
|     | SUPERIOR LANDFILL                           |                         |  |                   |   | G. State F                              | acility ID               |              |                   |           |  |
|     | 3001 LITTLE NECK ROAD                       |                         |  |                   |   |   | acility Phone            | 012.0        | 127 (11           | 2         |  |
|     | Savannah, GA 31419                          |                         |  |                   |   | II. State F                             | acinty Phone             | 312-5        | 912-927-6113      |           |  |
|     |   |                         |  |                   |   |   |                          |              |                   |           |  |
| G   | 11. Description of Waste Materials          |                         |  | 12. Co<br>No.     | ntainers                                | 13. Total                               | 14. Unit                 | I. N         | lisc. Comme       | nts       |  |
| E   | a. COAL ASH& COAL CONTAMI                   | NATED WASTE             |  | INO.              | Type                                    | Quantity                                | Wt./Vol.                 |              | - Somme           | 10.000    |  |
| N   |   |                         | y - 4  | TOG               | DI                                      | IX                                      | 1                        | 10000        |                   |           |  |
| E L | WM Profile #                                | 375200GAKRA             | -  | 7 74              | 101                                     |   |                          |              |                   |           |  |
| A   | b.  |                         |  |                   |   |   |                          |              |                   |           |  |
| Т   |   |                         |  |                   |   |   |                          |              |                   |           |  |
| 0   | W   | M Profile #             |  | 1,000             |   |   |                          |              |                   |           |  |
| R - | C.  | Willome #               |  |                   |   |   |                          |              |                   |           |  |
|     |   |                         |  |                   |   |   |                          | i            |                   |           |  |
|     | W   | VI Profile #            | #  |                   |   |   |                          |              |                   |           |  |
|     | d.  |                         |  |                   | 100000000000000000000000000000000000000 |   |                          | 1            | MICONO CONTRACTOR |           |  |
| 40  | A LINE & -1                                 | , s f                   | 1.   |                   |   |   |                          |              |                   |           |  |
|     | Wr  | M Profile #             |  |                   |   |   |                          |              |                   |           |  |
|     | J. Additional Descriptions for Materia      | als Listed Above        | The state of the s | K. Dispos         | al Location                             |   |                          |              |                   |           |  |
| 1   |   |                         |  |                   |   |   |                          |              |                   |           |  |
|     |   |                         |  | Cell              | - N                                     | 1220                                    | 170                      | Level        | 2                 |           |  |
| -   | 15. Special Handling Instructions and A     | Additional Information  |  | Grid              |   | 1000                                    | 29                       | WE           | 2116              | 25        |  |
|     |   | additional information  |  |                   |   |   |                          |              |                   |           |  |
|     |   |                         |  |                   |   |   |                          | LIC          | 1-                |           |  |
|     | Purchase Order # GPC10760293                |                         | EMERGENCY CO   | NTACT / DHO       | ONE NO :                                |   |                          | 0317         |                   |           |  |
| -   | 16. GENERATOR'S CERTIFICATE:                |                         | EMERGENCY CO   | VIACI / FIIC      | JINL INU                                |   |                          |              |                   |           |  |
|     | I hereby certify that the above-describe    | ad materials are not h  | azardous wastos as dofin   | ad by CED D       | + 201                                   |   |                          |              |                   |           |  |
|     | accurately described, classified and pac    | kaged and are in prop   | per condition for transpo  | rtation accor     | ding to ann                             | ny applicable<br>dicable regul          | e state law, h<br>ations | ave been ful | ly and            |           |  |
|     | Printed Name                                |                         | Signature "On beha   |                   | B 10 GPP                                | medale regul                            | acions.                  | Month        | Day               | Year      |  |
| +   | B +ilipovide                                |                         | 34   | 4                 |   |   |                          | K            | 7                 | 18        |  |
|     | 17. Transporter 1 Acknowledgement o         | f Receipt of Materials  |  | To and the second |   |   |                          | 2            | 1                 | . 4       |  |
|     | χ Printed Name                              |                         | Signature  | Try n             |   |   | 1111111111               | Month        | Day               | Year      |  |
| -   | N   |                         | X  | arte sale         |   |   |                          | 5            | 7                 | K         |  |
|     | 18. Transporter 2 Acknowledgement o         |                         |  |                   |   |   |                          | 1            | , 0               |           |  |
|     | Printed Name                                |                         | Signature  | 1 .               | 1                                       |   |                          | Month        | Day               | Year      |  |
|     | JUROShu                                     |                         | HH   | m                 |   |   |                          |              |                   |           |  |
|     | 19. Certificate of Final Treatment/Disp     | osal                    | 1110   | 1                 |   |   |                          | 31 = 1       |                   |           |  |
|     | I certify, on behalf of the above listed to |                         | to the best of my knowle   | edge, the abo     | ove-describe                            | ed waste wa                             | is managed i             | n complianc  | e with all        |           |  |
|     | applicable laws, regulations, permits an    | d licenses on the date  | es listed above.   |                   |   |   | managea n                | . sompliance | o with all        |           |  |
|     | 20. Facility Owner or Operator: Certific    | cation of receipt of no | n-hazardous materials co   | overed by th      | is manifest.                            |   |                          |              |                   |           |  |
|     | Printed Name                                |                         | Signature )  |                   |   | 7-1-5                                   |                          | Month        | Day               | Year      |  |
|     | 16  |                         | 1  |                   |   |   |                          | 05           | 0-1               | 78        |  |
|     | White-TREATMENT, STORAGE, DISPOS            | AL FACILITY COPY        | Blue- GENERATOR  | #2 COPY           |   | Vel                                     | ow- GENERA               | TOR #1 COD   | v                 |           |  |

Pink- FACILITY USE ONLY

Gold-TRANSPORTER #1 COPY



Original Ticket# 1251633

Volume

Castomer Name 61 (86) OP(60) 375 FONEDIRA 61 (86) Garrier - 11 (86) TRUCKING 111;

Ticket Date 05/07/2018 > Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Wast

State Waste Code

Manifest 6677768

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/07/2018 16:35:10 Out 05/07/2018 16:35:10

Inb

Scale Inbound 1 Operator RENEE RENEE

Vehicle# JØ1

Container

Billing #

Gen EPA ID

Driver

Check#

Gross Tare Net 56460 1b 23340 1b 33120 1b

16.56

Tons

Comments

Product

LD% Qty

UOM

Rate Ta

0001037

Amount

Origin

COAL ASH & COAL CO 100

16.56 Tons

PORTW

Total Tax

Jan Car [



| WASTE MANAGEMENT                                   |  |   |   | tions to the | Sept. Sept. 10            | Service Control of the Control of th |              |             |                |  |  |
|--|--|---|---|--------------|---------------------------|--|--------------|-------------|----------------|--|--|
| NON-HAZARDOUS MANIFEST                             | 1. Generator's l                       | JS EPA ID No. N<br>N / A                          | Manifest Doc I  | No.          | 2. Page 1                 | of ,   | 3            | 15          | 0              |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   |  | Generator's Site Address (F<br>GEORGIA POWER PLA  |   | ailing):     |                           | st Number  | 6677         | 768         |                |  |  |
| 241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374 |  | 155 CROSSGATE RD. PORT WENTWORTH,                 | GA 31407  |              |                           | B. State G   | enerator's I | D           |                |  |  |
| 2000   | 506-1365                               | 6. US EPA   | ID Number   |              |                           |  |              |             |                |  |  |
| 5. Transporter 1 Company Name                      | . 1.                                   | b. USEFA  | ID Nulliber   |              | C. State Transporter's ID |  |              |             |                |  |  |
| CUSIA 1 61   | ading                                  | a USERA   | ID Number   |              | D. Transp                 | orter's Phone  |              |             |                |  |  |
| 7. Transporter 2 Company Name                      |  | 8. US EPA   | ID Number   |              | E. State Transporter's ID |  |              |             |                |  |  |
|  |  |   |   |              |                           |  | 11           |             | arcani di masa |  |  |
| 9. Designated Facility Name and Si                 | te Address                             | 10. US EP   | A ID Number   |              | G. State F                | acility ID   |              |             |                |  |  |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD            |  | 10000 - 1   |   |              |                           | acility Phone  | 912-91       | 27-611      | 3              |  |  |
| Savannah, GA 31419                                 |  |   |   |              | n. state r                | acinty Friorie   | 912 92       | ., 011.     |                |  |  |
| Savarman, Sv. 32.129                               |  |   |   |              |                           |  |              |             |                |  |  |
| G 11. Description of Waste Materials               |  |   | No.   | Type         | 13. Total<br>Quantity     | 14. Unit<br>Wt./Vol.   | I. Mis       | sc. Commer  | its            |  |  |
| a. COAL ASH& COAL CONTA                            | MINATED WAST                           | E   | TOI   | NT           | 19                        |  |              |             |                |  |  |
| E  | le# 375200GA                           | KRA   |   |              | 10                        | Profession (   |              |             |                |  |  |
| R WWI Profit                                       | 0,02000.                               |   | LOVE LANGE OF THE LANGE |              |                           |  |              |             |                |  |  |
| T  |  |   |   |              |                           |  |              |             |                |  |  |
| O<br>R   | WM Profile #                           |   |   |              |                           |  |              | unius Green |                |  |  |
| C.   |  |   |   |              |                           |  |              |             |                |  |  |
|  | WM Profile #                           |   |   |              |                           |  |              |             |                |  |  |
| d.   |  |   |   |              |                           |  |              |             |                |  |  |
|  |  |   |   |              |                           | C  |              |             |                |  |  |
|  | WM Profile #                           |   |   |              |                           |  |              |             |                |  |  |
| J. Additional Descriptions for Ma                  | terials Listed Above                   |   | K. Dispo  | sal Location | 1                         |  |              |             |                |  |  |
|  |  |   | Cell  |              | 1120                      | 1120   | Level        | ÷ 78 73     |                |  |  |
|  | 40 000 0 1 Name 45                     | _   | Grid  |              | 1002                      | 0129   | ME           | 16          | 2              |  |  |
| 15. Special Handling Instructions a                | nd Additional Infor                    | mation  |   |              |                           |  | 6            | 5-4         | 7              |  |  |
| Purchase Order # GPC10760                          | 202                                    | EMERGENCY (                                       | CONTACT / PH  | HONE NO.:    |                           |  |              | ,           | 1              |  |  |
| 16. GENERATOR'S CERTIFICATE:                       | 200                                    | THE SHE   |   |              |                           |  |              |             |                |  |  |
| I hereby certify that the above-des                | cribed materials are                   | e not hazardous wastes as de                      | fined by CFR  | Part 261 or  | any applicab              | le state law, h  | ave been ful | ly and      |                |  |  |
| accurately described, classified and               | d packaged and are                     | in proper condition for trans<br>Signature "On be |   | ording to a  | oplicable reg             | ulations.  | Month        | Day         | Year           |  |  |
| Printed Name BFILI POUICH                          |  | Signature On be                                   | nan or  |              |                           |  | K            | 7           | M              |  |  |
| 17. Transporter 1 Acknowledgeme                    | ent of Receipt of Ma                   | aterials  | -   |              | 11                        |  |              | 1           | 10             |  |  |
| R Printed Name                                     |  | Signature   | 1   | 1 00         | //                        |  | Month        | Day         | Year           |  |  |
| thomse you   | ــــــــــــــــــــــــــــــــــــــ | X QUESC   | C.  | ese)         |                           |  | -            | 1           | 40             |  |  |
| 18. Transporter 2 Acknowledgeme                    | ent of Receipt of Ma                   | Signature   |   |              | *                         | -,   | Month        | Day         | Year           |  |  |
| Printed Name                                       |  | Signature   |   |              |                           |  |              |             |                |  |  |
| 19. Certificate of Final Treatment,                | /Disposal                              |   |   | 7            |                           |  |              |             |                |  |  |
| I certify, on behalf of the above lis              | ted treatment facili                   | ty, that to the best of my kno                    | wledge, the   | above-descr  | ribed waste               | was managed i  | in compliand | e with a    | II.            |  |  |
| applicable laws, regulations, perm                 | its and licenses on t                  | the dates listed above.                           | s rovered by  | this manife  | st                        |  |              |             |                |  |  |
| 20. Facility Owner or Operator: C                  | ertification of recei                  | pt of non-nazardous materia Signature             | )   | ans mainte   | ***                       |  | Month        | Day         | Year           |  |  |
| Y Printed Name                                     | (0)                                    | Uge   |   |              |                           |  | 05           | 01          | 18             |  |  |
| White- TREATMENT, STORAGE, D                       | SPOSAL FACILITY CO                     | OPY Blue- GENERAT                                 | OR #2 COPY  |              | Y                         | ellow- GENER   | ATOR #1 CO   | PY          |                |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1251682

Constructs Name of (URS) (Print 37) strength of (URS) Carrier (1) (URS) TRUCK) NO 111: Payment Type Credit Account Vehicle# JØ6 Manual Ticket# Volume Container Hauling Ticket# Driver Route Check# State Waste Code Billing # 0001037 Manifest Gen EPA ID NR 6677769 Dettimition Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Time Scale 05/08/2018 07:58:14 Operator Inbound 1

Out 05/08/2018 07:58:14

Inbound 1 | Ibejaran |

Gross 54860 1b
Tare 22980 1b
Net 31880 1b
Tons 15.94

Product TOX ON THE MANAGEMENT TO OWNERS

PERM

(41-Sugar

J. CROSby TEKT

iotal los fotal fisket



| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BINH10221 155 CROSSGATE RD.  A. Manifest Number GEORGIA POWER PLANT KRAFT 155 CROSSGATE RD.  B. State Generator's IID PORT WENTWORTH, GA 31407 A. Generator's Phone 404-S06-1365  F. Transporter 2 Company Name D. Transporter's IID E. State Transporter's IID E. State Transporter's IID F. Transporter's IID F. Transporter's IID F. Transporter's IID G. State Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  C. State Transporter Labourded Waste Malerals  WM Profile #  C. State Transporter Labourded Waste Malerals  WM Profile #  C. WM Profile #  C. State Transporter Labourded Waste Malerals  WM Profile #  C. State Transporter Labourded Waste Malerals  WM Pr |  | 1. Generator's US EP   | A ID No.                     | Manife        | st Doc N  | 0.         | 2. Page 1  | of   |              | /            | 1      |
|--|--|--|------------------------------|---------------|-----------|------------|--|--|--------------|--------------|--------|
| GEORGIA POWER PLANT KRAFT  24] RALPH MGGILL BLVD NE, BINH10221  ATLANTA, GA 30308-3374  4. Generator's Phone  304-506-1365  G. US EPA ID Number  C. State Transporter's 10  D. Transporter's 10  C. State Transporter's 10  D. Transporter's Phone  SUPERIOR LANDFILL  3001 LITTLE NECK ROAD  SAVARIABLE, G. State Facility (D  H. State Facil | NON-HAZARDOUS MANIFEST   | N /  | Α                            |               |           |            |  |  | 7            | 16           | 2      |
| 4. Generator's Phone 404-506-1365 5. Transporter I Company Name 6. US EPA ID Number C. Statis Transporter's ID D. Transporter's ID E. State Transporter's ID E. State Transporter's ID E. State Transporter's ID E. Transporter's ID E. State Tr | GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,                                   | GE<br>BIN#10221 15   | ORGIA POWER<br>5 CROSSGATE R | PLANT K<br>D. | RAFT      | iling):    | 1.00   | MNA  |              | 1            |        |
| 2. Transporter 2 Company Name  8. US EPA ID Number  E. State Transporter's ID  F. Transporter's ID  G. State Facility ID  H. State Facility ID  H. State Facility ID  H. State Facility Phone  912-927-611.3  Savannah, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  d.  WM Profile #  d.  WM Profile #  d.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  G.  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Transporter Level Investment of Profile Action of Materials  Printed Name  19. Certificate of Final Treatment/Disposal  11. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day You  Joseph Description of Profile Action of Pro |  |  |                              |               |           |            |  |  |              |              |        |
| B. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  6. WM Profile #  6. WM Profile #  6. WM Profile #  7. Additional Descriptions for Materials Listed Above  WM Profile #  7. Additional Descriptions for Materials Listed Above  E. State Facility Phone  912-927-6113  13. Fotal #4. Unit  (Loannity W. A. Add.  MM Profile #  14. Additional Descriptions for Materials Listed Above  E. Oisposal Location  Cell Grid  15. Special Handling instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GRIRATOR'S CENTRICATE:  17. Transporter J. Acknowledgment of Receipt of Materials  Princed Marine  Signature  18. Transporter J. Acknowledgment of Receipt of Materials  Princed Marine  Signature  Mooth Day Iven  Mooth Day Iven  Mooth Day Iven  Signature  Mooth Day Iven  Journal Admines  Journal Acknowledgment of Receipt of Materials  Princed Marine  19. Certificate of Final Treatment/Disposal  Loertify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above described waste was managed in compliance with all applicable laws, regulations, permits and licenties on the dates listed above.  20. Facility Owner or Operator: Gertification for respiration covered by this manifest.  Princed Name  Signature  Fined Name  Signature  Journal Admines  Jo | 5. Transporter 1 Company Name  | ading  |                              |               |           |            | and the state of t | Charles and the state of the st |              |              |        |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile # 375200GAKRA  b.  WM Profile # G.  Level  G.  Level  G.  Level  G.  Level  G.  WM Profile # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above described materials are not hazardous wastes as defined by CFR Part 251 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  J. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  J. Signature  J. Signature  J. Certificate of Final Treatment/Disposal  19. Certificate of Final Treatment/Disposal  10. Signature  J. S |  | J  |                              |               |           |            |  |  |              |              |        |
| Savannah, GA 31419  1. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  6.  WM Profile #  1. Additional Descriptions for Materials Listed Above  WM Profile #  1. Additional Descriptions for Materials Listed Above  Ecil Grid  Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO:  16. GENERATOR'S CERTIFICATE:  1 Thereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 26.1 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Signature  Morth Day Yea  19. Certificate of Final Treatment/Disposal  1 Certificate of Final Treatment/Disposal  2 Certification of receipt of non-hazardous materials covered by this manifest.   | SUPERIOR LANDFILL  | Address  | 10.                          | S EPA ID N    | lumber    |            |  |  | 912-9        | 912-927-6113 |        |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile # d.  WM Profile # d.  J. Additional Descriptions for Materials Listed Above  Europease Order # GPC10760293  EMERGENCY CONTACT / PHONE NO:  16. GENERATOR'S CERTIFICATE: Hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Month Day Year Printed Name  19. Certificate of Final Treatment/Disposal  1-1. Certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of recigity fonn-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year Printed Name  Month Day Year Printed Name  Signature  Month Day Year Printed Name  |  |  |                              |               |           |            | TI. State I  | active Priorie   | 512.5        |              |        |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  C.  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  Cell Level Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTRICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Month Day Yea  19. Certificate of Final Treatment/Olsposal  Levelify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenées on the dates listed above.  20. Facility Owner or Operator: Certification/of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Yea  Signature   | 11. Description of Waste Materials   |  |                              |               |           |            |  |  | I. Mis       | sc. Comment  | s      |
| b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell   Level    Grid   Grid   Level    15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293   | a. COAL ASH& COAL CONTAN   |  |                              | T             | 9(0       | DI         | -18  | W.C./ VOI.   |              |              |        |
| MM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  R. Disposal Location  Cell Level   Grid    15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I thereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of:  Month Day Yea  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Yea  Month Day Yea  19. Certificate of Final Treatment/Disposal   Levelity, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Signature  Month Day Yea  Month Day Yea  Month Day Yea  Signature  Signature  Month Day Yea  Signature  Signature  Month Day Yea  Signature  Month Day Yea  Signature   |  | # 3/5200GAKRA  | V                            | 100           | ``        |            |  |  |              |              |        |
| d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell   Level   Grid    Durchase Order # GPC10760293   EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name   Signature   On behalf of    17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name   Signature   Month   Day   Year    18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name   Signature   Month   Day   Year    19. Certificate of Final Treatment/Disposal   Lecrtify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenges on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.    Printed Name   Signature   Month   Day   Year   | V  | VM Profile #   |                              | ini<br>ini    |           |            |  |  |              |              |        |
| WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Grid  Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification/of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature   |  | VM Profile #   |                              |               |           |            |  |  |              |              |        |
| I. Additional Descriptions for Materials Listed Above    Cell  |  | AMA Profile #  |                              | - 1           | · i       |            | \ \ \ \ \ \  | k. 3.3.  |              | 4 =          | 1.     |
| Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature "On behalf of" Month Day Yea  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.   |  | THE PROPERTY OF THE PARTY OF TH |                              |               | Cell      | al Locatio | N37  | 0125   | Level        | 61           |        |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature "On behalf of"  Month Day Yea  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Month Day Yea  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Signature  Signature  Nonth Day Yea  Yea  Month Day Yea  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  Signature Signature  | 15. Special Handling Instructions an   | d Additional Informatio  | on                           |               |           |            | M  | 656  | *            |              |        |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature "On behalf of"  Month Day Yea  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Month Day Yea  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Yea  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Gertification of receipt of non-hazardous materials covered by this manifest.  Signature  Signature  Signature  Signature  | Burchasa Ordar # GDC107602   | 02   | FMERGEN                      | ICY CONT      | ACT / PHO | ONE NO.:   | . 3-   |  |              |              |        |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Month Day Year  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Signature  Signature  Signature  Signature  Month Day Year  Month Day Year  Month Day Year  Month Day Year  Signature   | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descr          | ribed materials are not  | hazardous wastes a           | as defined    | by CFR P  | art 261 o  | r any applicab   | le state law, h  | ave been ful | ly and       |        |
| Printed Name  Signature  Month Day Yea  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Yea  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Yea  Month Day Yea   | Printed Name   | packaged and are in pr   | Signature "O                 | n behalf o    | f"        |            |  |  | Month        | Day          | Year / |
| Printed Name  Signature  Month Day Yea  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Yea   | - A A  | nt of Receipt of Materia   | 6 1                          | DA.           | Cel       | 1          |  | 1  | Month        | Day          | Year   |
| I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month  Day  Yea   | Printed Name   | nt of Receipt of Materia   |                              | /             |           |            |  |  | Month        | Day          | Year   |
| Printed Name Signature Month Day Yea   | I certify, on behalf of the above liste applicable laws, regulations, permit | ed treatment facility, the<br>s and licenses on the d  | ates listed above.           |               |           |            |  | was managed  | in compliand | ce with all  |        |
| Printed Name Signature   | 20. Facility Owner or Operator: Cer  | rtification of receipt of  | 23                           | erials cov    | ered by t | his manif  | est.   |  |              | I A          |        |
| White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY   | Printed Name   | TA   |                              | 6             |           |            |  |  | 1            | 9            | Year   |

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Gold-TRANSPORTER #1 COPY



(minima) Ticket# 1251687

Caratemer Name Of Original Resemblandar Origination (1998) Carrier 11 OR S TRUCKING 11 C

ficket Oate V5/VA/2010

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677770

Destination

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/08/2018 08:08:20 In

Out 05/08/2018 08:08:20

Scale Inbound 1

Operator lbejaran Ibejaran

Container

Billing #

Gen EPA ID NR

Driver

Check#

Gross Tare Net

55360 lb 23340 1b 32020 16 16.01

Tons

Comments

Product.

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Validate # Jot Volume

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COAL ASH & COAL CO 100 16.01 Tons

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| WASTE MANAGEMENT  | 1. Generator's US EF      | PAID No. M                                      | anifest Doc No.             | 2. Page                               | 1 of   | 4101   |           |  |  |  |
|---|---------------------------|---|-----------------------------|---------------------------------------|--|--|-----------|--|--|--|
| NON-HAZARDOUS MANIFEST  | N /                       | A   |                             |                                       |  | 1.2  | 1         |  |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                              | GE                        | nerator's Site Address (If<br>EORGIA POWER PLAN |                             | *                                     | fest Number  WMNA  | 6677770  |           |  |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                           | PC                        | 5 CROSSGATE RD.<br>ORT WENTWORTH, G             | A 31407                     |                                       | B. State G   | Generator's ID   |           |  |  |  |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name                      | 606-1365                  | 6. US EPA I                                     | D Number                    |                                       |  |  |           |  |  |  |
| Cogstal Gi  | adina                     |   | The second                  | e Transporter's II<br>sporter's Phone | William Control of the Control of th |  |           |  |  |  |
| 7. Transporter 2 Company Name   |                           | 8. US EPA                                       | D Number                    |                                       | E. State Transporter's ID F. Transporter's Phone   |  |           |  |  |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL                        | e Address                 | 10. US EPA                                      | ID Number                   |                                       | e Facility ID  |  |           |  |  |  |
| 3001 LITTLE NECK ROAD   |                           |   |                             | H. State                              | e Facility Phone   | 912-927-611  | .3        |  |  |  |
| Savannah, GA 31419  |                           |   |                             |                                       |  |  |           |  |  |  |
| 11. Description of Waste Materials  |                           |   | 12. Contair<br>No.          | ners 13. Total Type Quantity          | 0.000 200 200 200  | I. Misc. Comme   | nts       |  |  |  |
| a. COAL ASH& COAL CONTAIN   |                           |   | 100                         | JT 18                                 |  |  |           |  |  |  |
|   | e# 375200GAKR/            | Δ   |                             |                                       |  |  |           |  |  |  |
| b.  | 4                         |   |                             |                                       |  |  |           |  |  |  |
|   | WM Profile #              |   |                             |                                       | Zazati.  |  |           |  |  |  |
| С.  |                           |   |                             | 7.0                                   |  |  |           |  |  |  |
|   | WM Profile #              |   |                             |                                       |  |  |           |  |  |  |
| d.  |                           |   |                             |                                       |  |  |           |  |  |  |
|   |                           |   |                             |                                       |  |  | 0.000,000 |  |  |  |
|   | WM Profile #              |   | K. Disposal                 | Location                              | 36   | 75.4   |           |  |  |  |
| J. Additional Descriptions for Mat  | eridis Listed Above       |   | Cell<br>Grid                | MS                                    | W) M   | Level 6  | 7         |  |  |  |
| 15. Special Handling Instructions ar  | nd Additional Informat    | ion   | Grid                        | Un                                    | 656  |  |           |  |  |  |
| Purchase Order # GPC107602  | 202                       | EMERGENCY (                                     | ONTACT / PHON               | NE NO.:                               |  | 30 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |           |  |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:                      | 293                       |   |                             |                                       |  |  | 1         |  |  |  |
| I haraby cortify that the above-desc  | cribed materials are no   | t hazardous wastes as de                        | ined by CFR Par             | t 261 or any appli                    | cable state law, l   | nave been fully and  | N. V.     |  |  |  |
| accurately described, classified and<br>Printed Name                          | packaged and are in p     | roper condition for trans<br>Signature "On be   | ortation accord<br>half of" | ling to applicable i                  | eguiations.  | Month Day  | 1         |  |  |  |
| BFILIPOUR   |                           | B4-   |                             |                                       |  | 1518   | 1         |  |  |  |
| 17. Transporter 1 Acknowledgeme   | nt of Receipt of Mater    |   |                             |                                       | 1  | Month Day  |           |  |  |  |
| Printed Name  | Cul                       | Signature                                       |                             | Ja-6                                  | 1  | 5 8  |           |  |  |  |
| 18. Transporter 2 Acknowledgeme<br>Printed Name                               | ent of Neceipt of Water   | Signature                                       | 1                           |                                       |  | Month Day  |           |  |  |  |
| 19. Certificate of Final Treatment/<br>I certify, on behalf of the above list | Disposal                  | that to the best of my line                     | wladga tha sho              | we-described was                      | te was managed   | I in compliance with   | all       |  |  |  |
| applicable laws, regulations, permi   | its and licenses on the   | dates listed above.                             |                             |                                       |  |  |           |  |  |  |
| 20. Facility Owner or Operator: Co  | ertification of receipt o | f non-hazardous material                        | s covered by this           | s manifest.                           |  | The state of the s | / 1       |  |  |  |
| Printed Name  |                           | Signature                                       | 1                           |                                       |  | Mønth Day  | 1         |  |  |  |
|   |                           |   |                             |                                       |  |  |           |  |  |  |

Gold-TRANSPORTER #1 COPY

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(windered) Ticket# 1251686

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677771

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/08/2018 08:06:08 In

Out 05/08/2018 08:06:08

Scale Inbound 1

Operator 1bejaran Ibejaran

Container

Billing #

Gen EPA ID NR

Driver Check#

> Gross Tare Net

Tons

60760 1b 27040 lb 33720 16 16.86

Comments

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Kirker

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Vehicle# C25 Volume

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Product.

COAL ASH & COAL CO 100 16.86 Tons

PORTW

Total Table Total Ticket

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|                       | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                             |  | nifest Doc I   | No.              | 2. Page 1  | of  | 7:22               |             |             |
|-----------------------|--|---|--|----------------|------------------|--|---|--------------------|-------------|-------------|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, E ATLANTA, GA 30308-3374 4. Generator's Phone 404-50             | GEO<br>BIN#10221 155                              | erator's Site Address (If d<br>DRGIA POWER PLAN<br>CROSSGATE RD.<br>IT WENTWORTH, GA | T KRAFT        | ailing):         | NAME OF THE PROPERTY OF THE PARTY OF THE PAR | st Number MNA B. State G                            | 6677<br>enerator's |             | <b>&gt;</b> |
|                       | 5. Transporter 1 Company Name  7. Transporter 2 Company Name   | Irading   |  | Number  Number |                  | D. Transpo   | ransporter's ID<br>orter's Phone<br>ransporter's ID |                    |             |             |
|                       | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                                 | Address   | 10. US EPA   | ID Number      | 190              | G. State F   | acility ID  | 912-9              | 27-611      | 3           |
| G                     | 11. Description of Waste Materials   |   |  | 12. Co<br>No.  | ntainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.                                | I. M               | isc. Commen | its         |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAM   | INATED WASTE                                      | C  | 25             | DT               | 18   |   |                    |             |             |
| R<br>A<br>T           | WM Profile<br>b.   | # 375200GAKRA                                     |  |                |                  |  |   |                    |             |             |
| O<br>R                | c.   | /M Profile #                                      |  |                |                  |  |   |                    |             |             |
| 4                     |  | /M Profile #                                      |  |                |                  |  |   |                    |             |             |
|                       | d.   | /M Profile #                                      |  |                | 10               |  |   |                    |             |             |
|                       | J. Additional Descriptions for Mater   | (0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0          |  | K. Dispos      | sal Location     | 132  | 724   | Level              | 61          |             |
|                       | 15. Special Handling Instructions and  | Additional Information                            | ·  | 1000           | C                | rf)  | 650   |                    |             |             |
|                       | Purchase Order # GPC1076029  | 3   | EMERGENCY CO   | NTACT / PH     | ONE NO.:         |  |   |                    |             |             |
|                       | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descril accurately described, classified and properties of the printed Name |   |  | rtation acco   |                  |  |   | ve been fu         | ly and  Day | Year        |
| T<br>R                | 17. Transporter 1 Acknowledgement  | of Receipt of Materials                           |  | 27_            |                  |  | X. D.Y.   | -                  | O           |             |
| A<br>N<br>S<br>P      | Printed Name 17 Chare   Fraz 18. Transporter 2 Acknowledgement   |   | Signature  | Fry            | ~                |  |   | Month 5            | Day         | Year        |
| O<br>R<br>T<br>E<br>R | Printed Name   | or neceipt of imaterials                          | Signature  |                |                  |  |   | Month              | Day         | Year        |
| F<br>A<br>C           | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits              | treatment facility, that and licenses on the date | es listed above.   |                |                  |  | as managed ir                                       | n compliand        | e with all  |             |
| LIT                   | 20. Facility Owner or Operator: Certi  | fication of receipt of no                         |  | overed by t    | his manifes      | t.   |   | 1                  | 0           |             |
| Y                     | Printed Name   |   | Signature  | 1              |                  |  | llow GENERA   | Month              | Day         | Yelar       |

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY



(transma) fleket# tail693

Volume

Constrainer Name Bluke) APOWER/RED BLUKEN, EDERO, Caprior 11 URLS TRUCKING 11 C

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677772

Destrination

(10)

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/08/2018 08:19:41

Out 05/08/2018 08:19:41

Scale

Inbound 1

Operator lbejaran

Vehicle# JØ9

Gen EPA ID NR

0001037

Container

Billing #

Driver

Check#

1be jaran

Gross

58520 16 23540 16

Tare Net Tons

34980 1b 17.49

Comments

Prachact. 1 10% (44.9 11(14) 170% Omount. (heinin) 1 COAL ASH & COAL CO 100 17.49 Tons PORTW Tellia Tam fotal floket



## MANAGEMENT NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |   | . IS N   | Manifest Des Na         | 2. Page  | 1 of  |                  | 177           |    |  |  |
|---|---|--|-------------------------|--|---|------------------|---------------|----|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA   |  | Manifest Doc No.        | z. rage  | 101   | 7:27             |               |    |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | GEO   | erator's Site Address                                | ANT KRAFT               |  | ifest Number                                | 667777           | 72            |    |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374   | PO  | CROSSGATE RD<br>RT WENTWORTH                         |                         |  | B. State                                    | Generator's ID   |               |    |  |  |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name  | 006-1365  | 6. US EI   | PA ID Number            | The second secon | e Transporter's I                           |                  |               |    |  |  |
| 7. Transporter 2 Company Name   | 3   | 8. US E  | PA ID Number            | E. Stat  | e Transporter's I                           | ID               |               |    |  |  |
| 9. Designated Facility Name and Sit   | e Address   | 10. US   | EPA ID Number           |  | F. Transporter's Phone G. State Facility ID |                  |               |    |  |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |   |  |                         | H. Sta   | e Facility Phone                            | 912-927          | 7-6113        |    |  |  |
| 11. Description of Waste Materials  |   |  | 12, Contain<br>No.      | ners 13. Tota Type Quantit   | - A   | I. Misc.         | . Comments    |    |  |  |
| a. COAL ASH& COAL CONTAIN   |   |  | T09 1                   | 07 18  |   |                  |               |    |  |  |
| WM Profil   | le# 375200GAKRA   | <u> </u>   |                         |  |   |                  |               |    |  |  |
|   | WM Profile #  |  |                         |  |   |                  |               |    |  |  |
| c.  |   |  |                         |  |   |                  |               |    |  |  |
| d.  | WM Profile #  |  |                         |  |   |                  |               |    |  |  |
|   | WM Profile #  |  |                         |  |   |                  |               |    |  |  |
| J. Additional Descriptions for Ma   | terials Listed Above  |  | K. Disposal  Cell  Grid | Location   | 1271  | Level            | 6)            |    |  |  |
| 15. Special Handling Instructions a   | nd Additional Informati   | ion  | dia                     | Ly   | 1632  |                  |               |    |  |  |
| Purchase Order # GPC10760   | 293   | EMERGEN  | CY CONTACT / PHON       | NE NO.:  | *   |                  | 16-20<br>18-5 |    |  |  |
| 16. GENERATOR'S CERTIFICATE:  | essibad materials are no  | t hazardous wastes a                                 | s defined by CFR Par    | t 261 or any app   | icable state law                            | , have been full | y and         |    |  |  |
| accurately described, classified and Printed Name   | d packaged and are in p   | Signature "O   | ansportation accord     | ning to applicable   | regulations.                                | Month            | Day           | 7  |  |  |
| 17. Transporter 1 Acknowledgem  | ent of Receipt of Mater   | ials Signature                                       | any                     | Was  | 0   | Month 5          | Day           | 1  |  |  |
| Printed Name  | 621   | . 1  | V                       |  |   |                  |               | Τ. |  |  |
| 18. Transporter 2 Acknowledgem Printed Name   | ent of Receipt of Mater   | Signature  | Y                       |  |   | Month            | Day           |    |  |  |
| 18. Transporter 2/Acknowledgem Printed Name  19. Certificate of Final Treatment Leartify, on hehalf of the above list | :/Disposal  | Signature that to the best of my                     | knowledge, the abo      | ove-described wa   | ste was manag                               |                  |               |    |  |  |
| 18. Transporter 2/Acknowledgem Printed Name   | :/Disposal<br>sted treatment facility, this and licenses on the | Signature that to the best of my dates listed above. |                         |  | ste was manag                               |                  |               |    |  |  |

Container

Billing #

Gen EPA ID NR

Driver

Check#



Superior Landfill 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

Original Ticket# 1251692

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Manifest 6677773

Destination

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

In 05/08/2018 08:16:27 Out 05/08/2018 08:16:27

Scale Inbound 1

Operator Ibejaran

lbejaran

Gross Tare Net

Tons

Vehicle# C26 Volume

0001037

25980 lb 34600 1b 17.30

60580 16

Comments

the fight Product 1 ) 1 (Ji. v THE Rate las famount PORTW 1 COAL ASH & COAL CO 100 17.30 Tons

Total Ticket



## WATER NON-HAZARDOUS MANIFEST

| -      | TAGTE HATAGENERI  | 4.6  |  | 100  | 1 2 2            | . 1                                 |                                       |               |                    |   |  |  |
|--------|---|--|--|--|------------------|-------------------------------------|---------------------------------------|---------------|--------------------|---|--|--|
|        | NON-HAZARDOUS MANIFEST  | 1. Generator's US EI                             |  | anifest Doc N  | No.              | 2. Page 1                           | of                                    | 7:32          |                    | )                                       |  |  |
|        | 3. Generator's Mailing Address:<br>GEORGIA POWER                                |  | nerator's Site Address (If o                   |  | ailing):         |                                     | st Number                             | 66777         | 773                |   |  |  |
| P      | 241 RALPH MCGILL BLVD NE,   | BIN#10221 15                                     | 5 CROSSGATE RD.                                |  |                  |                                     | B. State C                            | enerator's II | 0                  |   |  |  |
|        | ATLANTA, GA 30308-3374  | PC   | ORT WENTWORTH, G                               | A 31407  |                  |                                     |                                       |               | <u> </u>           |   |  |  |
|        | 4. Generator's Phone 404-5  | 06-1365  |  |  |                  |                                     |                                       |               |                    |   |  |  |
|        | 5. Transporter 1 Company Name   | Y .  | 6. US EPA I                                    | D Number   |                  |                                     |                                       |               |                    |   |  |  |
|        | 1200-11   | 100100   | <b>X</b>                                       |  |                  |                                     | ransporter's IC                       | )             | Van                |   |  |  |
|        | CMAGI G   | 71401114   |  |  |                  | D. Transp                           | orter's Phone                         |               |                    |   |  |  |
|        | 7. Transporter 2 Company Name   | 1  | 8. US EPA I                                    | D Number   |                  | E. State Transporter's ID           |                                       |               |                    |   |  |  |
|        |   |  |  |  |                  | F. Transporter's Phone              |                                       |               |                    |   |  |  |
|        | 9. Designated Facility Name and Site  | Address  | 10. US EPA                                     | ID Number  | ALT. Y           |                                     |                                       |               | la la la constanta | a Lamby d                               |  |  |
|        | SUPERIOR LANDFILL   |  |  |  |                  | G. State F                          | acility ID                            |               |                    |   |  |  |
|        | 3001 LITTLE NECK ROAD   |  |  |  |                  | H. State Facility Phone 912-927-611 |                                       |               |                    |   |  |  |
|        | Savannah, GA 31419  |  |  |  |                  |                                     |                                       |               |                    |   |  |  |
|        |   |  |  | innia stati  | - 5964.6         |                                     |                                       |               |                    |   |  |  |
| G      | 11. Description of Waste Materials  |  |  | No.  | ntainers<br>Type | 13. Total<br>Quantity               | 14. Unit<br>Wt./Vol.                  | I. Mis        | c. Commen          | ts                                      |  |  |
| E      | a. COAL ASH& COAL CONTAN  | IINATED WASTE                                    | (  | 101  | ~                | 111                                 |                                       | 1 1           |                    |   |  |  |
| N      |   |  |  | 100  | MI               | 118                                 |                                       | 1.0           |                    |   |  |  |
| E<br>R | WM Profile  | # 375200GAKRA                                    | 4  | il and a second  | 1                |                                     |                                       |               |                    |   |  |  |
| A      | b.  |  |  |  |                  |                                     |                                       |               |                    | 211000107200000000000000000000000000000 |  |  |
| T      |   |  |  |  |                  |                                     |                                       |               |                    |   |  |  |
| 0      |   | VM Profile #                                     |  |  |                  |                                     | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |               | Market 1           |   |  |  |
| R      | c.  |  |  |  |                  |                                     |                                       |               |                    |   |  |  |
|        |   |  |  | 1  |                  |                                     |                                       | 1             |                    |   |  |  |
|        |   | VM Profile #                                     |  | and the same that  |                  |                                     |                                       |               |                    |   |  |  |
|        | d.  |  |  | 1  |                  |                                     | 1 m                                   |               |                    |   |  |  |
|        |   |  |  |  |                  |                                     |                                       |               |                    |   |  |  |
|        |   | VM Profile #                                     | MARKET FORE                                    | - 100  |                  | - wasanialikali                     |                                       | 1000          |                    |   |  |  |
|        | J. Additional Descriptions for Mate   | rials Listed Above                               |  | K. Dispos  | sal Location     | 1.17                                | 0174                                  |               | 101                |   |  |  |
|        |   |  |  | Cell   |                  | V) 6                                | -11                                   | Level         | 01                 |   |  |  |
|        |   |  |  | Grid   | 1                | 001                                 | 32                                    |               |                    |   |  |  |
|        | 15. Special Handling Instructions and   | d Additional Informati                           | on   |  |                  | MIC                                 |                                       |               |                    |   |  |  |
|        |   |  |  |  |                  |                                     | 34                                    |               |                    |   |  |  |
|        |   |  |  |  | 29               |                                     |                                       |               |                    |   |  |  |
|        | Purchase Order # GPC107602  | 93   | EMERGENCY CO                                   | ONTACT / PH  | ONE NO.:         |                                     |                                       |               |                    |   |  |  |
|        | 16. GENERATOR'S CERTIFICATE:  |  |  |  |                  |                                     |                                       |               |                    |   |  |  |
|        | I hereby certify that the above-descr   | ibed materials are not                           | hazardous wastes as defi                       | ned by CFR I   | art 261 or       | any applicab                        | le state law, h                       | ave been ful  | ly and             |   |  |  |
|        | accurately described, classified and p  | packaged and are in pr                           | oper condition for transp<br>Signature,"On beh |  | ording to a      | pplicable regu                      | llations.                             | Month         | Day                | Year                                    |  |  |
|        | Printed Name  B Filipovich  |  | Signature On ben                               | all OI   |                  | /                                   |                                       | - Congression | ×                  | 17                                      |  |  |
| 4      | 17. Transporter 1 Acknowledgemen  | t of Receipt of Materia                          | als  | The state of the s | -                |                                     |                                       |               | 0                  | 11.0                                    |  |  |
| R      | Printed Name  |  | Signature                                      | A  | 0                | 1 1                                 |                                       | Month         | Day                | Year                                    |  |  |
| N<br>S | VIAmes G  | -dp  | V Gema   | . One  | 4                |                                     |                                       | K             | X                  | 11                                      |  |  |
| P      | 18. Transporter 2 Acknowledgemen  | t of Receipt of Materia                          | als TO   | /  |                  |                                     |                                       | )             | U                  |   |  |  |
| R      | Printed Name  |  | Signature                                      |  |                  |                                     |                                       | Month         | Day                | Year                                    |  |  |
| E      |   |  |  |  |                  |                                     |                                       |               |                    |   |  |  |
| K      | 10. Carliffert of Fig. 17   | isnosal  |  | 1  |                  |                                     |                                       |               |                    | 1                                       |  |  |
| F.     | 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste | isposal  | ant to the best of my know                     | dedge the a  | hove-desc        | rihed waste v                       | was managed                           | in complianc  | e with al          |   |  |  |
| A<br>C | applicable laws, regulations, permits   | o creatinent facility, the and licenses on the d | lates listed above.                            | vicuge, tile d   | Sove-desc        | ibed waste t                        | . as munaged                          | compliant     |                    | 937                                     |  |  |
| L      | 20. Facility Owner or Operator: Cer   |  |  | covered by t   | his manife       | st.                                 |                                       | -             | -,                 |   |  |  |
| 1<br>T | Printed Name  |  | Signature                                      |  |                  | -                                   |                                       | Month         | (Day               | Year                                    |  |  |
| Y      | Timed Hame  |  |  | 77   |                  |                                     |                                       |               | 10                 |   |  |  |
|        | White- TREATMENT, STORAGE, DISI   | POSAL FACILITY COPY                              | Blue- GENERATO                                 | Blue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY  |                  |                                     |                                       |               |                    |   |  |  |

Pink- FACILITY USE ONLY

Gold-TRANSPORTER #1 COPY

Volume



Superior Landfill 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/08/2018 Payment Type Credit Account -

Manual Ticket# Hauling Ticket#

Route State Waste Code

Time

Manifest 6677774

Destination

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

05/08/2018 09:44:49

Dut 05/08/2018 09:44:49

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Vehicle# C25

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Gross Tare Net Tons

61080 lb 27040 lb 4 34040 lb 17.02

Comments

Product

American 2

(heigh)

1 COAL ASH & COAL CO 100 17.02 Tons

PORTW

Total Tax fobal fielest

parulling



| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA      |   | nifest Doc No.   |  | 2. Page 1 c                     | of                              | 013            | 10                                     |        |
|---|----------------------------|---|--|--|---------------------------------|---------------------------------|----------------|--|--------|
|   | N /                        |   |  |  |                                 |                                 | 7.0            | ) )                                    |        |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | GEC                        | erator's Site Address (If di<br>DRGIA POWER PLAN  |  | ng):                                     | A. Manifes                      | t Number                        | 667777         | 74                                     |        |
| 241 RALPH MCGILL BLVD NE, I<br>ATLANTA, GA 30308-3374   |                            | CROSSGATE RD.<br>RT WENTWORTH, GA   | 31407  |  |                                 | B. State G                      | ienerator's ID |  |        |
| The second control of | 06-1365                    |   |  | 11.                                      |                                 |                                 |                |  |        |
| 5. Transporter 1 Company Name   | 1.                         | 6. US EPA ID  | Number   |  | C State Tr                      | ansporter's IE                  |                |  |        |
| 1 (mastal 6   | radina                     |   |  |  | TIT DISCUSSION STATES OF THE P. | orter's Phone                   | Į.             | -)-E5-VE                               |        |
| 7. Transporter 2 Company Name   |                            | 8. US EPA ID  | Number   |  |                                 |                                 |                |  |        |
|   | 0                          |   |  |  |                                 | ansporter's IE<br>orter's Phone | ).)            |  |        |
| 9. Designated Facility Name and Site  | Address                    | 10. US EPA I  | D Number   |  |                                 |                                 |                |  |        |
| SUPERIOR LANDFILL   |                            |   |  |  | G. State F                      | acility ID                      |                | A Para Constantion                     |        |
| 3001 LITTLE NECK ROAD   |                            |   |  | 1371779000000000000000000000000000000000 | H. State F                      | 7-6113                          |                |  |        |
| Savannah, GA 31419  |                            |   |  |  |                                 |                                 |                |  |        |
| G 11. Description of Waste Materials  |                            | No. of Alband Beat Burn Will  | 12. Conta  | iners<br>Type                            | 13. Total<br>Quantity           | 14. Unit<br>Wt./Vol.            | I. Misc.       | Comments                               |        |
| a. COAL ASH& COAL CONTAN  | IINATED WASTE              | 0   |  | 11100                                    | 107                             |                                 |                |  |        |
| N   |                            | (*.   | 25   | DI                                       | 18                              |                                 |                | AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA |        |
| WM Profile  | # 375200GAKRA              |   |  |  |                                 |                                 |                |  |        |
| A b.  |                            |   |  |  |                                 |                                 |                |  |        |
| 0   |                            |   |  |  |                                 |                                 |                |  |        |
| R c.  | VM Profile #               |   |  |  |                                 |                                 |                |  |        |
| C.  |                            |   |  |  |                                 |                                 |                |  |        |
| 1   | VM Profile #               |   |  |  |                                 |                                 |                |  |        |
| d.  |                            |   |  |  |                                 |                                 |                |  |        |
|   |                            |   |  |  |                                 | 1150                            |                |  |        |
| J. Additional Descriptions for Mate   | WM Profile #               |   | K. Disposal  | Location                                 | 1                               |                                 |                | / .                                    |        |
| J. Additional Descriptions for Mate   | Hais Listed Above          |   |  |  | 137                             | 225                             | - 6            | 5                                      | 34     |
|   |                            |   | Cell<br>Grid   |  | VJU                             | 1.                              | Level (        | //                                     |        |
| 15. Special Handling Instructions an  | d Additional Informatio    | n   | Und  | 1  | .M                              | 1052                            | 747            | 1 1                                    | 14-    |
| 13. Special Harland mad decrons an  |                            |   |  |  | 11                              | W )                             |                |  |        |
| Mary Mary Mary Mary Mary Mary Mary Mary   |                            | 1-15-4-1  | 1, 1, 1, 1, 1  |  |                                 |                                 |                |  |        |
| Purchase Order # GPC107602  | 93                         | EMERGENCY CC  | NTACT / PHO  | NE NO.:                                  |                                 |                                 |                | -                                      |        |
| 16. GENERATOR'S CERTIFICATE:  |                            |   | t-4  |  |                                 |                                 | 6.06           |  |        |
| I hereby certify that the above-desci<br>accurately described, classified and   | ribed materials are not l  | hazardous wastes as defined as defined as a | ned by CFR Pa<br>ortation accord   | rt 261 or<br>ding to a                   | any applicab                    | ie state iaw, r<br>ulations.    | iave been runy | dilu                                   |        |
| Printed Name  | packagea arra are in pre   | Signature "On beha  | alf of"  |  |                                 |                                 | Month          | Day                                    | Year   |
| Btilipoveh  |                            | BB  | No. of the Local Control of th |  |                                 |                                 | 151            | 7                                      | 11     |
| 17. Transporter 1 Acknowledgemer  | nt of Receipt of Material  |   |  |  |                                 |                                 | Month          | Day                                    | Year   |
| Printed Name  | 2:00                       | Signature .   | I fre  |  | , Y-1-1-1                       |                                 | 5              | 8                                      | X      |
| o 18. Transporter 2 Acknowledgemen  |                            | ls  | 3  | 11.1                                     |                                 |                                 | )              | 70                                     | . 0    |
| R Printed Name  |                            | Signature   |  |  |                                 | N.                              | Month          | Day                                    | Year   |
| E<br>R  |                            |   |  |  |                                 |                                 |                |  |        |
| 19. Certificate of Final Treatment/[  | Disposal                   |   |  |  |                                 |                                 |                |  |        |
| I certify, on behalf of the above liste   | ed treatment facility, the | at to the best of my know   | ledge, the abo   | ove-desc                                 | ribed waste                     | was managed                     | in compliance  | with all                               |        |
| applicable laws, regulations, permit  | s and licenses on the da   | nen hazardous materials   | covered by thi   | is manife                                | est.                            |                                 |                |  |        |
| 20. Facility Owner or Operator: Ce  | runcation of receipt of i  | Signature   | COVERED DY III   | .5 manne                                 |                                 |                                 | Month          | Day                                    | / Year |
| Y Filited Name  | 41-                        |   | 1  |  |                                 |                                 | 5              | 1/                                     | V      |
| White- TREATMENT, STORAGE, DIS  | POSAL FACILITY COPY        | Blue- GENERATO  | R #2 COPY  | -10                                      | Y                               | ellow- GENER                    | ATOR #1 COP    | 1                                      |        |

Pink- FACILITY USE ONLY

Gold-TRANSPORTER #1 COPY

Original Ticket# 1251768

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/08/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

In 05/08/2018 10:23:22

Out 05/08/2018 10:23:22

Manifest 6677775

Destination

PO

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale Inbound 1

Operator lbejaran lbejaran

= = 1

Vehicle# JØ1

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

52880 lb Gross 23340 lb Tare 29540 lb Net 14.77 Tons

Comments

#### WASTE MANAGEMENT

| Product              | LD%               | Qtv   | UOM  | Rate | Tax | Amount  | Origin  |
|----------------------|-------------------|-------|------|------|-----|---|---|
| Produce              | Torre died. V. T. |       |      |      |     | a news, series belong order disable service and a report table, record action areas | C THESE PRINTS AND PARTY AND RATE THE PARTY AND STATE WHEN STATE WHEN THE PARTY |
| 1 COOL OSH & COOL CO | 1 (710)           | 14.77 | Tons |      |     |   | PORTW   |

Total Tax fobat floket



| WASTE MAIRAGEMENT   | PA ID No.  | Mai   | nifest Doc N                  | lo.           | 2. Page 1 d      | of                        | a'll                            |                          |  |  |  |
|---|--|---|-------------------------------|---------------|------------------|---------------------------|---------------------------------|--------------------------|--|--|--|
| NON-HAZARDOUS MANIFEST  | N /  | Α   |                               |               |                  |                           |                                 | IK                       |  |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, | GE<br>BIN#10221 15   | nerator's Site Ac<br>ORGIA POWI<br>5 CROSSGAT | ER PLAN <sup>-</sup><br>E RD. | Γ KRAFT       | iling):          | A. Manifes                | MNA                             | 6677775                  |  |  |  |
| ATLANTA, GA 30308-3374  | And the second s | ORT WENTWO                                    | ORTH, GA                      | 31407         |                  | le ve                     |                                 |                          |  |  |  |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name                      | 06-1365  | 6.  | US EPA ID                     | Number        |                  | C. State Transporter's ID |                                 |                          |  |  |  |
| 7. Transporter 2 Company Name   | gradiac  | 8.  | US EPA ID                     | Number        |                  | D. Transpo                | orter's Phone                   |                          |  |  |  |
|   | C  |   |                               |               |                  | 4                         | ansporter's IE<br>orter's Phone |                          |  |  |  |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL                     | Address  | 10.   | US EPA I                      | D Number      |                  | G. State F                | acility ID                      |                          |  |  |  |
| 3001 LITTLE NECK ROAD   |  | Marie   |                               |               |                  |                           | acility Phone                   | 912-927-6113             |  |  |  |
| Savannah, GA 31419  |  |   |                               |               |                  |                           |                                 |                          |  |  |  |
| 11. Description of Waste Materials  |  | (13/by # 31/4)                                |                               | 12. Co<br>No. | ntainers<br>Type | 13. Total<br>Quantity     | 14. Unit<br>Wt./Vol.            | I. Misc. Comments        |  |  |  |
| a. COAL ASH& COAL CONTAIN   | IINATED WASTE  |   |                               | 121           | 7                | 15                        |                                 |                          |  |  |  |
|   | " 27F200CAVE   |   | -                             | 101           |                  | 18                        |                                 |                          |  |  |  |
| b. WM Profile   | # 375200GAKRA  | <b>,</b>                                      |                               |               |                  |                           |                                 |                          |  |  |  |
|   |  |   |                               |               |                  |                           |                                 |                          |  |  |  |
|   | WM Profile #   |   |                               |               |                  |                           |                                 |                          |  |  |  |
| C.  |  |   |                               |               | -                |                           |                                 |                          |  |  |  |
|   | WM Profile #   |   |                               |               |                  |                           |                                 |                          |  |  |  |
| d.  |  |   |                               |               | 1                |                           | 1                               |                          |  |  |  |
|   | WM Profile #   |   |                               |               |                  | (022                      |                                 |                          |  |  |  |
| J. Additional Descriptions for Mate   | erials Listed Above  |   |                               | K. Dispo      | sal Location     | 170                       | 25                              | 1-5                      |  |  |  |
|   |  |   |                               | Cell          |                  | 1                         | 17                              | Level 4                  |  |  |  |
| 15. Special Handling Instructions ar  | d Additional Informati   | ion   |                               | Grid          |                  | M                         | 4)                              |                          |  |  |  |
| 13. Special Handling Historica at   |  |   |                               |               |                  | y.                        |                                 |                          |  |  |  |
| Purchase Order # GPC107602  | 03   | FMFI  | RGENCY CC                     | NTACT / PH    | ONE NO.:         | <u> </u>                  |                                 |                          |  |  |  |
| 16. GENERATOR'S CERTIFICATE:  |  | 18 70   | 1                             |               |                  |                           |                                 |                          |  |  |  |
| I haraby certify that the above-desc  | ribed materials are no   | t hazardous was                               | stes as defi                  | ned by CFR    | Part 261 or      | any applicat              | ole state law, l                | nave been fully and      |  |  |  |
| accurately described, classified and Printed Name                             | packaged and are in p  | Signatur                                      | re "On beh                    | alf of"       | ording to a      | ppiicable reg             | didistrib                       | Month Day Ye             |  |  |  |
| BFILIDOVICE   |  | 84  | 2                             |               | 1                |                           | 1                               | 15 18 11                 |  |  |  |
| 17. Transporter 1 Acknowledgeme Printed Name                                  | nt of Receipt of Mater   | Signatui                                      | re                            |               | N                |                           | 11                              | Month Day Yo             |  |  |  |
| MORAMO I  | Oxoula   | MV/C  | C                             | - 6           |                  | re,                       | 1                               | 1918 11                  |  |  |  |
| 18. Transporter 2 Acknowledgeme   | nt of Receipt of Mater   | ials Signatu                                  | ire                           | 7             |                  |                           | 1                               | Month Day Y              |  |  |  |
| Printed Name  |  | Jignata                                       | 76                            |               |                  |                           |                                 |                          |  |  |  |
| 19. Certificate of Final Treatment/   | Disposal   |   |                               |               |                  |                           |                                 |                          |  |  |  |
| Legitify on behalf of the above list  | ed treatment facility, t   | hat to the best                               | of my know                    | ledge, the    | above-desc       | ribed waste               | was managed                     | I in compliance with all |  |  |  |
| applicable laws, regulations, permi  20. Facility Owner or Operator: Co       | ts and licenses on the<br>ertification of receipt o  | f non-hazardous                               | s materials                   | covered by    | this manife      | est.                      |                                 | ,                        |  |  |  |
| Printed Name  | ton  | Signatu                                       | ure                           | (             | 1                | 7                         |                                 | Month Day Y              |  |  |  |
|   | Land Land  | Diversi                                       | GENERATO                      | R #2 CODY     | Me               | 7)                        | Yellow- GENFI                   | RATOR #1 COPY            |  |  |  |
| White-TREATMENT, STORAGE, DISPINK-FACILITY USE                                | M. P. C.   |   |                               | ER #1 COPY    | /                | 1.                        |                                 | 1:11                     |  |  |  |



Original Ticket# 1251769

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Vehicle# J09

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677776

Destination

PO Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Generator

Time 05/08/2018 10:24:49

Out 05/08/2018 10:24:49

Scale Inbound 1

Operator lbejaran

1be jaran

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Gross 54320 1b Tare 23540 15 Net 30780 1b Tons 15.39

Comments

Product LD% Qty MOU Rate Tax Amount Origin

COAL ASH & COAL CO 100

15.39 Tons

PORTW

Total Tax fat.xl finkert



| 1                     | NON-HAZARDOUS MANIFEST   | Generator's US EPA ID No.     Manifest Doc No.     N / A  |  |               |                  |  | of                   | 9'17   |  |  |  |  |
|-----------------------|--|---|--|---------------|------------------|--|----------------------|--|--|--|--|--|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5  | WER CGILL BLVD NE, BIN#10221 30308-3374  GEORGIA POWER PLANT KRAFT 155 CROSSGATE RD. PORT WENTWORTH, GA 31407 |  |               |                  |  |                      | A. Manifest Number 6677776  B. State Generator's ID            |  |  |  |  |
|                       | 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | rading  | 6. US EPA ID   |               |                  | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID |                      |  |  |  |  |  |
|                       | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | 10. US EPA I  | D Number   |               | G. State F       | 912-927-6113   |                      |  |  |  |  |  |
| G                     | 11. Description of Waste Materials   |   |  | 12. Co<br>No. | ntainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol. | I. Misc. Comments  |  |  |  |  |
| E<br>N<br>E<br>R      | a. COAL ASH& COAL CONTAN   | # 375200GAKRA   | 7  | 09            | DT               | 18   |                      |  |  |  |  |  |
| A<br>T<br>O<br>R      | b. V   | VM Profile #  |  |               |                  |  |                      |  |  |  |  |  |
| N                     | V  | VM Profile #  |  |               |                  |  |                      |  |  |  |  |  |
|                       | d.  V.  J. Additional Descriptions for Mate  | VM Profile #<br>rials Listed Above  |  | 0,25          | 25 Level 6 t     |  |                      |  |  |  |  |  |
|                       | 15. Special Handling Instructions and  | d Additional Information  |  | Grid          | C                | rh   | Le 3:                |  |  |  |  |  |
| T R A N S P O R T E R | Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr accurately described, classified and printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name | ibed materials are not hoackaged and are in property of Receipt of Materials                                  | per condition for transpo<br>Signature "On beha<br>signature | ed by CFR I   | Part 261 or a    | any applicab<br>plicable regu  | le state law, ha     | Month Day Year  Month Day Year  Month Day Year  Month Day Year |  |  |  |  |
| F A C I L I T Y       | 19. Certificate of Final Treatment/D I certify, on behalf of the above liste applicable laws, regulations, permits 20. Facility Owner or Operator: Cer Printed Name  White-TREATMENT, STORAGE, DISE  | d treatment facility, that<br>s and licenses on the dat<br>tification of receipt of no                        | es listed above.   | overed by t   | $-\Delta$        | 8  | vas managed i        | Month Bay Year   |  |  |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY

Original Ticket# 1251772

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

State Waste Code

Manifest 6677777

Destination

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/08/2018 10:29:40

Out 05/08/2018 10:29:40

Scale Inbound 1

Operator 1bejaran lbejaran

Gross Tare Net-Tons

Volume

55520 lb 22980 lb 3254Ø 1b 16.27

Comments

Product

Qty LD%

Tax UOM Rate

Vehicle# JØ6

0001037

Container

Billing # Gen EPA ID NR

Driver

Check#

Amount

Origin

COAL ASH & COAL CO 100

16.27 Tons

PORTW

James Chosby

Total Tax Intal Flokest



|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA     |  | anifest Doc No.                 | 2. Page 1  | of                         | 9:20         |             |      |  |
|------------------|---|---------------------------|--|---------------------------------|--|----------------------------|--------------|-------------|------|--|
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, E   | GEO                       | erator's Site Address (IF o<br>DRGIA POWER PLAN<br>CROSSGATE RD. |                                 | 200000000000000000000000000000000000000  | est Number MNA  B. State G | 6677777      |             |      |  |
|                  | The transfer of the second of | POF<br>06-1365            | RT WENTWORTH, G  |                                 | C. State Transporter's ID  D. Transporter's Phone  E. State Transporter's ID  F. Transporter's Phone |                            |              |             |      |  |
|                  | Transporter 1 Company Name     Transporter 2 Company Name   | grading                   |  | D Number  D Number              |  |                            |              |             |      |  |
|                  | 9. Designated Facility Name and Site  | Address                   |  | ID Number                       |  |                            |              |             |      |  |
|                  | SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  |                           |  |                                 | G. State F   | acility ID                 | 912-927-6113 |             |      |  |
|                  | Savannah, GA 31419  |                           |  |                                 |  | ica wallon<br>Tali Sandin  |              |             |      |  |
| G                | 11. Description of Waste Materials  |                           |  | No. Type                        | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.       | l. M         | isc. Commer | ts   |  |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAM!  WM Profile 8   |                           |  | SOPDI                           | 18   |                            |              |             |      |  |
| R<br>A<br>T<br>O | b.  |                           |  |                                 |  |                            |              |             |      |  |
| R                | c.  | M Profile #               | x 30   |                                 |  |                            |              |             |      |  |
|                  | d.  | W Frome #                 | 4-16-16-W  |                                 |  | inis Allin and ghalle      |              |             |      |  |
|                  | 10.   | M Profile #               |  |                                 |  |                            |              | ito         |      |  |
|                  | J. Additional Descriptions for Materi   | ials Listed Above         |  | K. Disposal Locatio  Cell  Grid | 32   | 1,24                       | Level        | 6           |      |  |
|                  | 15. Special Handling Instructions and   | Additional Information    |  |                                 | M  | la se                      |              |             |      |  |
|                  | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE:   | 3                         | EMERGENCY CO   | NTACT / PHONE NO.:              |  |                            |              |             |      |  |
|                  | I hereby certify that the above-describ<br>accurately described, classified and pa<br>Printed Name  |                           |  | rtation according to a          | Market Co. St.   |                            | ve been ful  | lly and     | Year |  |
|                  | 17. Transporter 1 Acknowledgement   | of Receipt of Materials   | Bten   |                                 |  |                            | 5            | 3           | 18   |  |
| TRANSPO          | Printed Name  18. Transporter 2 Acknowledgement   | y                         | Signature  | AUD                             | /  |                            | Month 5      | Day         | Year |  |
| R<br>T<br>E<br>R | Printed Name  |                           | Signature  |                                 |  |                            | Month        | Day         | Year |  |
| FACI             | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits a   | treatment facility, that  |  | edge, the above-descr           | ribed waste w  | as managed in              | complianc    | e with all  |      |  |
| L                | 20. Facility Owner or Operator: Certi   | fication of receipt of no |  | overed by this manife           | st.  |                            | Ment         | /Day        | Va   |  |
| Y                | Printed Name  White- TREATMENT, STORAGE, DISPO  | DSAL EACHLY CORV          | Signature Blue- GENERATOR  | #2 COBY                         | V  | llow- GENERAT              | Month        | Day         | Year |  |

Pink- FACILITY USE ONLY

Gold-TRANSPORTER #1 COPY

Original Ticket# 1251764

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677778

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/08/2018 10:17:45 In Out 05708/2018 10:17:45 Scale

Inbound 1

Operator lbejaran

lbejaran

Gross Tare

59120 1b 25980 1b

Net Tons 33140 lb 16.57

Comments

Waste Management

Product.

1 19% (21.5) (31.97)

Vehicle# C26

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Omenine.

COAL ASH & COAL CO 100

16.57 Tons

PORTW

Total Tax fotal fleket



## WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   | 1. Generator's US EPA ID   | No.                    | Manif           | est Doc No.  |                        | 2. Page 1 o                   | f  | al.               | -       |  |  |
|--|--|------------------------|-----------------|--------------|------------------------|-------------------------------|--|-------------------|---------|--|--|
| NON-HAZARDOUS MANIFEST   | N/A  | / A                    |                 |              |                        |                               |  | 10                | 77      |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEOR   | itor's Site Addre      | PLANT I         |              | g):                    | A. Manifes                    | MNA  | 6677778           |         |  |  |
| 241 RALPH MCGILL BLVD NE, I<br>ATLANTA, GA 30308-3374  | PORT   | ROSSGATE R<br>WENTWORT |                 | 1407         |                        | B. State Generator's ID       |  |                   |         |  |  |
| 4. Generator's Phone 404-5  5. Transporter 1 Company Name  | 06-1365  | 6. US                  | EPA ID N        | umber        | W                      | C. State Tr                   | ansporter's I  |                   |         |  |  |
| 7. Transporter 2 Company Name  | rading   | 8. US                  | EPA ID N        | umber        | - 1                    | D. Transporter's Phone        |  |                   |         |  |  |
|  | 0  |                        | C. Strawyork to |              |                        |                               | ansporter's II<br>orter's Phone  |                   |         |  |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL   | Address  | 10. U                  | S EPA ID        | Number       |                        | G. State Fa                   |  | 012 027 6         | 112     |  |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |  |                        |                 |              |                        | H. State Fa                   | acility Phone  | 912-927-6         | 113     |  |  |
| 11. Description of Waste Materials   |  | Alle emperio esti      |                 | 12. Contai   | iners<br>Type          | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.   | I. Misc. Com      | nments  |  |  |
| a. COAL ASH& COAL CONTAIN  | IINATED WASTE  |                        | 0               | 261          | ST                     | 18                            | ELICECTURA DE SECULO PEROPETADO DE CONTROLO PEROPETADO PEROPET |                   |         |  |  |
| WM Profile   | # 375200GAKRA  |                        |                 |              |                        | Supti I had                   |  |                   |         |  |  |
| b.   |  |                        |                 |              |                        | 9.4                           |  |                   |         |  |  |
|  | WM Profile #   |                        |                 |              |                        |                               |  |                   |         |  |  |
| c.   | WINT TO THE II   |                        |                 |              |                        |                               |  |                   |         |  |  |
|  |  |                        |                 |              |                        |                               |  |                   |         |  |  |
| d.   | WM Profile #   |                        | 1               |              |                        |                               |  |                   |         |  |  |
| u.   |  |                        |                 |              |                        |                               |  |                   |         |  |  |
|  | WM Profile #   |                        | 4               |              |                        | The section                   |  |                   |         |  |  |
| J. Additional Descriptions for Mate  |  |                        |                 | K. Disposal  | Location               |                               | 1 1 1  | 1 /               |         |  |  |
|  |  |                        |                 | Cell<br>Grid |                        | 1                             | LA   | Level             | 5       |  |  |
| 15. Special Handling Instructions ar   | nd Additional Information  | Y                      |                 |              |                        | L                             | 806  | 32                |         |  |  |
| Purchase Order # GPC107602   | 293  | EMERGE                 | NCY CON         | TACT / PHO   | NE NO.:                |                               |  |                   |         |  |  |
| 16. GENERATOR'S CERTIFICATE:   | Turding Grant in Grant G |                        |                 |              |                        |                               |  |                   |         |  |  |
| I hereby certify that the above-desc<br>accurately described, classified and   | ribed materials are not ha   | zardous wastes         | as define       | d by CFR Pa  | rt 261 or<br>ding to a | any applicat<br>oplicable reg | ulations.  | nave been runy ar | iu      |  |  |
| Printed Name   |  | Signature "            | On behalf       | of"          |                        |                               |  | Month D           | ay Y    |  |  |
| 17. Transporter 1 Acknowledgeme / Printed Name   | nt of Receipt of Materials   | Signature              | nin             | 10           | 1                      |                               |  | Month D           | ay Y    |  |  |
| L SHIKES C   | est of Receipt of Materials  | X M                    | MI              | ag           | _                      |                               |  |                   | 1       |  |  |
| 18. Transporter 2 Acknowledgeme<br>Printed Name  | int of necespt of wateries   | Signature              |                 |              |                        |                               |  | Month [           | Day Y   |  |  |
| 19. Certificate of Final Treatment/<br>I certify, on behalf of the above list<br>applicable laws, regulations, permi | ed treatment facility, that<br>its and licenses on the date  | es listed above.       |                 |              |                        |                               | was managed  | d in compliance w | ith all |  |  |
| 20. Facility Owner or Operator Co  | ertification of receipt of no  | on-hazardous m         | aterials co     | overed by th | is manife              | est.                          |  | Month             | Day (   |  |  |
| Printed Name   | Tar)   | Signature              | - A             | 11/          |                        |                               |  | 7                 | 7/1     |  |  |
| White-TREATMENT, STORAGE, DI   | CDOCAL ENCLUTY CODY  | Blue- GEN              | JERATOR.        | #2 COPY      |                        |                               | Yellow- GENE   | RATOR #1 COPY     | /       |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1251794

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677779

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/08/2018 11:15:43 Out 05/08/2018 11:15:43

Scale

Operator LBEJARAN Inbound 1

LBEJARAN

Gross Tare

0001037

Net

62100 16 27040 15 35060 lb

17.53 Tons

Comments

Vehicle# C25

Container

Billing #

Gen EPA ID NR

Driver

Check#

| Pro | duct               | LD%   | Qty   | UOM   | Rate   | Tax  | Amount  | Origin      |
|-----|--------------------|-------|-------|-------|--|--|---|-------------|
|     | COAL ASH & COAL CO |       |       | Tons  | a quant trade societ social state anno state scient social s | nes deservation select their direct series were been too | i datar kende uddak kemi danor bindir pame kente kama atasa bindi kend<br>: | PORTW       |
| 1   | LUHL HOH & LUHL LL | 1 100 | 1/.00 | 10115 |  |  |   | L.CLU I (A) |

Total Tax fotal Ticket

pricht fry



|    | NON-HAZARDOUS MANIFEST  1. Generato                             | or's US EP   |                  | Ma          | nifest Doc  | No.                     | 2. Page 1                       | of              | 10:11)       |             |                           |  |
|----|---|--------------|------------------|-------------|-------------|-------------------------|---------------------------------|-----------------|--------------|-------------|---------------------------|--|
|    | 3. Generator's Mailing Address:                                 |              | erator's Site Ac | Idroce (c.) |             | -111                    |                                 |                 | 10.40        |             |                           |  |
| H  | GEORGIA POWER   | ORGIA POWI   |                  |             | ailing):    | - 5-20-0 - 19-W/10-1 (A | est Number                      | 6677779         |              |             |                           |  |
|    | 241 RALPH MCGILL BLVD NE, BIN#10221                             | CROSSGATI    |                  | i muu i     |             | W                       | /MNA                            | 0077773         |              |             |                           |  |
|    | ATLANTA, GA 30308-3374  |              | RT WENTWO        |             | 31407       |                         |                                 | B. State (      | Generator's  | ID          |                           |  |
|    | 4. Generator's Phone 404-506-1365                               |              |                  |             |             |                         |                                 |                 |              |             |                           |  |
|    | 5. Transporter 1 Company Name                                   |              | 6.               | US EPA ID   | Number      |                         |                                 |                 |              |             |                           |  |
|    | ('DOS G G G G   | '10          |                  |             |             |                         |                                 | ransporter's II | )            |             |                           |  |
|    | 7. Transporter 2 Company Name                                   | 119          | 8.               | US EPA ID   | Number      |                         | D. Transp                       | orter's Phone   |              |             |                           |  |
|    |   |              | 0.               | OJ EFA ID   | Number      |                         | E. State T                      | ransporter's IC | )            |             |                           |  |
|    |   |              | 4                |             |             | v dist                  |                                 | orter's Phone   |              |             |                           |  |
|    | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL  |              | 10.              | US EPA I    | D Number    |                         |                                 |                 |              |             | Name :                    |  |
|    | 3001 LITTLE NECK ROAD   |              |                  |             |             |                         | G. State I                      | acility ID      |              |             | The last                  |  |
|    | Savannah, GA 31419  |              |                  |             |             |                         | H. State Facility Phone 912-927 |                 |              |             | 27-6113                   |  |
|    | Savarman, OA 31419  |              | orthograph.      |             |             |                         |                                 |                 |              |             |                           |  |
| G  | 11. Description of Waste Materials                              |              |                  |             |             | ntainers                | 13. Total                       | 14. Unit        |              |             |                           |  |
| E  | a. COAL ASH& COAL CONTAMINATED WA                               | STF          |                  | ^           | No.         | Type                    | Quantity                        | Wt./Vol.        | I. MI        | sc. Comment | .5                        |  |
| N  | a. COMENSING COAL CONTAININATED WA                              | 1316         |                  |             | 1           | DI                      | 1X                              |                 | A TOTAL      |             |                           |  |
| E  | WM Profile # 375200   | GAKRA        |                  | (           | XX          | 101                     | 1                               |                 |              |             |                           |  |
| A  | b.  |              |                  |             |             |                         |                                 |                 |              | ATT I       |                           |  |
| Т  |   |              |                  |             |             |                         |                                 |                 |              |             |                           |  |
| O  | WM Profile #  |              |                  |             |             |                         |                                 |                 |              |             |                           |  |
| '\ | c.  |              |                  |             |             | SATHUMININ              |                                 |                 | NA REFULLI   |             |                           |  |
| 4  |   |              |                  |             |             |                         |                                 |                 |              |             |                           |  |
|    | WM Profile #  |              |                  |             |             |                         |                                 |                 |              |             | $\mathbb{H}_{\mathbb{H}}$ |  |
|    | <b>u.</b>   |              |                  |             |             |                         |                                 |                 |              |             |                           |  |
|    |   |              |                  |             | 1477        |                         |                                 |                 |              |             | 0                         |  |
| 1  | WM Profile # J. Additional Descriptions for Materials Listed Ab | ove          |                  |             | K Dispos    | al Location             |                                 |                 |              |             |                           |  |
|    |   |              |                  |             | K. Dispus   | ai cocation             | 100                             | 1194            |              | 105         |                           |  |
|    |   |              |                  |             | Cell        |                         | VIV                             | 111             | Level        | 4           | J. C.                     |  |
| -  | 15 Choolel Handling Instruction and Additional Life             |              |                  |             | Grid        | 1                       | 0 -                             | 7.              |              |             |                           |  |
|    | 15. Special Handling Instructions and Additional Inf            | ormation     |                  |             |             |                         | M                               | 650             |              |             |                           |  |
|    |   |              |                  |             |             |                         | N. Y                            |                 |              |             |                           |  |
| Ī  | Purchase Order # GPC10760293                                    | 1            | EMERG            | ENCY CON    | TACT / PHO  | ONE NO :                | 94                              |                 |              |             |                           |  |
|    | 16. GENERATOR'S CERTIFICATE:                                    |              |                  |             |             |                         | 194                             |                 | 7            |             |                           |  |
|    | I hereby certify that the above-described materials             | are not ha   | azardous waste   | s as define | d by CFR Pa | art 261 or a            | ny applicabl                    | e state law, ha | ve been full | v and       |                           |  |
|    | accurately described, classified and packaged and a             | re in prop   | er condition fo  | r transport | ation accor | rding to app            | olicable regu                   | lations.        |              |             |                           |  |
|    | Printed Name B Filipovich                                       |              | Signature '      | 'On behalf  | of"         |                         |                                 |                 | Month        | Day         | Year                      |  |
| r  | 17. Transporter 1 Acknowledgement of Receipt of                 | Materials    | 124              |             |             | *                       |                                 |                 | 15           | 8           | 18                        |  |
| 2  | Printed Name  | · racci rais | Signature        |             |             |                         |                                 |                 | Month        | Day         | Year                      |  |
| V  | X Michael Frazier   |              | V m              | rich &      | O-fa        |                         |                                 |                 | Kildi        | ×           | TY.                       |  |
| 0  | 18. Transporter 2 Acknowledgement of Receipt of                 | Materials    | 1                |             |             |                         |                                 |                 |              | 0           | 10                        |  |
| 7  | Printed Name  | (mark)       | Signature        |             |             |                         |                                 |                 | Month        | Day         | Year                      |  |
| 3  |   |              |                  |             |             |                         |                                 |                 |              |             |                           |  |
|    | 19. Certificate of Final Treatment/Disposal                     |              |                  |             |             |                         |                                 |                 |              |             |                           |  |
| 4  | I certify, on behalf of the above listed treatment fac          | ility, that  | to the best of n | ny knowle   | dge, the ab | ove-describ             | ed waste w                      | as managed in   | compliance   | with all    |                           |  |
| -  | applicable laws, regulations, permits and licenses of           | the date     | es listed above. |             |             |                         |                                 | 9               |              |             |                           |  |
|    | 20. Facility Owner or Operator: Certification of rec            | eipt of no   |                  | aterials co | vered by th | is manifest             |                                 |                 |              |             |                           |  |
| ,  | Printed Name  | /            | Signature        | 1           | 1           |                         |                                 |                 | Month        | Cleav       | Year                      |  |
|    | White TREATMENT STORAGE DISPOSAL STORAGE                        | CODY         | DI O             | ED ATOS     | 2.005       |                         |                                 |                 |              | V           | 10                        |  |
|    | White-TREATMENT, STORAGE, DISPOSAL FACILITY                     | LUKY         | Blue- GEN        | EKATOR #    | Z COPY      |                         | Ye                              | Ilow- GENERAT   | OR #1 COPY   | Y           |                           |  |

Pink- FACILITY USE ONLY

Gold-TRANSPORTER #1 COPY



Original Ticket# 1251817

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Vehicle# C26

Ticket Date 05/08/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6677780

Destination

Generator

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/08/2018 11:52:16 In Out 05/08/2018 11:52:16

Scale Inbound 1

Operator RENEE

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

60200 15 Gross Tare 2598Ø 1b 34220 16 Net Tons 17.11

Comments

Product Qty HOM Rate Tax LD% Amount

1 COAL ASH & COAL CO 100

17.11 Tons

PORTW

Origin

Total Tax fobal floket





| WASTE MANAGEMENT   |   |  |  | age 1 of                       |   |                            |               |              |            |  |  |
|--|---|--|--|--------------------------------|---|----------------------------|---------------|--------------|------------|--|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                       |  |  |                                |   |                            | 11:07         |              |            |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEO   | erator's Site Address (If diff<br>PRGIA POWER PLANT<br>CROSSGATE RD. |  | A. N                           | //anifest   |                            | 6677780       |              |            |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-                     |   | T WENTWORTH, GA  | 31407  |                                |   | B. State G                 | enerator's ID |              |            |  |  |
| 5. Transporter 1 Company Name  | 200100  | 6. US EPA ID   | Number   | 1 2000                         | C. State Transporter's ID                         |                            |               |              |            |  |  |
| 7. Transporter 2 Company Name  | raing   | 8. US EPA ID   | Number   | E. S                           | D. Transporter's Phone  E. State Transporter's ID |                            |               |              |            |  |  |
| 9. Designated Facility Name and Si<br>SUPERIOR LANDFILL  | te Address  | 10. US EPA II  | ) Number   |                                | ranspor<br>State Fac                              | ter's Phone                |               |              |            |  |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |   |  |  | H.:                            | State Fac   | cility Phone               | 912-92        | 7-6113       |            |  |  |
| 11. Description of Waste Materials   |   |  | 12. Containe<br>No.  | 20/20                          | Total<br>antity                                   | 14. Unit<br>Wt./Vol.       | I. Misc       | . Comments   |            |  |  |
| a. COAL ASH& COAL CONTAI   |   | C  | 76-I   | OT L                           | 8   |                            |               |              |            |  |  |
|  | le# 375200GAKRA   |  |  |                                |   |                            |               |              | Shipping ( |  |  |
| b.   | WM Profile #  |  |  |                                |   |                            |               | supposition. | Allasma    |  |  |
| c.   |   |  |  |                                |   |                            |               |              |            |  |  |
|  | WM Profile #  |  | man del la contrata del la con |                                |   |                            |               |              |            |  |  |
| d.   | WM Profile #  |  |  |                                |   |                            |               |              |            |  |  |
| J. Additional Descriptions for Ma  |   |  | K. Disposal Lo   | ocation                        |   |                            |               |              |            |  |  |
|  |   |  | Cell<br>Grid   | 1/3                            | 201   | 79                         | Level         | 5116         | 32         |  |  |
| 15. Special Handling Instructions a  | and Additional Information                                  | 1  |  |                                |   |                            | 65            | 9            |            |  |  |
| Purchase Order # GPC10760  | 1202  | EMERGENCY CO   | NTACT / PHONE  | NO.:                           |   |                            |               | _ 1 _ 1 _    |            |  |  |
|  | 293   | EINENGENTS 55  |  | 1927                           |   |                            |               |              |            |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desaccurately described, classified and | scribed materials are not h<br>d packaged and are in pro    | per condition for transpo  | rtation accordin   | 261 or any a<br>ng to applical | pplicable<br>ble regul                            | e state law, h<br>lations. |               | -            |            |  |  |
| Printed Name B + 11pource 17. Transporter 1 Acknowledgement  |   | Signature "On beha   | If of"   |                                |   |                            | Month 5       | 8            | Year<br>18 |  |  |
| Printed Name   | 864   | Signature  | God  |                                |   |                            | Month 5       | Day          | Year       |  |  |
| / 18. Transporter 2 Acknowledgem Printed Name  | ent of Receipt of Material                                  | Signature  | 1  |                                |   |                            | Month         | Day          | Year       |  |  |
| 19. Certificate of Final Treatment   | /Disposal   |  |  |                                |   |                            |               |              |            |  |  |
| I certify, on behalf of the above lis  | sted treatment facility, tha<br>nits and licenses on the da | tes listed above.  |  |                                | waste w   | as managed                 | in compliand  | e with all   |            |  |  |
| 20. Facility Owner or Operator: 6  | Certification of receipt of r                               | non-hazardous materials o  | covered by this i  | manifest.                      |   |                            |               |              |            |  |  |
| Printed Name   | 2)  | Signature  |  |                                |   |                            | Month 05      | 08           | Year 8     |  |  |
| White-TREATMENT, STORAGE, D  | ISPOSAL FACILITY COPY                                       | Blue- GENERATOR  | #2 COPY  |                                | Ye  | llow- GENER                | ATOR #1 CO    | γ            |            |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1251830

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677781

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/08/2018 12:20:13

Out 05/08/2018 12:20:13

Scale Inbound 1

Operator RENEE

Vehicle# J01

0001037

Container

Billing #

Gen EPA ID NR

Driver

Check#

RENEE

Gross 56160 lb Tare 23340 1b Net 32820 1b 16.41 Tons

Comments

Product LD% Qty HOL Rate Tax

COAL ASH & COAL CO 100

16.41 Tons

PORTW

Origin

Total Tax fotal floket

Amount



|  | NON-HAZARDOUS MANIFEST   | 1. Generator's l                        |  | Ma   | nifest Doc I                   | No.   | 2. Page 1                | of   |                | 1.                                      |         |  |
|--|--|---|--|--|--------------------------------|---|--------------------------|--|----------------|---|---------|--|
|  |  | 1                                       | V / A  |  |                                | -16   |                          | 1.12   | 11             | 20                                      |         |  |
| 4  | 3. Generator's Mailing Address:<br>GEORGIA POWER   |   | Generator's Site Ad<br>GEORGIA POWE  |  |                                | ailing):  | The second respectively. | st Number  | 66777          | 781                                     |         |  |
|  | 241 RALPH MCGILL BLVD NE, E  | BIN#10221                               | 155 CROSSGATE  |  |                                |   | VV                       | ALC: NO STATE OF THE PARTY OF T | Canavata da U  |   |         |  |
|  | ATLANTA, GA 30308-3374   |   | PORT WENTWO  | RTH, GA  | 31407                          |   | 100                      | B. State   | Generator's II | 9                                       |         |  |
|  | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -  | 06-1365                                 |  |  |                                |   | Table 1                  |  |                |   |         |  |
|  | 5. Transporter 1 Company Name  |   | 6.   | US EPA ID  | Number                         |   | du                       |  | ilm=:mill      |   |         |  |
|  | (1005 c) (30   | vilino                                  | 7  |  |                                |   | 2 CONTRACTOR OF THE      | ransporter's I   |                |   |         |  |
|  | 7. Transporter 2 Company Name  | SOTH                                    | 8.   | US EPA ID  | Number                         |   | D. Transp                | orter's Phone  |                |   |         |  |
| v I  |  |   |  |  |                                |   | E. State Ti              | ransporter's I   | D              |   |         |  |
|  | O Designate designation of the control of the contr |   |  |  |                                |   | F. Transpo               | F. Transporter's Phone   |                |   |         |  |
|  | 9. Designated Facility Name and Site SUPERIOR LANDFILL   | Address                                 | 10.  | US EPA II  | D Number                       |   | 0.00                     |  | Bould Schalls  |   |         |  |
|  | 3001 LITTLE NECK ROAD  |   |  |  |                                |   |                          | G. State Facility ID  H. State Facility Phone 912-927-611  |                |   |         |  |
|  | Savannah, GA 31419   |   |  |  |                                |   | H. State F               |  |                |   |         |  |
|  | Savaman, Grassas   |   |  |  |                                |   |                          |  |                |   |         |  |
| G  | 11. Description of Waste Materials   |   | The state of the s |  | 7/4                            | ntainers  | 13. Total                | 14. Unit   | I. Miss        | c. Comments                             |         |  |
| Ε  | a. COAL ASH& COAL CONTAM   | NATED WAST                              | E  |  | No. Type                       |   | Quantity                 | Wt./Vol.   |                |   | -       |  |
| N  |  | 4.7                                     |  |  |                                | NT  | IX                       | 110  |                |   |         |  |
| E<br>R   | WM Profile   | # 375200GAI                             | (RA  |  |                                | 421   |                          |  |                |   |         |  |
| Α  | b.   |   |  |  |                                | Maria de la companya della companya |                          |  |                |   |         |  |
| T  |  |   |  |  |                                | L.  |                          | 11/20  |                |   |         |  |
| R-   |  | M Profile #                             |  |  | njerostres (                   |   |                          |  |                |   |         |  |
| H  | C.   |   |  |  | 4                              | 100   |                          |  |                |   | 7       |  |
|  | W  | M Profile #                             |  |  |                                |   | responses and            |  |                |   |         |  |
| V  | d.   | , |  |  | Av. (400 140 150 150 140 140 1 |   |                          |  |                |   |         |  |
|  |  |   |  |  |                                |   |                          | 1 6  |                |   |         |  |
|  | w  | M Profile #                             |  |  |                                |   |                          |  |                |   |         |  |
|  | J. Additional Descriptions for Mater   | als Listed Above                        |  | 2  | K. Dispos                      | al Location   | i                        |  |                |   |         |  |
|  |  |   |  |  | Cell                           |   | 100                      | no   | Level          |   | -       |  |
|  |  |   |  |  | Grid                           |   | N960                     | 129  | WE             | 1163                                    | 7       |  |
| 62   | 15. Special Handling Instructions and  | Additional Inform                       | ation  |  |                                |   |                          | 100  |                | *************************************** | nero es |  |
|  |  |   |  |  |                                |   |                          |  | 65             | C                                       |         |  |
|  | D  | 2                                       |  |  |                                | ONE 110   |                          |  | 6              | 77                                      | 4       |  |
|  | Purchase Order # GPC1076029  | 3                                       | EMERG  | ENCY CON   | ITACT / PH                     | ONE NO.:  |                          |  |                |   |         |  |
|  | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-describ  | and materials are                       | not hazardous wasto  | s as dofine  | d by CEP D                     | art 261 or  | any applicable           | o stato lave b   | ava baan fulb  | and                                     |         |  |
|  | accurately described, classified and pa  |   |  |  |                                |   |                          |  | ave been runy  | allu                                    |         |  |
|  | Printed Name   |   | Signature  | "On behalf   | of"                            |   |                          |  | Month          | Day Year                                | gal.    |  |
|  | 0 tilipovich   |   | D  | - Control of the Cont |                                |   |                          | -  |                | 8 110                                   | -       |  |
| R<br>A   | 17. Transporter 1 Acknowledgement Printed Name   | or veceibt or iviat                     | Signature  |  |                                | 10  | 0                        | 1  | Month          | Day Year                                |         |  |
| N<br>S   | X C Dema ( E   | tosa l                                  | ) Signidance   | ele  | - /                            | en.   | 1.11                     |  | 5              | 7 17                                    |         |  |
| PO   | 18. Transporter 2 Acknowledgement  |   |  |  | 211                            |   |                          | 0 1/ 0   |                |   |         |  |
| R<br>T   | R Printed Name Signature   |   |  |  |                                |   |                          |  | Month          | Day Year                                |         |  |
|  |  |   |  |  |                                |   |                          |  |                |   |         |  |
| 19. Certificate of Final Treatment/Disposal  |  |   |  |  | 4 11 1                         |   |                          |  |                |   | T       |  |
| Certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was mana   Company   Comp |  |   |  |  |                                | as managed  | n compliance             | with all   |                |   |         |  |
| applicable laws, regulatoris, permits and meetises on the dates instead above.   |  |   |  |  |                                |   |                          |  |                |   |         |  |
| 20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  |  |   |  |  | t,                             | -   | Month                    | Day Vess   |                |   |         |  |
| T Printed Name Signature   |  |   |  |  |                                |   |                          |  | A C            | Day Year                                | X       |  |
| White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue- GENERA   |  |   |  |  | 2 COPY                         | - 3   | Ye                       | llow- GENERA   | TOR#1 COPY     | COLL                                    |         |  |

Pink- FACILITY USE ONLY

Original Ticket# 1251828

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Ticket Date 05/08/2018

Vehicle# J09 Volume

Payment Type Credit Account Container Manual Ticket# Driver Hauling Ticket# Check#

Route Billing # 0001037 State Waste Code Gen EPA ID NR

Manifest 6677782 Destination

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/08/2018 12:16:54

Out 05/08/2018 12:16:54

Scale Inbound 1

Operator RENEE

Gross 60440 1b 23540 lb Tare 36900 16 Net 18.45 Tons

Comments

Product MOU Rate Tax Amount Origin Qty LD% 1 COAL ASH & COAL CO 100 18.45 Tons

PORTW

Total Tax fotal floket



| WASTE MA   | ANAGEMENT   |   |  |            |                |             |                       |                                  |                   |            |            |
|--|---|---|--|------------|----------------|-------------|-----------------------|----------------------------------|-------------------|------------|------------|
| NON-HA   | AZARDOUS MANIFEST   | 1. Generator's US EPA                                   |  | Man        | ifest Doc N    | 0.          | 2. Page 1 c           | ot                               | 11:25             |            |            |
| GEORGIA  | or's Mailing Address:<br>A POWER                          | GEC   | erator's Site Add  | R PLANT    |                | iling):     | A. Manifes            | st Number                        | 66777             | 82         |            |
| ATLANTA  | PH MCGILL BLVD NE,<br>A, GA 30308-3374                    | POR   | CROSSGATE<br>RT WENTWO   |            | 31407          |             |                       | B. State G                       | ienerator's IC    |            |            |
| The second secon | or's Phone 404-5  | 506-1365  | 6.   | US EPA ID  | Number         |             | C State Tr            | ansporter's IE                   |                   |            |            |
| (0   | 15/q16  | rading  | 8.   | US EPA ID  | Number         |             |                       | orter's Phone                    |                   |            |            |
| 7. Transpo   | rter 2 Company Name                                       |   | 0.   | D3 EFA ID  | itumber        |             |                       | ransporter's IE<br>orter's Phone | )                 |            |            |
| -  | ted Facility Name and Sit                                 | e Address   | 10.  | US EPA II  | Number         |             | G. State F            |                                  |                   |            |            |
|  | TLE NECK ROAD   |   |  |            |                |             | H. State F.           | 7-6113                           |                   |            |            |
| Savann   | ah, GA 31419  |   |  |            |                |             |                       |                                  |                   |            |            |
| G .  | ption of Waste Materials                                  |   | - Extraction of the control of the c |            | 12. Cor<br>No. | Type        | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | I. Misc. Comments |            |            |
| N  | ASH& COAL CONTAI  | MINATED WASTE   |  | 5          | 09             | DI          | 18                    |                                  |                   |            | massessass |
| E R  | WM Profil   | e# 375200GAKRA  |  |            |                |             |                       |                                  |                   |            |            |
| A <b>b</b> .   |   |   |  |            | 100            |             |                       |                                  |                   |            |            |
| O<br>R   |   | WM Profile #  |  | W          |                |             |                       |                                  |                   |            |            |
| " c.   |   |   |  |            |                |             |                       |                                  |                   |            |            |
|  |   | WM Profile #  |  |            |                |             |                       |                                  |                   |            |            |
| d.   |   |   |  |            |                |             |                       | S-4-                             | A may             |            |            |
|  |   | WM Profile #  |  |            |                |             |                       |                                  |                   |            |            |
| J. Additi  | onal Descriptions for Ma                                  | terials Listed Above                                    |  |            | K. Dispos      | sal Locatio | n                     | 1                                |                   |            |            |
|  |   |   |  |            | Cell<br>Grid   |             | N370                  | 129                              | Level             | 116        | 32         |
| 15. Speci  | al Handling Instructions a                                | nd Additional Informatio                                | n  |            |                |             |                       |                                  | 65                | ST         | -          |
| Purchase   | Order # GPC10760  | 293   | EMER   | GENCY CO   | NTACT / PH     | IONE NO.:   |                       |                                  |                   |            |            |
| 16. GENI   | FRATOR'S CERTIFICATE:                                     |   |  |            | ad by CED      | Dart 201 -  | r any applicab        | ile state law l                  | nave heen ful     | ly and     |            |
| I hereby accuratel   | certify that the above-des<br>y described, classified and | cribed materials are not l<br>d packaged and are in pro | per condition t  | or transpo | rtation acco   | ording to   | applicable reg        | ulations.                        | 1                 |            | 1          |
| Printed N  |   |   | Signature  | "On beha   | If of"         |             |                       |                                  | Month             | Day        | Year       |
| т 17. Tran   | sporter 1 Acknowledgeme                                   | ent of Receipt of Material                              | ls /   | 1          |                | 11          |                       | 1                                | 1                 |            | T v        |
| N S  | ed Name   | Nest  | Signature  | au         | W              | N           | les                   | N_                               | Month 5           | Day        | Year       |
|  | sporter 2 Acknowledgem                                    | ent of Receipt of Materia                               | ls Signature   | e          | 0              |             |                       |                                  | Month             | Day        | Year       |
| T Printe   | ed Name   |   |  | 1          |                |             |                       |                                  |                   |            |            |
| 19. Cert   | ificate of Final Treatment,<br>on behalf of the above lis | /Disposal<br>ted treatment facility, th                 | at to the best o   | f my know  | ledge, the a   | above-des   | cribed waste          | was managed                      | I in complian     | ce with al | 1          |
| c applicab   | le laws, regulations, perm                                | its and licenses on the da                              | ates listed above  | 0.         |                |             |                       |                                  |                   |            |            |
| T Print  | lity Owner or Operator: C                                 | ertification of receipt of i                            | non-hazardous<br>Signatur  |            | overed by      | una main    | CSE,                  |                                  | Month             | Day        | Year       |
| Y  |   | 10  | 1  | V          | . Wa 2021      |             |                       | Yellow- GENEI                    | RATOR #1 CO       | PY         | 110        |
| White-   | TREATMENT, STORAGE, D                                     | ISPOSAL FACILITY COPY                                   | Blue- G  | ENERATOR   | #2 COPY        |             |                       | reliow- GENE                     | MAION #1 CO       |            |            |

Pink- FACILITY USE ONLY



Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6677783

Destination

PO -

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/08/2018 12:42:54 Out 05/08/2018 12:42:54

Scale Inbound 1 Operator lbejaran lbejaran

Gross Tare Net

55040 lb 22980 lb 32060 lb

16.03

Tons

Volume

Comments

Product

LDX Dty LOM Rate Tax

Vehicle# JØ6

Billing # 0001037

Gen EPA ID NR

Container

Driver Check#

Amount

Origin

1 COAL ASH & COAL CD 100 16.03 Tons

PORTW

J. CROSDY

Total Tax Intal Picket



| NON-HAZARDOUS MANIFEST   | 1. Generator's US EP                                  |   | nifest Doc   | No.              | 2. Page 1             | of  | リ'をか                      |            |            |
|--|---|---|--------------|------------------|-----------------------|---|---------------------------|------------|------------|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5  | Ger<br>GE<br>BIN#10221 15                             | nerator's Site Address (If di<br>ORGIA POWER PLAN<br>5 CROSSGATE RD.<br>PRT WENTWORTH, GA | T KRAFT      | ailing):         |                       | st Number  MNA  B. State G                          | 6677783<br>Generator's ID |            |            |
| 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | ading   | 6. US EPA ID  |              |                  | D. Transp             | ransporter's ID<br>orter's Phone<br>ransporter's ID |                           |            |            |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | e Address   | 10. US EPA I  | D Number     |                  | G. State F            | acility ID  | 912-92                    | 27-611     | 3          |
| G 11. Description of Waste Materials   | 1-2-14-14-14-14-14-14-14-14-14-14-14-14-14-           |   | 12. Cc       | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.                                | I. Mis                    | sc. Commer | nts        |
| a. COAL ASH& COAL CONTAN   | /INATED WASTE<br>≥# 375200GAKRA                       | -   | 06           | DT               | 18                    |   |                           |            |            |
| A b. T O R c.  | NM Profile #  |   |              |                  |                       |   |                           |            |            |
| d.   | WM Profile #  |   |              | * *              | - A                   |   |                           |            |            |
| J. Additional Descriptions for Mate  | erials Listed Above                                   |   | Cell<br>Grid | sal Location     | 1320                  | 124   | Level                     | 6          | ~          |
| 15. Special Handling Instructions an   | d Additional Informatio                               | on  |              |                  | 401                   | 6)  |                           |            |            |
| Purchase Order # GPC107602   | 93  | EMERGENCY CO  | NTACT / PH   | ONE NO.:         |                       |   |                           |            | THE P      |
| 16. GENERATOR'S CERTIFICATE:     I hereby certify that the above-desc accurately described, classified and Printed Name  |   |   | rtation acco |                  |                       |   | ve been ful               | ly and     | Year       |
| 13 + 11 pourch   | nt of Receipt of Materia                              | f   |              |                  |                       | X   | 5                         | 0          | 110        |
| Printed Name CR 05   | λ1  | Signature   | AL           | 7/               |                       |   | Month 5                   | Day        | Year       |
| 718. Transporter 2 Acknowledgemer Printed Name   | t of Receipt of Materia                               | Signature   | 1:           |                  |                       |   | Month                     | Day        | Year       |
| 19. Certificate of Final Treatment/L I certify, on behalf of the above liste applicable laws, regulations, permit 20. Facility Owner or Operators Certify Printed Name | d treatment facility, the<br>s and licenses on the da | ites listed above.  |              |                  |                       | vas managed ir                                      | n complianc               | e with al  | l<br>(Year |
| White TREATMENT STORAGE DIS  | Blue- GENERATOR                                       | U2 CODY   |              | V                | ellow- GENERA         | TOP #1 COL  | 0/                        | U          |            |

Pink- FACILITY USE ONLY

Volume



Superior Landfill 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING Vehicle# C25

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest

6677784

Destination PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/08/2018 13:21:52 In

Out 05/08/2018 13:21:52

Scale

Inbound 1 lbejaran

Operator

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

lbejaran

Gross Tare

60800 15 27040 16 33760 lb

16.88

Net Tons

Comments

### WASTE MANAGEMENT

| Pro               | duct |     |   |      |    | LD% | Qty   | MOU  | Rate | Tax | Amount   | Origin  |
|-------------------|------|-----|---|------|----|-----|-------|------|------|-----|--|---|
| \$100 Spain \$100 | -    |     |   |      |    |     |       |      |      |     | state and new man dry, that soon area have seen have aller | s come comes comes comes comes filters retain above, because comes comes branch |
| 1                 | COAL | ASH | 8 | COAL | CO | 100 | 16.88 | Tons |      |     |  | PORTW   |

Total Tax Tobal floket

Mrch fry



| WASTE MANAGEMENT  | 1. Generator's US EPA  | VID No. M:                                      | anifest Doc N | 0  | 2. Page 1                 | of I   |                                      |                  |  |  |
|---|--|---|---------------|--|---------------------------|--|--------------------------------------|------------------|--|--|
| NON-HAZARDOUS MANIFEST  | N /  |   | 0.            | Z, rage 1  | 51                        | 12:47  |                                      |                  |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                  |  | erator's Site Address (If d<br>DRGIA POWER PLAN |               | iling):  |                           | st Number  | 66777                                | 784              |  |  |
| 241 RALPH MCGILL BLVD NE  | , BIN#10221 155  | CROSSGATE RD.                                   |               |  |                           | B State G  | te Generator's ID                    |                  |  |  |
| ATLANTA, GA 30308-3374  | POF  | RT WENTWORTH, G                                 | A 31407       |  | 100                       | b. State G   | Circiator 3 il                       |                  |  |  |
|   | 506-1365   |   |               |  |                           |  |                                      |                  |  |  |
| 5. Transporter 1 Company Name                                     | 1  | 6. US EPA II                                    | ) Number      |  |                           |  | inium enganadi                       | minumban, suomin |  |  |
| 1/2001/10   | 20/100   | 100000000000000000000000000000000000000         |               |  | C. State Ti               | ansporter's ID   |                                      |                  |  |  |
| LUNG 6  | 191114   | MALE  |               |  | D. Transporter's Phone    |  |                                      |                  |  |  |
| 7. Transporter 2 Company Name                                     |  | 8. US EPA II                                    | O Number      |  | E. State Transporter's ID |  |                                      |                  |  |  |
|   |  |   |               |  |                           | orter's Phone  |                                      |                  |  |  |
| 9. Designated Facility Name and Si                                | te Address   | 10. US EPA                                      | ID Number     |  | T, Trumspe                | reer 57 Hone   |                                      |                  |  |  |
| SUPERIOR LANDFILL   |  |   |               |  | G. State Facility ID      |  |                                      |                  |  |  |
| 3001 LITTLE NECK ROAD   |  |   |               |  | H State F                 | acility Phone  | 912-92                               | 27-6113          |  |  |
| Savannah, GA 31419  |  |   |               |  | Jil Glade                 |  |                                      |                  |  |  |
|   |  |   |               |  |                           |  |                                      |                  |  |  |
| 11. Description of Waste Materials                                | 9  |   | 12. Cor       |  | 13. Total                 | 14. Unit   | I. Mis                               | c. Comments      |  |  |
| E a. COAL ASH& COAL CONTAI  |  |   | No.           | Туре   | Quantity                  | Wt./Vol.   |                                      |                  |  |  |
| a. COAL ASH& COAL CONTAI  | MINATED WASTE  |   | 170           | NT   | 17                        | # 1 DE   | VI 1                                 |                  |  |  |
| E NAME OF STREET  | le# 375200GAKRA  |   | 400           | P 1  | 1                         |  |                                      |                  |  |  |
| N_  | 1e# 3/3200GANNA  |   |               |  |                           |  |                                      |                  |  |  |
| A <b>b.</b>   |  |   |               |  |                           |  | 1.5                                  |                  |  |  |
| o   | Cara and Cara  |   |               | 100 E 10 |                           |  |                                      |                  |  |  |
| R c.  | WM Profile #   |   |               |  |                           |  |                                      |                  |  |  |
|   | a de la companya de l |   |               |  |                           |  |                                      | - F              |  |  |
|   | WM Profile #   |   |               |  | 0.000                     |  |                                      |                  |  |  |
| d.  |  | 1 4   |               | NATIONAL COMMUNICATION OF  |                           | AND THE PROPERTY OF THE PARTY O |                                      |                  |  |  |
|   |  |   |               |  |                           | ř.   |                                      |                  |  |  |
|   | WM Profile #   |   |               |  |                           |  |                                      |                  |  |  |
| J. Additional Descriptions for Mat                                | The state of the s |   | K. Dispos     | al Location  |                           | Harris and the contract of the | Institution of the second section of | - F              |  |  |
|   |  |   |               | 6  | 1)                        | 11/0   | (                                    | 0                |  |  |
|   |  |   | Cell          | - 1  |                           | 101  | Level                                |                  |  |  |
|   | LATE: ILC C  |   | Grid          | -  | .n/                       | 5  |                                      |                  |  |  |
| 15. Special Handling Instructions a                               | nd Additional Information  |   |               |  |                           |  |                                      |                  |  |  |
|   |  |   |               |  |                           |  |                                      |                  |  |  |
| Burnham Order # CDC10760  | 202  | EMERGENCY CO                                    | NITACT / DH   | ONE NO :   |                           |  |                                      | 1.8              |  |  |
| Purchase Order # GPC10760   | 293  | EWIENGENCT CC                                   | MIACITI       | ONE NO   |                           |  |                                      |                  |  |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-des |  | annedaus wastes as defi                         | and by CED D  | art 261 or   | any annlicah              | e state law ha   | ve heen full                         | v and            |  |  |
| accurately described, classified and                              | backaged and are in pro  | per condition for transpo                       | ortation acco | rding to ap  | plicable regu             | lations.   | ave been run                         | , and            |  |  |
| Printed Name  |  | Signature "On beha                              | alf of"       |  |                           |  | Month                                | Day Year         |  |  |
| BFILIPOVICH   |  | BA  |               | -  |                           |  | 5                                    | 8 10             |  |  |
| т 17. Transporter 1 Acknowledgeme                                 | ent of Receipt of Materials  |   |               | J IL 1- V  |                           |  |                                      |                  |  |  |
| Printed Name  | V  | Signature                                       | 00            |  |                           |  | Month                                | Day Year         |  |  |
| N X Michael Fra   |  | 1 Winch   | the           | ~  | 184                       |  |                                      | 6 1/8            |  |  |
| 18. Transporter 2 Acknowledgeme                                   | ent of Receipt of Materials  |   |               |  |                           |  | 1                                    | - I              |  |  |
| Printed Name  |  | Signature                                       |               |  |                           |  | Month                                | Day Year         |  |  |
| R R   |  |   |               |  |                           |  |                                      |                  |  |  |
| 19. Certificate of Final Treatment/                               | Disposal   |   | 7,70          | 3 /  |                           |  |                                      |                  |  |  |
|   | t to the best of my know   | ledge, the al                                   | oove-descri   | ibed waste v   | vas managed i             | n complianc  | e with all                           |                  |  |  |
| applicable laws, regulations, perm                                | I certify, on behalf of the above listed treatment facility, that to the best of my knapplicable laws, regulations, permits and licenses on the dates listed above.  |   |               |  |                           |  |                                      |                  |  |  |
| 20. Facility Owner or Operator: Co                                | ertification of receipt of n   | on-hazardous materials                          | covered by t  | his manifes  | it.                       |  |                                      | 17.              |  |  |
| Printed Name  | 1/11   | Signature                                       | 1             | )  |                           |  | Month                                | Day Year         |  |  |
|   | Y  |   |               |  |                           |  | J                                    | 01               |  |  |
| White- TREATMENT, STORAGE, DI                                     | SPOSAL FACILITY COPY   | Blue- GENERATO                                  | R #2 COPY     |  | Y                         | ellow- GENERA  | TOR #1 COP                           | Υ                |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1251883

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier CDASTALGRADING COASTALGRADING Vehicle# C26

Ticket Date 05/08/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

State Waste Code

Manifest 6677785

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/08/2018 13:50:55

Out 05/08/2018 13:50:55

Scale Inbound 1

Operator lbejaran. Ibejaran

Container Driver .

Dilling # QUARTORS/ Gen EPA ID NR

Check#

Gross Tare Net Tons

60160 lb 25980 15 34180 lb 17.09

Comments

WASTE MANAGEMENT

Product

LD% Oty

UDM

Rate

Tax

Amount

Drigin

1 COAL ASH & COAL CO 100 17.09 Tons

PORTM

Total Tax fotal flokat



## WATA NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |                                      |   |  | oz. at         |  | NAC SOCIETY           |                                  |   |            |             |  |
|---|--------------------------------------|---|--|----------------|--|-----------------------|----------------------------------|---|------------|-------------|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US E                  |   | Manife   | est Doc N      | lo.  | 2. Page 1             | of                               | 1:0                                     | M          |             |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                            | 1 202                                | nerator's Site Addres<br>EORGIA POWER P | A STATE OF THE STA |                | iling):  |                       | st Number  MNA                   | 6677                                    | 785        |             |  |
| 241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374                          | PC                                   | 55 CROSSGATE RD<br>DRT WENTWORTH        |  | 1407           |  |                       | B. State G                       | ienerator's l                           | D.         |             |  |
| 4. Generator's Phone 404- 5. Transporter 1 Company Name                     | 506-1365                             | 6. US E                                 | PA ID No   | ımber          |  | C State I             | ransporter's IE                  |   |            |             |  |
| 7. Transporter 2 Company Name   | rading                               | 8. US E                                 | PA ID Ni   | umber          |  | 1                     | orter's Phone                    |   |            | TREE LIN    |  |
|   |                                      |   |  |                |  |                       | ransporter's IC<br>orter's Phone | )<br>                                   |            |             |  |
| 9. Designated Facility Name and Si SUPERIOR LANDFILL                        | te Address                           | 10. US                                  | EPA ID N   | Number         |  | G. State Facility ID  |                                  |   |            |             |  |
| 3001 LITTLE NECK ROAD   |                                      |   |  |                |  | H. State I            | acility Phone                    | 912-93                                  | 27-6113    | 3           |  |
| Savannah, GA 31419  |                                      |   |  |                |  |                       |                                  |   |            |             |  |
| 11. Description of Waste Materials  |                                      |   |  | 12. Coi<br>No. | ntainers<br>Type   | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | I. Mi                                   | sc. Commen | its         |  |
| a. COAL ASH& COAL CONTA   | MINATED WASTE                        |   | 0.5  | علد            | DI   | 18                    |                                  | 41114444115.000591.00030                |            | BAREBAKO NE |  |
| R WM Profi  | le# 375200GAKR                       | A                                       |  |                |  |                       |                                  |   | July State |             |  |
| λ <b>b.</b>   |                                      |   |  |                |  |                       | 1                                | 73.                                     |            |             |  |
|   | WM Profile #                         |   |  |                |  |                       |                                  |   |            | in T        |  |
| C.  |                                      |   | 28   |                |  |                       |                                  |   |            |             |  |
|   | WM Profile #                         |   |  | 100            |  |                       |                                  |   |            |             |  |
| d.  | WWW.Tome II                          | 11-8                                    |  |                | Thursday of the state of the st |                       |                                  |   |            |             |  |
|   | Maa Deelle #                         |   | A.   |                |  |                       |                                  |   |            |             |  |
| J. Additional Descriptions for Ma   | WM Profile #<br>terials Listed Above |   |  | K. Dispos      | sal Location   | on 1                  |                                  | 110000000000000000000000000000000000000 |            |             |  |
|   |                                      |   |  | Cell           |  | VIV                   | 217                              | Level                                   | 19         |             |  |
|   |                                      |   |  | Grid           | i  | l/                    | 31                               |   |            |             |  |
| 15. Special Handling Instructions a   | nd Additional Informat               | ion                                     |  |                | 6  | N                     | 6,0                              |   |            |             |  |
| Purchase Order # GPC10760   | 293                                  | EMERGEN                                 | CY CONT  | ACT / PH       | ONE NO.:   |                       |                                  |   |            |             |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des            | cribed materials are no              | t hazardous wastes a                    | defined  | by CFR I       | Part 261 o   | r any applical        | ole state law, h                 | iave been fu                            | lly and    |             |  |
| accurately described, classified and  | d packaged and are in p              | roper condition for tr                  | ansporta   | tion acco      | ording to  | applicable reg        | ulations.                        | 15 20 20                                |            | T v         |  |
| Printed Name  |                                      | Signature "Or                           | behalf o   | of"            |  |                       |                                  | Month                                   | Day        | Year /      |  |
| T 17. Transporter 1 Acknowledgem  | ent of Receipt of Mater              | ials                                    |  | ~ /            |  |                       |                                  |   |            | 7           |  |
| Printed-Name  | 64                                   | Signature                               | 1  | 301            |  |                       |                                  | Month                                   | Day        | Year        |  |
| 18. Transporter 2 Acknowledgem  | ent of Receipt of Mater              | ials //                                 |  | 1              |  |                       |                                  |   | 3          | -           |  |
| Printed Name  |                                      | Signature                               |  |                |  |                       |                                  | Month                                   | Day        | Year        |  |
| 19. Certificate of Final Treatment  | 'Disposal                            |   |  |                | 0  | San A Comment         |                                  |   |            | 11          |  |
| I certify, on behalf of the above lis<br>applicable laws, regulations, perm | its and licenses on the              | dates listed above.                     |  |                |  |                       | was managed                      | in complian                             | ce with a  | Ü.          |  |
| 20. Facility Owner or Operator: C   | ertification of receipt o            |   | rials cov  | ered by        | this manif   | est.                  |                                  | Month                                   | Day        | (Year       |  |
| Printed Name  | Y                                    | Signature                               |  |                |  |                       |                                  | Monut                                   | Y July     | / deal      |  |
|   | 1                                    | 3                                       | 1  | ^              |  |                       |                                  | 1                                       | 0          | /           |  |

Pink- FACILITY USE ONLY



Original Ticket# 1251929

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 639423

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/08/2018 15:34:49

Out 05/08/2018 15:34:49

Comments

Scale Inbound 1

Operator

LBEJARAN

LBEJARAN

Gross Tare

Vehicle# J06 Volume

57480 1b 22980 1b

Net Tons 34500 15 17.25

WASTE MANAGEMENT

Container

Driver

Check#

Billing # 0001037

Gen EPA ID NR

Product LD% Qty UOM Rate Tax Amount Origin 1 COAL ASH & COAL CO 100 17.25 Tons PORTW

J. CROSY TOK 6

Total Tax Intal fluket



# WWW. NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT   |                              |  |               | 1.27             | 1 2 Dogs 1 s          | £                      |                            | 10 1 1 1 1 1 m |                   |
|--|------------------------------|--|---------------|------------------|-----------------------|------------------------|----------------------------|----------------|-------------------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA  N / A |  | inifest Doc N | 10.              | 2. Page 1 o           |                        | 1:3                        | 38             |                   |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   |                              | rator's Site Address (If d<br>RGIA POWER PLAN  |               | iling):          | A. Manifes            | t Number<br><b>VNA</b> | 67394                      | 23             |                   |
| 241 RALPH MCGILL BLVD NE,  |                              | CROSSGATE RD.                                  |               |                  |                       | B. State G             | enerator's II              | )              |                   |
| ATLANTA, GA 30308-3374   | POR                          | T WENTWORTH, G                                 | A 31407       | -                |                       |                        |                            |                |                   |
| 4. Generator's Phone 404-5   | 06-1365                      |  |               | 141              |                       |                        |                            | NOTE IN SE     | 2210              |
| 5. Transporter 1 Company Name  | 4-                           | 6. US EPA II                                   | ) Number      |                  | C State Tr            | ansporter's ID         |                            |                |                   |
| (2001)   | ridiaci                      |  |               |                  |                       | orter's Phone          |                            |                | Dist. 1704-1809   |
| 7. Transporter 2 Company Name  | MITT N                       | 8. US EPA II                                   | O Number      |                  |                       |                        |                            |                |                   |
|  | O'                           |  |               |                  |                       | ansporter's ID         |                            |                |                   |
|  | X.(0                         | 10. US EPA                                     | ID Number     |                  | F. Transpo            | rter's Phone           |                            |                |                   |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL   | Address                      | IO. OSEFA                                      | ID INGINIDE   |                  | G. State Fa           | acility ID             | THE PERSON NAMED IN COLUMN |                | ESSERVATE COLUMN  |
| 3001 LITTLE NECK ROAD  |                              |  |               |                  |                       | acility Phone          | 912-92                     | 27-6113        |                   |
| Savannah, GA 31419   |                              |  |               |                  |                       |                        |                            |                |                   |
| Savarinan, GA 31413  |                              |  |               |                  |                       |                        |                            |                |                   |
| 11. Description of Waste Materials   | TO THE STATE OF              |  | 12. Co<br>No. | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.   | I. Mis                     | c. Comment     | s                 |
| a. COAL ASH& COAL CONTAN   | IINATED WASTE                |  | -             |                  | 1                     | *                      |                            |                |                   |
| a. COALASTIC COAL COTTAIN  |                              |  | 76            | DI               | 18                    |                        | 3.1                        |                | MITTER LA COMPANI |
| WM Profile   | # 375200GAKRA                | Scott T  |               |                  |                       |                        |                            |                |                   |
| b.   |                              |  |               | 7                |                       |                        |                            |                |                   |
|  | /                            |  |               |                  |                       |                        |                            |                |                   |
|  | WM Profile #                 |  |               |                  |                       |                        |                            |                |                   |
| C.   |                              |  | A COLOR       |                  |                       |                        | - 1                        |                |                   |
|  | 445 4 D - 511 - H            |  |               |                  |                       |                        |                            |                |                   |
| #d.  | WM Profile #                 |  |               |                  |                       |                        | +3-5 3                     |                |                   |
| wu.  |                              |  |               |                  |                       |                        | 1                          |                |                   |
|  | WM Profile #                 |  |               |                  |                       |                        |                            |                |                   |
| J. Additional Descriptions for Mate  |                              | 14   | K. Dispo      | sal Loca         | tion                  | 00                     |                            |                | (                 |
|  |                              |  | Cell          | - 1              | 1500                  | 11-1                   | Level                      | 0              |                   |
|  |                              |  | Grid          |                  | 1                     | 11.30                  | 20101                      | . *            |                   |
| 15. Special Handling Instructions ar   | d Additional Information     | n  |               |                  | Co                    | res                    |                            |                |                   |
|  |                              | EMERGENCY C                                    | ONITACT / DL  | JONE NO          | 2                     |                        |                            |                |                   |
| Purchase Order # GPC107602   | .93                          | EIVIERGENCY C                                  | ONTACT / PT   | IOIAL IN         |                       | 23                     |                            | 100            |                   |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-desc   | 316 - J                      | nazardous wastes as def                        | ined by CER   | Part 261         | l or any applicab     | le state law. h        | nave been fu               | lly and        |                   |
| accurately described, classified and   | packaged and are in pro      | per condition for transp                       | ortation acc  | ording t         | o applicable reg      | ulations.              |                            |                |                   |
| Printed Name   |                              | Signature "On bel                              | nalf of"      |                  |                       |                        | Month                      | Day            | Year              |
| BFILIPOUR  |                              | DA   | -             |                  |                       |                        | 10                         | -              | 10                |
| 17. Transporter 1 Acknowledgeme  | nt of Receipt of Material    | S Cial Ann                                     | 10            | /                |                       |                        | Month                      | Day            | Year              |
| /Printed-Name  | nu                           | Signature                                      | 160           | 1                |                       |                        | K                          | 4              | 1                 |
| 18. Transporter 2 Acknowledgeme  | nt of Receipt of Material    | s X 7/1  |               | 1                |                       |                        |                            | 0              | 1                 |
| Printed Name   | nt of necespt of material    | Signature                                      |               |                  |                       |                        | Month                      | Day            | Yea               |
| Fillited Name  |                              |  |               |                  |                       |                        |                            | 1              |                   |
|  | Disposal                     |  |               | 18/91            |                       |                        |                            |                |                   |
| 19. Certificate of Final Treatment/<br>I certify, on behalf of the above list<br>applicable laws, regulations, permi | ed treatment facility, tha   | at to the best of my kno<br>ites listed above. | wledge, the   | above-d          | escribed waste        | was managed            | in complian                | ce with a      | 11                |
| 20. Facility Owner or Operator: Co   | ertification of receipt of r | non-hazardous material                         | s covered by  | this ma          | nifest.               |                        |                            |                |                   |
| Printed Name   | UK                           | Signature                                      | ^             |                  |                       |                        | Month                      | Day            | / Year            |
| Fillited Name  | 7/                           | 1  | 1             | /                |                       |                        |                            | U              | 10                |
| White- TREATMENT, STORAGE, DI  | SPOSAL FACILITY COPY         | Blue- GENERATO                                 | OR #2 COPY    |                  |                       | ellow- GENER           | RATOR #1 CC                | PY             |                   |

Pink- FACILITY USE ONLY



Original Ticket# 1251900

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Vehicle# J01

Ticket Date 05/08/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739425

Destination pn

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Profile 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Generator

Time

In 05/08/2018 14:24:47 Out 05/08/2018 14:24:47

Scale

Inbound 1

Operator Ibejaran

Container Driver

Billing # 0001037

Gen EPA ID NR

Check#

1be jaran

Gross Tare Net Tons

56880 lb 23340 1b 33540 16 16.77

Comments

Origin Amount Tax Rate LD% Qty UDM Product PORTW 16.77 Tons 1 COAL ASH & COAL CO 100

Total Tax Total Minket



| -      | WASTE MANAGEMENT   |  |  |               |  |                               |                      |                   |               |  |
|--------|--|--|--|---------------|--|-------------------------------|----------------------|-------------------|---------------|--|
|        | NON-HAZARDOUS MANIFEST  1. Generator's U   | JS EPA ID No.<br>N / A   | Manifest Doc   | No.           | 2. Page 1  | of                            | 7                    | 11)               |               |  |
|        | 3. Generator's Mailing Address:<br>GEORGIA POWER   | Generator's Site Address<br>GEORGIA POWER PL   | the state of the s | nailing):     |  | st Number                     | 6739                 | 425               |               |  |
|        | 241 RALPH MCGILL BLVD NE, BIN#10221  | 155 CROSSGATE RD.  |  |               |  |                               | enerator's           | ID                |               |  |
|        | ATLANTA, GA 30308-3374   | PORT WENTWORTH   | , GA 31407   |               |  | 3,01010                       | 4110101010           |                   |               |  |
|        | 4. Generator's Phone 404-506-1365  |  |  |               |  |                               |                      |                   |               |  |
|        | 5. Transporter 1 Company Name  | 6. US EF   | PA ID Number   | 185           |  | n) August en                  | erice di la companya | 49-11-19-11-19-11 | 0-000         |  |
|        | 1 mole landing   |  |  |               | The state of the s | ransporter's ID               |                      |                   |               |  |
|        | 7. Transporter 2-Company Name  | A 8. US EF   | PA ID Number   |               | D. Transporter's Phone   |                               |                      |                   |               |  |
|        | 7. Hansporter 2 company name   | 0. 051   | A ID I damber  |               | E. State T   | ransporter's ID               |                      | Militar Programme |               |  |
|        |  | 9  |  |               | F. Transporter's Phone   |                               |                      |                   |               |  |
|        | 9. Designated Facility Name and Site Address   | 10. US E   | PA ID Number   |               |  |                               | Saldalle III         |                   | ) - 1 (N) (N) |  |
| 9      | SUPERIOR LANDFILL  | 10 3 3 3 5 5 3   |  |               | G. State F   | acility ID                    | 042 027 6442         |                   |               |  |
|        | 3001 LITTLE NECK ROAD  |  | and the second supplier of the second supplie |               | H. State F   | acility Phone                 | 912-9                | 27-611            | 3             |  |
|        | Savannah, GA 31419   |  |  |               |  |                               |                      |                   |               |  |
|        | 11. Description of Waste Materials   |  | 12. C  | ontainers     | 13. Total  | 14. Unit                      | 1.04                 | isc. Commer       | **            |  |
| G<br>E | Section 1 and reserve and an entire contract of the section of the |  | No.  | Туре          | Quantity   | Wt./Vol.                      | 12.10                | isc. Comme        |               |  |
| N      | a. COAL ASH& COAL CONTAMINATED WAST  | E  | 1  | DX            | 18   |                               |                      |                   |               |  |
| E      | WALD SI # 275200CA   | VD A   | 101  | 111           | 10   |                               |                      |                   |               |  |
| R      | WM Profile # 375200GA  | NNA  |  |               |  |                               |                      |                   |               |  |
| A<br>T |  |  |  |               |  | 12                            |                      |                   |               |  |
| 0      | WM Profile #   |  |  |               |  |                               |                      |                   |               |  |
| R      | C.   |  |  |               |  |                               |                      |                   |               |  |
| 90     |  |  |  | 1.15          |  |                               |                      |                   |               |  |
|        | WM Profile #   |  |  | a bahala Si   |  | However the                   |                      |                   |               |  |
| 10     | d.   |  |  |               | 1 1 X  |                               |                      |                   |               |  |
|        |  |  | -  |               |  |                               |                      |                   |               |  |
| X.     | WM Profile #   |  |  |               |  |                               |                      | 7/4/1/11/0        |               |  |
|        | J. Additional Descriptions for Materials Listed Above  |  | K. Dispo   | osal Location | 10   | Nal                           |                      | 10                | 1             |  |
| 7      |  |  | Cell   |               | V)U  | 10:                           | Level                | ~                 |               |  |
|        |  |  | Grid   |               |  |                               |                      |                   |               |  |
|        | 15. Special Handling Instructions and Additional Inform  | nation   |  |               | 1  | ML 37                         |                      |                   |               |  |
|        |  |  |  |               |  | 1142                          |                      |                   |               |  |
|        |  |  |  |               |  |                               |                      |                   |               |  |
|        | Purchase Order # GPC10760293   | EMERGENCY  | CONTACT / PI   | HONE NO.: -   |  |                               |                      |                   |               |  |
|        | 16. GENERATOR'S CERTIFICATE:   |  | I C II CED   | D 201         |  | la atata laur ba              | u o boon fu          | lluand            |               |  |
|        | I hereby certify that the above-described materials are accurately described, classified and packaged and are  | not hazardous wastes as on not hazardous wastes as on not hazardous wastes as on the notice in the n | defined by CFK   | ording to an  | any applicad<br>plicable regi  | ie state iaw, na<br>ulations. | ive been tu          | ily and           |               |  |
|        | Printed Name   | Signature "On I  |  |               |  |                               | Month                | Day               | Year          |  |
|        | B.+ilipovich   | 54   |  |               |  |                               | 10                   | 8                 | 1/8           |  |
| T<br>R | 17. Transporter 1 Acknowledgement of Receipt of Ma   |  | ,  | 1             | 11   |                               | 1 20 3               |                   |               |  |
| AN     | Printed Name   | Signature  | - (  | tes           | 11   |                               | Month                | Day               | Year          |  |
| S      | (1) To the Add which count of Provint of Mo  | toriole  |  |               |  |                               | 1                    | 5                 | 40            |  |
| O<br>R | 18. Transporter 2 Acknowledgement of Receipt of Ma<br>Printed Name   | Signature  |  |               | The same of  |                               | Month                | Day               | Year          |  |
| T<br>E | Printed Name   | Signature  |  |               |  |                               |                      |                   |               |  |
| R      |  |  |  |               |  |                               |                      |                   |               |  |
| F      | 19. Certificate of Final Treatment/Disposal  |  | to Control   |               | t d  |                               | n name Ma            |                   |               |  |
| A      | I certify, on behalf of the above listed treatment facilit<br>applicable laws, regulations, permits and licenses on t  | y, that to the best of my ki   | nowledge, the  | above-descr   | bed waste v  | vas managed ii                | n complian           | ce with al        | 1             |  |
| i      | 20. Facility Owner or Operator: Certification of receip  |  | ials dovered hy  | this manifes  | est.   |                               | 1                    | (1)               | 10,           |  |
| I<br>T | Printed Name   | Signature  | 1  |               |  |                               | Month                | Day               | Year          |  |
| Υ      | Timed Hame   | /  |  |               |  |                               | )                    | 1                 |               |  |
|        | White-TREATMENT, STORAGE, DISPOSAL FACILITY CO   | DPY Blue- GENERA   | TOR #2 COPY  |               | Y  | ellow- GENERA                 | TOR #1 CO            | PY                | 1             |  |

Pink- FACILITY USE ONLY



Original Ticket# 1251902

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

State Waste Code

Manifest 6739426

Destination

00

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/08/2018 14:31:15 Out 05/08/2018 14:31:15

Scale Inbound 1 Operator lbejaran lbejaran

Gross Tare Net

Tons

Volume

61860 lb 23540 16 38320 1b 19.16

Comments

Vehicle# J09

William # WWWIWS7 Gen EPA ID NR

Container

Driver Check#

Product LD% Gty UOM Rate Tax Amount Origin Product PORTW COAL ASH & COAL CO 100 19.16 Tons

Total Tax Total Ticket



|   | THE PART OF THE PARTY OF THE PA |  | : C L D NI -                                       | 2 Dags 1 s                       | f                               |  |  |  |  |
|---|--|--|--|----------------------------------|---------------------------------|--|--|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA  | A  | ifest Doc No.                                      | 2. Page 1 o                      |                                 | 1:50   |  |  |  |
| Generator's Mailing Address:<br>EORGIA POWER  |  | erator's Site Address (If diff<br>DRGIA POWER PLANT  |  | A. Manifes                       | t Number<br><b>MNA</b>          | 6739426  |  |  |  |
| 41 RALPH MCGILL BLVD NE   |  | CROSSGATE RD.  |  |                                  |                                 | Generator's ID   |  |  |  |
| TLANTA, GA 30308-3374   | The state of the s | RT WENTWORTH, GA   | 31407  |                                  |                                 |  |  |  |  |
|   | -506-1365  |  |  |                                  |                                 |  |  |  |  |
| Transporter 1 Company Name  | A .  | 6. US EPA ID   | Number   |                                  | anna maria II                   |  |  |  |  |
| 1005/5/6  | - md m   |  |  |                                  | ansporter's II<br>orter's Phone | The state of the s |  |  |  |
| . Transporter 2 Company Name  | TICALIA  | 8. US EPA ID   | Number   |                                  |                                 |  |  |  |  |
| . Hansporter 2 company name   |  |  |  |                                  | E. State Transporter's ID       |  |  |  |  |
|   | V  | 40 UCEDA I   | D. Number  | F. Transporter's Phone           |                                 |  |  |  |  |
| . Designated Facility Name and S  | Site Address   | 10. US EPA I   | D Number   | G. State F                       | acility ID                      |  |  |  |  |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  |  |  |  |                                  | acility Phone                   | 912-927-6113   |  |  |  |
| Savannah, GA 31419  |  |  |  |                                  |                                 |  |  |  |  |
| Javailliali, GA 31413   |  |  |  |                                  |                                 |  |  |  |  |
| 11. Description of Waste Material   | ls   |  | 12. Containers No. Type                            | 13. Total<br>Quantity            | 14. Unit<br>Wt./Vol.            | I. Misc. Comments  |  |  |  |
| a. COAL ASH& COAL CONTA   |  |  | 0 1/   | 17                               |                                 |  |  |  |  |
|   | ann agastana an   | 7  | Da 121   | 118                              |                                 |  |  |  |  |
| WM Pro  | file# 375200GAKRA  |  |  |                                  |                                 |  |  |  |  |
| o.  | 15 - 15 17   |  |  |                                  |                                 |  |  |  |  |
| 18  |  |  | Provide Commence Commence                          |                                  |                                 |  |  |  |  |
|   | WM Profile #   |  |  |                                  |                                 |  |  |  |  |
| С.  |  |  |  |                                  |                                 |  |  |  |  |
|   | WM Profile #   |  |  |                                  |                                 |  |  |  |  |
| d.  |  |  |  |                                  | 4                               |  |  |  |  |
|   |  |  |  |                                  |                                 |  |  |  |  |
|   | WM Profile #   |  | K. Disposal Location                               | on a                             |                                 | , 1  |  |  |  |
| J. Additional Descriptions for M  | lateriais Listed Above   |  |  | 1/57                             | 2127                            | 61   |  |  |  |
|   |  |  | Cell<br>Grid                                       | 1000                             | 111                             | Level  |  |  |  |
|   |  | on   | Gild   | in                               | 416                             |  |  |  |  |
|   | and Additional Information   |  | ,  | <i>\ '</i>                       |                                 |  |  |  |  |
| 15. Special Handling Instructions   | and Additional Information   |  |  |                                  |                                 |  |  |  |  |
|   |  |  | ONTACT / PHONE NO                                  |                                  |                                 |  |  |  |  |
| Purchase Order # GPC1076  | 50293  |  | DNTACT / PHONE NO.:                                |                                  |                                 |  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE:  | 50293  | EMERGENCY CO   | ned by CFR Part 261 c                              | or any applica                   | ble state law,                  | have been fully and  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE:  | 50293  | EMERGENCY CO<br>t hazardous wastes as defi<br>roper condition for transp   | ned by CFR Part 261 c<br>ortation according to     | or any applica                   | ble state law,                  |  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name   | 60293<br>lescribed materials are not<br>and packaged and are in pi   | EMERGENCY CO   | ned by CFR Part 261 c<br>ortation according to     | or any applica                   | ble state law,<br>gulations.    | have been fully and  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name   | 60293<br>lescribed materials are not<br>and packaged and are in pi   | t hazardous wastes as defi<br>roper condition for transp<br>Signature "On beh                                    | ned by CFR Part 261 c<br>ortation according to     | or any applica                   | ble state law,<br>gulations.    |  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger   | 60293<br>lescribed materials are not<br>and packaged and are in pi   | t hazardous wastes as defi<br>roper condition for transp<br>Signature "On beh                                    | ned by CFR Part 261 c<br>ortation according to     | or any applica                   | ble state law,<br>gulations.    |  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  | lescribed materials are not and packaged and are in prometries of Receipt of Materi  | t hazardous wastes as defiroper condition for transp Signature "On beh   | ned by CFR Part 261 c<br>ortation according to     | or any applica                   | ble state law,<br>gulations.    | Month Day  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger   | lescribed materials are not and packaged and are in prometries of Receipt of Materi  | t hazardous wastes as defiroper condition for transp Signature "On beh als Signature                             | ned by CFR Part 261 c<br>ortation according to     | or any applica                   | ble state law,<br>gulations.    | Month Day  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  | lescribed materials are not and packaged and are in prometries of Receipt of Materi  | t hazardous wastes as defiroper condition for transp Signature "On beh   | ned by CFR Part 261 c<br>ortation according to     | or any applica                   | ble state law,<br>gulations.    | Month Day  Month Day   |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  18. Transporter 2 Acknowledger Printed Name   | lescribed materials are not and packaged and are in prometer of Receipt of Materials are not are in prometer of Receipt of Materials are not are in prometer of Receipt of Materials are not are not are in prometer of Receipt of Materials are not a | t hazardous wastes as defiroper condition for transp Signature "On beh als Signature                             | ned by CFR Part 261 c<br>ortation according to     | or any applica                   | ble state law,<br>gulations.    | Month Day  Month Day   |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  18. Transporter 2 Acknowledger Printed Name   | lescribed materials are not and packaged and are in proment of Receipt of Materials are not are in proment of Receipt of Materials are not are in proment of Receipt of Materials are not are not are in proment of Receipt of Materials are not are n | EMERGENCY CO t hazardous wastes as defiroper condition for transp Signature "On beh als Signature ials Signature | ned by CFR Part 261 contation according to alf of" | or any applica<br>applicable reg |                                 | Month Day  Month Day  Month Day  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  18. Transporter 2 Acknowledger Printed Name   | lescribed materials are not and packaged and are in proment of Receipt of Materials are not are in proment of Receipt of Materials are not of Receipt of Materials are not proment of Receipt of Materials are | t hazardous wastes as defiroper condition for transp Signature "On beh als Signature ials Signature              | ned by CFR Part 261 contation according to alf of" | or any applica<br>applicable reg |                                 | Month Day  Month Day  Month Day  |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  18. Transporter 2 Acknowledger Printed Name  19. Certificate of Final Treatment I certify, on behalf of the above applicable laws regulations per | lescribed materials are not and packaged and are in proment of Receipt of Materials are not are in proment of Receipt of Materials and listed treatment facility, to the control of the co | t hazardous wastes as defiroper condition for transp Signature "On beh als Signature ials Signature              | ned by CFR Part 261 contation according to alf of" | or any applica applicable reg    |                                 | Month Day  Month Day  Month Day  din compliance with all   |  |  |  |
| Purchase Order # GPC1076  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-daccurately described, classified a Printed Name  17. Transporter 1 Acknowledger Printed Name  18. Transporter 2 Acknowledger Printed Name   | lescribed materials are not and packaged and are in proment of Receipt of Materials are not are in proment of Receipt of Materials and listed treatment facility, to the control of the co | t hazardous wastes as defiroper condition for transp Signature "On beh als Signature ials Signature              | ned by CFR Part 261 contation according to alf of" | or any applica applicable reg    |                                 | Month Day  Month Day  Month Day  |  |  |  |

Pink- FACILITY USE ONLY

Original Ticket# 1251917

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/08/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739427

Destination

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

05/08/2018 15:03:17 In Out 05/08/2018 15:03:17

Scale Inbound 1

Operator lbejaran 1bejaran

o I and

Gnoss Tare Net Tons

62380 1b 27040 lb 35340 lb 17.67

Comments

Product

Oty

LIOM

Rate Tax

Vehicle# C25

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

Amount

Origin

1 COAL ASH & COAL CO 100 17.67 Tons

PORTW

Total Tax fotat finket

minds fry



|  | 1. Generator's US EPA      | A ID No. Man  | ifest Doc No.  | 2. Pag                     | ge 1 of                               |                       | 00                      |  |  |  |
|--|----------------------------|---|----------------|----------------------------|---------------------------------------|-----------------------|-------------------------|--|--|--|
| NON-HAZARDOUS MANIFEST                           | N /-                       | A   |                | 3.50                       |                                       |                       | 23                      |  |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER |                            | erator's Site Address (If diff<br>DRGIA POWER PLANT |                | s): A. Ma                  | wmnA                                  | 67394                 | 427                     |  |  |  |
| 241 RALPH MCGILL BLVD NE,                        | BIN#10221 155              | CROSSGATE RD.                                       |                |                            | B. State                              | Generator's I         | D                       |  |  |  |
| ATLANTA, GA 30308-3374                           | POF                        | RT WENTWORTH, GA                                    | 31407          |                            |                                       |                       |                         |  |  |  |
| 4. Generator's Phone 404-5                       | 06-1365                    |   |                |                            |                                       |                       |                         |  |  |  |
| 5. Transporter 1 Company Name                    |                            | 6. US EPA ID  | Number         |                            |                                       |                       |                         |  |  |  |
| Ilmslold   | Not in                     |   |                |                            | ite Transporter's<br>ansporter's Phon | 11-43                 |                         |  |  |  |
| 7. Transporter 2 Company Name                    | 1 WILLY                    | 8. US EPA ID  | Number         | D, III                     | ansporter's Frion                     |                       |                         |  |  |  |
| 7. Hansporter 2 company Name                     |                            |   |                | E. Sta                     | E. State Transporter's ID             |                       |                         |  |  |  |
|  |                            |   |                | F. Tra                     | insporter's Phon                      | e l                   |                         |  |  |  |
| 9. Designated Facility Name and Site             | Address                    | 10. US EPA II                                       | ) Number       |                            |                                       |                       | Maille A contrast cont. |  |  |  |
| SUPERIOR LANDFILL                                |                            |   |                |                            | ate Facility ID                       |                       |                         |  |  |  |
| 3001 LITTLE NECK ROAD                            |                            |   |                | H. St                      | ate Facility Phon                     | e 912-9 <i>i</i>      | 27-6113                 |  |  |  |
| Savannah, GA 31419                               |                            |   |                |                            |                                       |                       |                         |  |  |  |
| 11 Description of Waster State with              |                            |   | 12. Contain    |                            |                                       | I. Mis                | sc. Comments            |  |  |  |
| G 11. Description of Waste Materials             |                            |   | No.            | Type Quant                 | ity Wt./Vol.                          |                       |                         |  |  |  |
| a. COAL ASH& COAL CONTAN                         | IINATED WASTE              | Λ   | 251            | 11/19                      |                                       |                       |                         |  |  |  |
| E  | 275200CAKDA                | ( )   | $(\lambda)$    |                            |                                       |                       |                         |  |  |  |
| R WM Profile                                     | # 375200GAKRA              |   |                |                            |                                       |                       |                         |  |  |  |
| д <b>b.</b><br>Т                                 |                            |   |                |                            |                                       |                       |                         |  |  |  |
| 0  |                            |   |                |                            |                                       |                       |                         |  |  |  |
| R———   | VM Profile #               |   |                | MEST CHARLES OF THE SECOND |                                       |                       |                         |  |  |  |
| <b>C.</b>  |                            |   |                |                            |                                       |                       |                         |  |  |  |
|  | VM Profile #               |   |                |                            |                                       |                       |                         |  |  |  |
| d.   |                            |   |                |                            |                                       |                       |                         |  |  |  |
|  |                            |   |                |                            |                                       |                       |                         |  |  |  |
|  | WM Profile #               |   |                | Paga at a capacita         |                                       |                       |                         |  |  |  |
| J. Additional Descriptions for Mate              | rials Listed Above         |   | K. Disposal L  | Location / -               | 1774                                  |                       | 15                      |  |  |  |
|  |                            |   | Cell           | IN                         | 211                                   | Level                 | 6)                      |  |  |  |
|  |                            |   | Grid           | 1                          | 2                                     | 7                     |                         |  |  |  |
| 15. Special Handling Instructions an             | d Additional Informatio    | n   |                | 1                          | 1160                                  |                       |                         |  |  |  |
|  |                            |   |                |                            |                                       |                       |                         |  |  |  |
|  |                            |   | w              |                            | 1                                     |                       |                         |  |  |  |
| Purchase Order # GPC107602                       | 93                         | EMERGENCY CON                                       | NTACT / PHON   | IE NO.:                    |                                       |                       |                         |  |  |  |
| 16. GENERATOR'S CERTIFICATE:                     |                            |   |                |                            |                                       | Programme Programme A |                         |  |  |  |
| I hereby certify that the above-descr            | ribed materials are not    | hazardous wastes as defin                           | ed by CFR Part | t 261 or any app           | licable state law                     | , nave been tu        | ily and                 |  |  |  |
| accurately described, classified and             | packaged and are in pro    | Signature "On behal                                 | f of"          | ing to applicable          | . regulations.                        | Month                 | Day Year                |  |  |  |
| Printed Name B. Filipourch                       |                            | 3 the   |                |                            |                                       | 5                     | 8 17                    |  |  |  |
| 17. Transporter 1 Acknowledgemen                 | nt of Receipt of Material  | ls.   |                |                            |                                       |                       |                         |  |  |  |
| R Printed Name                                   |                            | Signature   | 05             |                            |                                       | Month                 | Day Year                |  |  |  |
| N nichaelfraz                                    |                            | Much  | 1 trong        | n                          |                                       | 5                     | 8 110                   |  |  |  |
| <sup>P</sup> 18. Transporter 2 Acknowledgemen    | nt of Receipt of Materia   | TOWN THE INC.                                       |                |                            |                                       |                       | T Do: 1 V               |  |  |  |
| Printed Name                                     |                            | Signature   |                |                            |                                       | Month                 | Day Year                |  |  |  |
| E R  |                            |   |                | /                          |                                       |                       |                         |  |  |  |
| 19. Certificate of Final Treatment/E             | Disposal                   |   |                |                            |                                       |                       |                         |  |  |  |
| I certify, on behalf of the above liste          | ed treatment facility, the | at to the best of my knowl                          | edge, the abov | ve-described wa            | ste was manage                        | ed in complian        | ce with all             |  |  |  |
| c applicable laws, regulations, permit           | s and licenses on the da   | ites listed above.                                  |                | H                          |                                       |                       |                         |  |  |  |
| 20. Facility Owner or Operator: Ce               | rtification of receipt of  |   | overed by this | manifest.                  |                                       | Month                 | Day   Yea               |  |  |  |
| Printed Name                                     | 4                          | Signature   | 1              | 1/                         |                                       |                       | 9/4                     |  |  |  |
| TOPACE DIS                                       | DOCAL BACH ITY CODY        | Blue- GENERATOR                                     | #2 COPY        |                            | Yellow- GFN                           | ERATOR #1 CO          | PY /                    |  |  |  |
| White- TREATMENT, STORAGE, DIS                   | T V                        | Gold- TRANSPORTE                                    |                |                            |                                       |                       |                         |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1251932

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier COASTALGRADING COASTALGRADING

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739428

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/08/2018 15:40:39

Out 05/08/2018 15:40:39

Scale

Operator Inbound 1 LBEJARAN

LBEJARAN

Gross Tare Net

60440 lb 25980 lb 34460 15

17.23 Tons

Comments

Product

LD% Qty UGM Rate Tax

Vehicle# C26

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

Amount

Origin

COAL ASH & COAL CO 100 17.23 Tons

PORTW

Total Tax Total Ticket



|   | NON-HAZARDOUS MANIFEST   | 1. Generator's US EP N /                              |   | Man                      | ifest Doc N    | 0.          | 2. Page 1 d                             | of   | 2.7                     | 15        |      |
|---|--|---|---|--------------------------|----------------|-------------|---|--|-------------------------|-----------|------|
| -   | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, I ATLANTA, GA 30308-3374 4. Generator's Phone 404-5                                    | Ger<br>GE<br>BIN#10221 15!                            | nerator's Site Ad<br>ORGIA POWE<br>5 CROSSGATE<br>RT WENTWO | R PLANT<br>RD.           | KRAFT          | ling):      | 10 A 10 C | st Number  MNA  B. State G   | 67394<br>Generator's II |           |      |
|   | 5-Transporter 1 Company Name 7. Transporter 2 Company Name   | rading  |   | US EPA ID                |                |             | D. Transpo                              | ransporter's IE<br>orter's Phone<br>ransporter's IE<br>orter's Phone | Temperatura             |           |      |
|   | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | Address   | 10.   | US EPA IC                | ) Number       |             | G. State F                              |  | 912-92                  | 27-611    | 3    |
| G<br>E<br>N<br>E                          | 11. Description of Waste Materials a. COAL ASH& COAL CONTAM  | IINATED WASTE   | Processing  | C                        | 12. Cor<br>No. | Type        | 13. Total Quantity                      | 14. Unit<br>Wt./Vol.   | I, Mis                  | c. Commen | ts   |
| R<br>A<br>T<br>O<br>R                     | b.   | VM Profile #  |   |                          |                |             |   |  |                         |           |      |
|   | d.   | VM Profile #  |   |                          | K. Dispos      | al Location |   |  |                         |           |      |
|   | 15. Special Handling Instructions and  |   | on  |                          | Cell<br>Grid   |             | V32                                     | 63t  | Level                   | (p)       | \    |
|   | Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr   | ribed materials are not                               | hazardous wast  | es as defin              | NTACT / PH     | art 261 or  | any applicab                            | le state law, h  | ave been ful            | ly and    |      |
| T<br>R                                    | Printed Name  17. Transporter 1 Acknowledgement  | packaged and are in pr                                | oper condition for Signature                                | or transpor<br>"On behal | tation acco    | rding to a  | pplicable reg                           | ulations.  | Month Month             | Day       | Year |
| A<br>N<br>S<br>P<br>O<br>R<br>T<br>E<br>R | 18. Transporter 2 Acknowledgemer Printed Name  | at of Receipt of Materia                              | 1 40  | 72                       | 60             |             |   |  | Month                   | Day       | Year |
| F A C I L                                 | 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit<br>20. Facility Owner or Operator: Cer | ed treatment facility, the<br>s and licenses on the d | ates listed above   |                          |                |             |   | was managed  | in compliand            | e with a  | ,    |
| T<br>Y                                    | Printed Name  White- TREATMENT, STORAGE, DISI  |   | Signatur  |                          |                | 4           | 1                                       | ellow- GENER   | Month ATOR #1 CO        | Day       | Year |

Pink- FACILITY USE ONLY



Original Ticket# 1251954

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Vehicle# J01

Ticket Date 05/08/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739429

Destination PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/08/2018 16:23:02

Out 05/08/2018 16:23:02

Scale Inbound 1

Operator LBEJARAN

LBEJARAN

Container

Billing #

Gen EPA ID NR

0001037

Driver Check#

> Gross Tare

55780 1b 23340 lb

Net Tons 32440 15 16.22

Comments

Tax Amount Origin Product LD% Qtv UOM Rate PORTW COAL ASH & COAL CO 100 16.22 Tons

> Total Tax Inbat flickert



|                  | NON-HAZARDOUS MANIFEST   | 1. Generator's US<br>N   | EPA ID No.                                       | Ma                     | nifest Doc I              | No.                           | 2. Page 1                      | of                               | 213               | 3         |
|------------------|--|--|--|------------------------|---------------------------|-------------------------------|--------------------------------|----------------------------------|-------------------|-----------|
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, I  | 6  | Generator's Site A<br>GEORGIA POV<br>L55 CROSSGA | VER PLAN               |                           | ailing):                      |                                | st Number  MNA                   | 6739429           | )         |
|                  | ATLANTA, GA 30308-3374 4. Generator's Phone 404-56   | A STATE OF THE PARTY OF THE PAR | PORT WENTW                                       | ORTH, GA               | 31407                     |                               |                                | B. State G                       | ienerator's ID    |           |
|                  | 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | gradia   | 6.   | US EPA ID              |                           |                               | D. Transpo                     | ransporter's IC<br>orter's Phone |                   |           |
|                  | 9. Designated Facility Name and Site   | Address  | 10.  | US EPA I               | D Number                  |                               | F. Transpo                     | ransporter's IC<br>orter's Phone |                   |           |
|                  | SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |  |  |                        |                           |                               | G. State F                     | acility ID<br>acility Phone      | 912-927-6         | 5113      |
| G                | 11. Description of Waste Materials   |  |  |                        | 12. Co                    | ontainers<br>Type             | 13. Total<br>Quantity          | 14. Unit<br>Wt./Vol.             | I. Misc. Co       | mments    |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAM   | INATED WASTE # 375200GAKF  | RA   | Z                      | 61                        | DT                            | 17                             |                                  |                   |           |
| R<br>A<br>T<br>O | b.   |  |  |                        |                           |                               |                                |                                  |                   |           |
| R                | <b>C.</b>  | /M Profile #   |  |                        |                           |                               |                                |                                  |                   |           |
|                  | d.<br>V  | /M Profile #   |  |                        |                           |                               |                                |                                  |                   |           |
|                  | J. Additional Descriptions for Mater   | ials Listed Above  |  |                        | K. Dispos<br>Cell<br>Grid | sal Location                  | 320                            | 129                              | Level 6           | 5         |
|                  | 15. Special Handling Instructions and  | Additional Informa   | ition  |                        |                           |                               | ~n (                           | e 5 L                            |                   | Ya.       |
|                  | Purchase Order # GPC1076029  | )3   | EME  | RGENCY COI             | NTACT / PH                | IONE NO.:                     |                                |                                  | 14.0              |           |
|                  | <ol> <li>GENERATOR'S CERTIFICATE:</li> <li>I hereby certify that the above-descriaccurately described, classified and p</li> </ol>           | bed materials are no<br>ackaged and are in   | proper condition                                 | for transpor           | tation acco               | Part 261 or a<br>ording to ap | any applicabl<br>plicable regu | le state law, hallations.        | ave been fully ar | nd        |
| Ť                | Printed Name  17. Transporter 1 Acknowledgement  | of Receipt of Mate   | B  | re "On behal           | f of"                     |                               |                                | 7                                | Month D           | ay Year   |
| R A N S P O      | Printed Name  18. Transporter 2 Acknowledgement  | leses  | Signatu  | re                     | , (                       | ne                            | -//                            |                                  | Month D           | ay Year   |
| R<br>T<br>E<br>R | Printed Name   |  | Signatu  | ire                    |                           |                               |                                |                                  | Month D           | y Year    |
| F<br>A<br>C      | <ol> <li>Certificate of Final Treatment/Di<br/>I certify, on behalf of the above listed<br/>applicable laws, regulations, permits</li> </ol> | I treatment facility, and licenses on the  | dates listed abo                                 | ve.                    |                           |                               |                                | vas managed i                    | n compliance wi   | th all    |
| L<br>I<br>T<br>Y | 20. Facility Owner or Operator: Cert<br>Printed Name   | ification of receipt of  | of non-hazardous                                 | -                      | overed by t               | this manifes                  | t.                             |                                  | Month C           | lay /Year |
| L                | White- TREATMENT, STORAGE, DISP Pink- FACILITY USE C   |  |  | GENERATOR<br>RANSPORTE |                           |                               | Y                              | ellow- GENERA                    | ATOR #1 COPY      | 14        |

Original Ticket# 1252012

PORTW

| Manual Ticket# C Hauling Ticket# D   | Carrier FLORES TRUCKING LLC<br>Vehicle# J12<br>Container Volume<br>Priver |   |
|--|---|---|
| Manifort Code  | heck#<br>illing # www.i/<br>en EPA ID NR                                  |   |
| Profile 375200GAKRA (COAL ASH & COAL CON- Generator 126-GEORGIAPWRCHAT GEORGIA POWER  Time In 05/09/2018 08:03:44 Out 05/09/2018 08:03:44 Comments  Comments | Rtor Gross Tare   | 55800 15<br>21520 15<br>34280 15<br>17.14 |
| Product  LD% Qty DOM  1 COAL ASH & COAL CO 100 17.14 Tons  | nace Tax n  | Drigin                                    |

Nomes

Total Tax Fobal Floket



| Ñ                | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                               |   | Man                 | ifest Doc N   | No.              | 2. Page 1 o           | of                              |                  | 7'1                 | 0       |
|------------------|--|---|---|---------------------|---------------|------------------|-----------------------|---------------------------------|------------------|---------------------|---------|
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, E  | GEC   | A<br>erator's Site Addre<br>DRGIA POWER F<br>5 CROSSGATE RI | PLANT               |               | ailing):         | A. Manifes            | MNA                             | 6739             | #25 (2) 1974        | 9       |
|                  | ATLANTA, GA 30308-3374  4. Generator's Phone 404-50                              | POF<br>06-1365                                      | RT WENTWORT   | H, GA               | 31407         |                  |                       |                                 |                  |                     |         |
|                  | 5. Transporter 1 Company Name  | ading   |   |                     | Number        |                  |                       | ansporter's IE<br>orter's Phone |                  |                     |         |
|                  | 7. Transporter 2 Company Name  |   | 8. 05   | 8. US EPA ID Number |               |                  |                       |                                 | )                |                     |         |
|                  | 9. Designated Facility Name and Site SUPERIOR LANDFILL                           | Address   | 10. US  | EPA ID              | Number        |                  | G. State Fa           |                                 | 012.0            | 27 6112             |         |
|                  | 3001 LITTLE NECK ROAD<br>Savannah, GA 31419                                      |   |   |                     |               |                  | H. State F            | acility Phone                   | one 912-927-6113 |                     |         |
| G                | 11. Description of Waste Materials   |   |   |                     | 12. Co<br>No. | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.            | I. M             | isc. Comment        | S       |
| E<br>N           | a. COAL ASH& COAL CONTAM   | INATED WASTE  |   | and the same of     | 1-            | M                | 17                    |                                 |                  |                     |         |
| E<br>R           | WM Profile   | # 375200GAKRA                                       |   | 7                   | 19            | 11               |                       |                                 |                  | ominera<br>Programi |         |
| A<br>T           | b.   |   |   |                     |               |                  |                       |                                 |                  |                     | . 1     |
| O<br>R           | · · ·  | /M Profile #  |   |                     |               |                  |                       |                                 |                  |                     | ifus la |
|                  | c.   |   |   |                     |               |                  |                       |                                 |                  |                     |         |
|                  | d.   | VM Profile #  | 7 N   |                     |               |                  |                       |                                 |                  |                     |         |
|                  |  | VM Profile #  | The W   |                     |               |                  |                       |                                 |                  |                     |         |
|                  | J. Additional Descriptions for Mater   | rials Listed Above                                  |   |                     |               | sal Location     | 100                   | 11/5                            | I . sassa        | 61                  |         |
|                  |  |   |   | 35                  | Cell<br>Grid  |                  | 100                   | 7                               | Level            |                     | ~       |
|                  | 15. Special Handling Instructions and  | d Additional Information                            | n   |                     |               | ,                | 4)                    | 651                             |                  |                     |         |
|                  | Purchase Order # GPC1076029  | 93  | EMERGEN   | ICY CON             | ITACT / PH    | IONE NO.:        |                       |                                 |                  |                     |         |
|                  | 16. GENERATOR'S CERTIFICATE:   |   |   |                     | LL CERT       | 0-+261           | liask                 | lo stato lavy b                 | aya baan fu      | lly and             |         |
|                  | I hereby certify that the above-descri<br>accurately described, classified and p | ibed materials are not h<br>backaged and are in pro | per condition for t   | ranspor             | tation acco   | ording to ap     | plicable regu         | lations.                        |                  |                     | L       |
|                  | Printed Name B. + NDOVICA  |   | Signature "O  | n behalf            | of"           | 21               |                       |                                 | Month            | Day                 | Year    |
| T<br>R<br>A<br>N | 17. Transporter 1 Acknowledgement  | Signature   | m   | 10                  | Show          | her              | 1                     | Month                           | Day              | Year                |         |
| PO               | 18. Transporter 2 Acknowledgemen   |   |   |                     |               |                  |                       | Month                           | Day              | Year                |         |
| R<br>T<br>E<br>R | Printed Name   |   | Signature   | X X Y               |               | Page 1           | 1/1                   |                                 | Monar            | 207                 |         |
| F                | 19. Certificate of Final Treatment/D   | isposal   | to the best of  | knowla              | odge the s    | hove descr       | ihed waste v          | vas managed                     | in complian      | ce with al          |         |
| A<br>C<br>I      | I certify, on behalf of the above lister applicable laws, regulations, permits   | and licenses on the da                              | ites listed above.  |                     |               |                  |                       | vas manageu                     | ar compilar      | CC WITH AI          |         |
| L<br>I<br>T      | 20. Facility Owner or Operator: Cer<br>Printed Name                              | tification of receipt of n                          | non-hazardous mat<br>Signature                              | erials co           | vered by t    | this manifes     | it.                   |                                 | Month            | Bay                 | Year    |
| Y                |  | 100   |   | D.A.T.C.            | 12 copy       |                  |                       | ellow- GENER                    | ATOP #1.00       | DPV                 | 0       |
|                  | White- TREATMENT, STORAGE, DISP<br>Pink- FACILITY USE O                          |   | Blue- GENE<br>Gold- TRANS                                   |                     |               | 1                | Y                     | enow- GENER                     | ATON #1 CC       |                     |         |



Original Ticket# 1252015

Customer Name GEORGIAPOWE3752000AKRA GEORGI Carrier

Ticket Date 05/09/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739431

Destination

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/09/2018 08:09:08

Out 05/09/2018 08:09:08

Scale Inbound 1

Operator lbejaran lbejaran

Gross Tare Net Tons

Volume

FLORES TRUCKING LLC

Vehicle# J06

0001037

Container Driver

Billing #

Gen EPA ID NR

Check#

58340 16 22980 lb 35360 lb 17.68

Comments

Product

MOU Rate Tax LD% Qty

Origin Amount

PORTW

COAL ASH & COAL CO 100

17.68 Tons

Total Tax fotal floket



| F                     | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA  |   | nifest Doc N   | lo.              | 2. Page 1  | of                         |                       |           | \         |
|-----------------------|--|------------------------|---|--|------------------|--|----------------------------|-----------------------|-----------|-----------|
|                       | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, B<br>ATLANTA, GA 30308-3374  | GEC<br>IN#10221 155    | A<br>erator's Site Address (If di<br>DRGIA POWER PLAN'<br>CROSSGATE RD.<br>RT WENTWORTH, GA | T KRAFT  | illing):         |  | st Number  MNA  B. State G | 67394<br>enerator's I |           | 7         |
|                       | 4. Generator's Phone 404-50 5. Transporter 1 Company Name 7. Transporter 2 Company Name  |                        | 6. US EPA ID  | Number   |                  | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID E. Transporter's Phone |                            |                       |           |           |
|                       | 9. Designated Facility Name and Site A<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | Address                | 10. US EPA I  | F. Transporter's Phone G. State Facility ID H. State Facility Phone 912-927-6113 |                  |  |                            |                       |           |           |
| G<br>E                | 11. Description of Waste Materials a. COAL ASH& COAL CONTAMI   | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.  | I. Mis   | c. Commer        | nts  |                            |                       |           |           |
| N<br>E<br>R           | WM Profile #   | 375200GAKRA            | -   | 10°P   | DI               | 17   |                            |                       |           |           |
| A<br>T<br>O<br>R      |  |                        |   | Ţ.   |                  |  |                            |                       |           |           |
|                       | d.  WI  J. Additional Descriptions for Materia   |                        | K. Dispos  Cell  Grid   | al Location  | 370              | 77   | Level 6                    | T                     |           |           |
|                       | 15. Special Handling Instructions and  |                        |   |  |                  | ~ ( )  | le sc                      |                       |           |           |
|                       | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-describ accurately described, classified and pa Printed Name                      | ed materials are not h |   | ed by CFR P  | art 261 or a     |  |                            | we been full          | y and Day | Year      |
| T R A N S P O R T E R | 17. Transporter 1 Acknowledgement of Printed Name  18. Transporter 2 Acknowledgement of Printed Name   |                        | Signature   | ly   |                  |  |                            | Month 6               | Day Day   | Year Year |
| F A C I L I           | 19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was in |                        |   |  |                  |  |                            |                       |           | 1         |
| T<br>Y                | Printed Name  White- TREATMENT, STORAGE, DISPO  Pink- FACILITY USE ON  |                        | Signature  Blue- GENERATOR  Gold- TRANSPORTE  | ellow- GENERA  | Month TOR #1 COP | Day<br>Y   | Year                       |                       |           |           |

Volume



Superior Landfill 3001 Little Neck Rd Savannah, GA, 31419 Ph: (912) 927-6113

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739432 Destination

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Time

Scale Inbound 1 05/09/2018 09:02:05

Ibejaran Ibejaran

Operator

Vehicle# JØ1

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Gross Tare Net Tons

57540 1b 23340 1b 34200 lb 17.10

Comments

Product

Qty

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

UOM

Tax Rate

Amount

Origin

1 COAL ASH & COAL CO 100

Out 05/09/2018 09:02:05

17.10 Tons

PORTW

Total Tax fotal finket



## WANA NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |  |   |               |                  |  |                      |                  |  |  |  |  |
|---|--|---|---------------|------------------|--|----------------------|------------------|--|--|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA  |   | nifest Doc I  | No.              | 2. Page 1  | of                   |                  | 25-  |  |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                        |  | erator's Site Address (If d<br>DRGIA POWER PLAN |               | ailing):         | 1 1 1 2 2 2 1 M 1 1 1 1 1 1 1 1 1 1 1 1          | st Number<br>MNA     | 67394            | 32   |  |  |  |
| 241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374                      | POF  | CROSSGATE RD.<br>RT WENTWORTH, G                | A 31407       |                  | B. State Generator's ID                          |                      |                  |  |  |  |  |
| AND                                 | 506-1365   | 1   |               |                  |  |                      |                  |  |  |  |  |
| 5. Transporter 1 Company Name   | adina  | 6. US EPA II                                    | ) Number      |                  | C. State Transporter's ID D. Transporter's Phone |                      |                  |  |  |  |  |
| 7. Transporter 2 Company Name   | The state of the s | 8. US EPA II                                    | Number        |                  |  | ransporter's ID      |                  | mesimismism en   |  |  |  |
|   |  |   | 1.7.1         |                  | F. Transpo                                       | orter's Phone        |                  |  |  |  |  |
| 9. Designated Facility Name and Si                                      | e Address  | 10. US EPA                                      | ID Number     |                  | A secondario                                     |                      |                  |  |  |  |  |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD                                 |  |   |               |                  | G. State F                                       |                      | 912-92           | 7 (112   |  |  |  |
| Savannah, GA 31419  |  |   |               |                  | H. State F                                       | acility Phone        | 912-92           | 1-0112   |  |  |  |
| Savailiali, GA 31419  |  |   |               |                  |  |                      |                  |  |  |  |  |
| G 11. Description of Waste Materials                                    |  |   | 12. Co<br>No. | ntainers<br>Type | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol. | I. Misc          | . Comments   |  |  |  |
| a. COAL ASH& COAL CONTAI  | MINATED WASTE  |   | TOI           | DI               | 17   |                      |                  |  |  |  |  |
| E WM Profi  | e# 375200GAKRA   | Noncom  |               |                  |  |                      |                  |  |  |  |  |
| A b.  |  |   |               | 7                |  |                      | 111              |  |  |  |  |
| T<br>O  |  |   |               |                  |  |                      |                  |  |  |  |  |
| R   | WM Profile #   |   |               |                  |  |                      |                  |  |  |  |  |
| C.  |  |   |               |                  |  | 1247                 |                  |  |  |  |  |
|   | WM Profile #   | 7.5   |               |                  |  |                      |                  | Dalasaksanasal   |  |  |  |
| d.  |  |   |               | -                |  |                      |                  |  |  |  |  |
|   |  |   |               |                  | //   |                      |                  |  |  |  |  |
| I additional Descriptions for Man                                       | WM Profile #   |   | K Dispo       | sal Location     |  |                      |                  |  |  |  |  |
| J. Additional Descriptions for Mar                                      | eriais Listeu Above  |   | к. ызро       | sai Locatioi     | 07   | 1171                 | 41.              | 11   |  |  |  |
|   |  |   | Cell          | /\               | 1)11   | 6                    |                  |  |  |  |  |
| 15. Special Handling Instructions a                                     | nd Additional Information  | <u> </u>  | Grid          | -                | 16   | 17                   | 7                |  |  |  |  |
| 13. Special Handling Histractions a                                     | na Additional Information  |   |               |                  | -11  | 6)                   |                  |  |  |  |  |
|   |  |   |               |                  |  |                      |                  | 15-4-17  |  |  |  |
| Purchase Order # GPC10760   | 293  | EMERGENCY CO                                    | NTACI / PF    | ONE NO.:         |  |                      |                  |  |  |  |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-des       | orihad matarials are not   | azzardous wastes as defi                        | and by CEP    | Part 261 or      | any applicab                                     | le state law ha      | eve been fully   | v and  |  |  |  |
| accurately described, classified and                                    | packaged and are in pro  | per condition for transpo                       | rtation acco  | ording to ap     | plicable reg                                     | ulations.            | S. O DOCTI TOTAL | A THE STATE OF THE |  |  |  |
| Printed Name  |  | Signature "On beha                              | alf of"       |                  |  | 1                    | Month            | Day Year   |  |  |  |
| B. +1/100vich   | CD   | DE  |               |                  | 1 T  | 17                   | 101              | 7 10   |  |  |  |
| 17. Transporter 1 Acknowledgeme   | int of Neceipt of Material   | \$ Signature                                    |               | /                |  | 11                   | Month            | Day Year   |  |  |  |
| N S COLM  | Paril  |   | -             | (                | Sec  | -/                   | 5                | 9/1  |  |  |  |
| 18. Transporter 2 Acknowledgeme   | nt of Receipt of Material  | s Z   | 21-30         |                  |  | /                    |                  | 1 1  |  |  |  |
| Printed Name  | 7  | Signature                                       |               |                  |  |                      | Month            | Day Year   |  |  |  |
| E<br>R  |  | - March 1 / March                               | EVA           |                  |  |                      | I NY             |  |  |  |  |
| 19. Certificate of Final Treatment/                                     |  |   |               |                  |  |                      |                  |  |  |  |  |
| I certify, on behalf of the above list                                  | ed treatment facility, tha   | at to the best of my know                       | ledge, the a  | bove-descr       | ibed waste                                       | was managed i        | n compliance     | with all   |  |  |  |
| applicable laws, regulations, permit 20. Facility Owner or Operator: Co |  |   | rovered by    | this manife      | st.  |                      | 19               |  |  |  |  |
| 20. Facility Owner or Operator: Co                                      | erunication of receipt of n  | Signature Signature                             | Lovered by    | manne:           |  |                      | Month            | Day / Year   |  |  |  |
| y Printed Name  | 11   | 5,5,131.0                                       | 11            | )                |  |                      | 01               |  |  |  |  |
| White- TREATMENT, STORAGE, DI   | SPOSAL FACILITY COPY   | Blue- GENERATO                                  | R #2 COPY     |                  | Υ  | ellow- GENERA        | ATOR #1 COP      | 1  |  |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY

Original Ticket# 1252019

56660 16

21940 lb

34720 15

17.36

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018 Vehicle# J07 Volume

Payment Type Credit Account Container
Manual Ticket# Driver
Hauling Ticket# Check#

Route State Waste Code Sen EPA ID NR

Manifest 6739433 Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Generator 126-GEURGIAPWRCHAI GEURGIA POWER - PLANT KRAFT

Time Scale Operator
In \$5709/2018 08:14:24 Inbound 1 lbejaran
Out 05/09/2018 08:14:24 lbejaran
Comments

WASTE MANAGEMENT

Product LD% Qty UOM Rate Tax Amount Origin

1 COAL ASH & COAL CO 100 17.36 Tons PORTW

Total Tax

Gross

Tare '

Net

Tons



| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                 |   | nifest Doc N  | lo.                          | 2. Page 1 o   | of                       | - 2 6       | 101              |  |
|--|---|---|---------------|------------------------------|---|--------------------------|-------------|------------------|--|
| NON-HAZARDOOS MANIFEST   | N / /   |   |               |                              |   | 34-1-2                   | 7           | 30               |  |
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, I ATLANTA, GA 30308-3374 4. Generator's Phone 404-50                           | GEC<br>BIN#10221 155                                  | erator's Site Address (If di<br>DRGIA POWER PLAN<br>CROSSGATE RD.<br>RT WENTWORTH, GA | T KRAFT       | iling):                      | A. Manifes  | MNA                      | 6739        |                  |  |
| 5. Transporter 1 Company Name  | 199   | 6. US EPA II  |               |                              | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID F. Transporter's Phone G. State Facility ID H. State Facility Phone 912-927-6113 |                          |             |                  |  |
| 7. Transporter 2 Company Name  | <i>O</i>  | 8. US EPA II  | ) Number      |                              |   |                          |             |                  |  |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | Address   | 10. US EPA  | ID Number     |                              |   |                          |             |                  |  |
| 11. Description of Waste Materials   |   |   | 12. Cor       | ntainers<br>Type             | 13. Total<br>Quantity   | 14. Unit<br>Wt./Vol.     | l. Mi       | isc. Comments    |  |
| a. COAL ASH& COAL CONTAM   |   |   | 507           | DT                           | 18  |                          |             |                  |  |
| R WM Profile A b.  | # 375200GAKRA   |   |               |                              |   |                          |             |                  |  |
| C. V   | /M Profile #  |   |               |                              |   |                          |             |                  |  |
| v  | VM Profile #  |   |               |                              |   |                          |             |                  |  |
| J. Additional Descriptions for Mate  | VM Profile #<br>rials Listed Above                    |   | K. Dispos     | al Location                  | 32  | 124                      | Level       | (o5              |  |
| 15. Special Handling Instructions and  | d Additional Information                              |   | Grid          | Ċ                            | 91  | 032                      |             |                  |  |
| Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE:  | 93  | EMERGENCY CC  | NTACT / PH    | ONE NO.:                     |   |                          |             |                  |  |
| I hereby certify that the above-descr<br>accurately described, classified and p<br>Printed Name  | ibed materials are not h<br>packaged and are in prop  | azardous wastes as defin<br>per condition for transpo<br>Signature "On beha           | ortation acco | art 261 or a<br>ording to ap | any applicab<br>plicable regu   | e state law, hallations. | Month       | lly and Day Year |  |
| 17. Transporter 1 Acknowledgemen   | t of Receipt of Materials                             | Signature   | Sa.           | hoy                          |   |                          | Month       | Day Year         |  |
| 18. Transporter 2 Acknowledgemen Printed Name  | t of Receipt of Materials                             | Signature   |               |                              |   |                          | Month       | Day Year         |  |
| 19. Certificate of Final Treatment/D I certify, on behalf of the above liste applicable laws, regulations, permits 20. Facility Owner or Operator: Cer | d treatment facility, that<br>and licenses on the dat | tes listed above.   |               |                              |   | vas managed i            | in complian | ce with all      |  |
| Printed Name  White-TREATMENT. STORAGE, DISE   | 1   | Signature  Blue- GENERATOR  | 1             |                              |   | ellow- GENERA            | Month C     | Day Year         |  |

Pink- FACILITY USE ONLY

Original Ticket# 1252026

Customer Name GEDRGIAPOWE375200GAKRA GEDRGI Carrier FLORES TRUCKING LLC Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6739434

Destination PO

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/09/2018 08:22:19 Out 05/09/2018 08:22:19

Scale Inbound 1

Operator lbejaran 1bejaran

Gross 58180 lb Tare 23800 lb 34380 15 Net Tons 17.19

Comments

Product

Oty

UDM

Rate Tax

Vehicle# J04

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

Amount

Volume

Origin

1 COAL ASH & COAL CO 100

17.19 Tons

PORTW

Total Tax fobal ficket



|             | •  | 1. Generator's US EP     | A ID No.                      | Ma              | nifest Doc N | No.            | 2. Page 1  | of                               |             |              |          |  |  |  |
|-------------|--|--------------------------|-------------------------------|-----------------|--------------|----------------|--|----------------------------------|-------------|--------------|----------|--|--|--|
|             | NON-HAZARDOUS MANIFEST   | N /                      |                               |                 |              |                |  |                                  | 7.24        |              |          |  |  |  |
|             | 3. Generator's Mailing Address: GEORGIA POWER  | Ger<br>GE                | nerator's Site A<br>ORGIA POV | VER PLAN        |              | ailing):       | William Control of the Control of th | st Number                        | 6739        | 434          |          |  |  |  |
|             | 241 RALPH MCGILL BLVD NE, I  |                          | 5 CROSSGA                     |                 | 24.467       |                |  | B. State C                       | Generator's | ID           |          |  |  |  |
|             | ATLANTA, GA 30308-3374   |                          | RT WENTW                      | ORTH, GA        | 3140/        |                | 100  |                                  |             |              |          |  |  |  |
|             | 4. Generator's Phone 404-50 5. Transporter 1 Company Name  | 06-1365                  | 6.                            | US EPA ID       | Niumakan     |                |  |                                  |             |              |          |  |  |  |
|             | A S S = 1  | i                        | 0.                            | US EPA ID       | Number       |                | C. State T   | ransporter's ID                  | )           |              | 1-20-0-1 |  |  |  |
|             | COAStal Gr   | adina                    |                               |                 |              |                |  | orter's Phone                    |             |              |          |  |  |  |
|             | 7. Transporter 2 Company Name  |                          | 8.                            | US EPA ID       | Number       |                |  |                                  |             |              |          |  |  |  |
|             |  |                          |                               |                 |              |                | A STATE AND ADDRESS OF THE PARTY OF  | ransporter's ID<br>orter's Phone |             | 6 m (6)      |          |  |  |  |
|             | 9. Designated Facility Name and Site   | 10.                      | US EPA I                      | D Number        |              | T. Trunspi     | Alle Marie   |                                  |             |              |          |  |  |  |
|             | SUPERIOR LANDFILL  |                          |                               |                 |              | G. State F     | acility ID   |                                  |             |              |          |  |  |  |
|             | 3001 LITTLE NECK ROAD  |                          |                               |                 |              | H. State F     | acility Phone  | 912-9                            | 27-611      | .3           |          |  |  |  |
|             | Savannah, GA 31419   |                          |                               |                 |              |                |  |                                  |             |              |          |  |  |  |
|             |  |                          |                               | 12 Co           | ntainers     | 13 T-1-1       | 24 11-2  |                                  |             |              |          |  |  |  |
| G           | 11. Description of Waste Materials   |                          |                               |                 | No.          | Type           | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.             | I. M        | isc. Comme   | nts      |  |  |  |
| E<br>N      | a. COAL ASH& COAL CONTAM   |                          |                               | x 11.           | 1            | 177            |  |                                  |             |              |          |  |  |  |
| E           |  |                          | 3                             | 04              | 771          | 1 X            |  |                                  |             |              |          |  |  |  |
| R           | WM Profile   |                          |                               |                 |              |                |  |                                  |             |              |          |  |  |  |
| A<br>T      | b.   |                          |                               |                 |              |                |  |                                  |             |              |          |  |  |  |
| 0           |  |                          |                               | Hitte-Hitteans  |              |                |  |                                  |             |              |          |  |  |  |
| R           | c. W   |                          |                               |                 |              |                |  |                                  |             |              |          |  |  |  |
| М           |  |                          |                               |                 |              |                | X  |                                  | 11/51 -     |              |          |  |  |  |
|             | W. Carlotte and Car | /M Profile #             |                               |                 | Ladinosti    | Minima Maria B |  |                                  |             | 1057177 2005 |          |  |  |  |
| 13.         | d.   |                          |                               |                 |              |                |  |                                  |             |              |          |  |  |  |
|             |  |                          |                               |                 |              |                |  |                                  |             |              |          |  |  |  |
| N.          |  | /M Profile #             |                               |                 | Carlo Comple |                |  |                                  |             |              |          |  |  |  |
|             | J. Additional Descriptions for Mater   | ials Listed Above        |                               |                 | K. Dispos    | al Location    | 17   | 1,                               |             | -            |          |  |  |  |
|             |  |                          |                               | Cell V ) / U/69 |              |                |  |                                  |             | Level 6      |          |  |  |  |
|             |  |                          |                               |                 | Grid         |                |  |                                  |             |              |          |  |  |  |
|             | 15. Special Handling Instructions and  | Additional Information   | n                             |                 |              | (              | OKI  | 656                              |             |              |          |  |  |  |
|             |  |                          |                               |                 |              |                | 001  |                                  |             |              |          |  |  |  |
|             | Purchase Order # GPC1076029  | 12                       | EME                           | RGENCY CON      | ITACT / DH   | ONE NO :       |  |                                  |             |              |          |  |  |  |
|             | 16. GENERATOR'S CERTIFICATE:   | 3,                       | LIVIL                         | NGLIVET COT     | IIACI / FIII | OIVE IVO       |  |                                  |             |              |          |  |  |  |
|             | I hereby certify that the above-descri   | hed materials are not h  | nazardous was                 | stes as define  | ed by CFR P  | art 261 or     | anv applicabl  | e state law. ha                  | ve been fu  | llv and      |          |  |  |  |
|             | accurately described, classified and pa  |                          |                               |                 |              |                |  |                                  |             |              |          |  |  |  |
|             | Printed Name   |                          | Signatu                       | re "On behal    | f of"        |                |  |                                  | Month       | Day          | Year     |  |  |  |
|             | B Filipovich   | of Donaint of Matavial   | DF                            | -               |              |                |  |                                  | 5           | 4            | 110      |  |  |  |
| R           | 17. Transporter 1 Acknowledgement Printed Name   | or Receipt of Material   | Signatur                      | re I            | 1            | . /            |  |                                  | Month       | Day          | Year     |  |  |  |
| A<br>N<br>S | W W Y  | DUNG                     | Digitatui                     | Kh              | de le        | Mo             | Comments of the Comments of th |                                  | K           | a            | 17       |  |  |  |
| P           | 18. Transporter 2 Acknowledgement  | S                        | 1 1                           |                 | 11           | 1              |  |                                  | 1           | 1            |          |  |  |  |
| R           | Printed Name   | Signatu                  | re                            |                 | U            | 1              | Taby 4 1   | Month                            | Day         | Year         |          |  |  |  |
| E<br>R      |  |                          |                               |                 |              |                |  |                                  |             | 18/15        |          |  |  |  |
|             | 19. Certificate of Final Treatment/Dis   |                          |                               |                 | 1000         | M TO THE RE    |  | Marie 1                          | 1727        |              |          |  |  |  |
| F<br>A<br>C | I certify, on behalf of the above listed   | treatment facility, tha  |                               |                 | dge, the ab  | oove-descri    | bed waste w  | as managed in                    | n compliand | ce with a    | 1        |  |  |  |
| 1           | applicable laws, regulations, permits  | 1 1                      |                               |                 | 9/08/11 × 0  |                |  |                                  |             |              |          |  |  |  |
| L           | 20. Facility Owner or Operator: Cert   | fication of receipt of n | 10.00                         |                 | overed by th | nis manifes    | t.   |                                  | Later 2     | 20           | V 4      |  |  |  |
| Y           | Printed Name   |                          | Signatu                       | re              |              |                |  |                                  | Month       | Day          | Year     |  |  |  |
|             | White- TREATMENT, STORAGE, DISPO   | OSAL FACILITY COPY       | Blue- 6                       | SENERATOR :     | #2 COPY      |                | Ye   | ellow- GENERA                    | TOR #1 CO   | PY           | 10       |  |  |  |

Pink- FACILITY USE ONLY

Original Ticket# 1252086

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket# Route

State Waste Code

Manifest 6739435

Destination

Generator

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/09/2018 09:51:55 Out 05/09/2018 09:51:55 Scale Inbound 1 Operator lbejaran

Vehicle# J12

Gen EPA ID NR

0001037

Container Driver

Check# Billing #

lbejaran

Gross Tare 54180 lb 21520 lb 32660 lb

Net 32660 lb Tons 16.33

Comments

### WASTE MANAGEMENT

Product LD% Qty UOM Rate Tax Amount Origin

1 COAL ASH & COAL CO 100 16.33 Tons PORTW

Jomes

Total Tax



|                  | NON HAZARROUS ASSAURTS  | 1. Generator's   | US EPA ID No.                               | M                         | anifest Doc I | No.          | 2. Page 1             | of              |                   |       |  |
|------------------|---|--|---|---------------------------|---------------|--------------|-----------------------|-----------------|-------------------|-------|--|
| 7.               | NON-HAZARDOUS MANIFEST  |  | N/A   |                           |               |              |                       |                 | 9:05              | 5     |  |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, E   | RIN#10221  | Generator's Sin<br>GEORGIA PO<br>155 CROSSO | OWER PLAN                 |               | ailing):     | 1 10.00 10.5180/10.00 | est Number      | 6739435           |       |  |
|                  | ATLANTA, GA 30308-3374 4. Generator's Phone 404-50  | 06-1365  | PORT WENT                                   |                           | A 31407       |              |                       | B. State G      | Generator's ID    |       |  |
|                  | 5. Transporter 1 Company Name   | lina   | 6.  | US EPA I                  | D Number      |              |                       | ransporter's ID |                   |       |  |
|                  | 7. Transporter 2 Company Name   | J  | 8.  | US EPA I                  | D Number      |              | E. State T            | ransporter's ID |                   |       |  |
| 1                | 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD  | Address  | 10.   | US EPA                    | ID Number     |              | G. State F            | acility ID      |                   |       |  |
|                  | Savannah, GA 31419  |  |   |                           |               | H. State F   | acility Phone         | 912-927-61      | .13               |       |  |
| G                | 11. Description of Waste Materials  | 1. Description of Waste Materials  12. Containers 13. Total 14. U No. Type Quantity Wt.∧ |   |                           |               |              |                       |                 | I. Misc. Comr     | nents |  |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAM  | NATED WAST   | ΓE  |                           | 773           | DT           | 18                    |                 |                   |       |  |
| R                |   | # 375200GA   | KRA   |                           |               |              |                       |                 |                   |       |  |
| A<br>T<br>O      | b.  | M Profile #  |   |                           |               |              |                       |                 |                   |       |  |
| R                | C. W  |  |   | 4.4                       |               |              |                       |                 |                   |       |  |
|                  | w   |  |   |                           |               |              |                       |                 | 50-9              |       |  |
|                  | d.  |  |   |                           |               |              |                       |                 |                   |       |  |
|                  | J. Additional Descriptions for Materi   | M Profile #  |   |                           |               |              |                       |                 |                   |       |  |
|                  | J. Additional Descriptions for Mater  | als Listed Above   |   |                           |               | al Location  | 02                    |                 |                   |       |  |
|                  |   |  |   | Cell 1/3 201/1            |               |              |                       |                 |                   |       |  |
|                  | 15. Special Handling Instructions and   | Additional Inforr  | nation                                      | in CN131                  |               |              |                       |                 |                   |       |  |
|                  | Purchase Order # GPC1076029   | 3  | × EN  | MERGENCY CO               | NTACT / PHO   | ONE NO.:     |                       |                 | N.                |       |  |
|                  | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-describe accurately described, classified and pa   |  |   |                           |               |              |                       |                 | ve been fully and |       |  |
|                  | Printed Name  |  | Signa                                       | ture "On beha             |               | 0 11         |                       |                 | Month Day         | Year  |  |
| T R A N S P O    | 17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement   | hubEr  | Signat                                      | Signature Shuhert         |               |              |                       |                 |                   | Year  |  |
| R<br>T<br>E<br>R | Printed Name  |  |   |                           |               |              |                       |                 | Month Day         | Year  |  |
| F<br>A<br>C      | 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all |  |   |                           |               |              |                       |                 |                   |       |  |
|                  | applicable laws, regulations, permits a<br>20. Facility Owner or Operator: Certif   |  |   |                           | overed by th  | nis manifest |                       |                 |                   |       |  |
| T<br>Y           | Printed Name  |  | Signa                                       |                           |               |              | Month Day             | Year            |                   |       |  |
|                  | White- TREATMENT, STORAGE, DISPO<br>Pink- FACILITY USE ON   |  |   | - GENERATOR<br>TRANSPORTE |               |              | Ye                    | llow- GENERAT   | FOR#1 COPY        |       |  |



Reprint Ticket# 1252093

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# -

Hauling Ticket#

Route

State Waste Code

Manifest 6739436

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator

126-GEORGIAPURCHAT GEORGIA POWER - PLANT KRAFT

Time

05/09/2018 10:05:42 In

Out 05/09/2018 10:05:42

Scale Inbound 1

Operator 1bejaran

Vehicle# J07

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

lbejaran

Gross Tare

52380 1b 21940 lb

Net Tons

Volume

30440 1b 15.22

Comments

### WASTE MANAGEMENT

| Direct    | duct                  | LD% | Qty   | UOM  | Rate  | Tax | Amount  | Origin   |
|-----------|-----------------------|-----|-------|------|---|-----|---|--|
| non mon m | n and "pile has " be" |     |       |      | and has mad and him has the one over two to |     | n mayor forms these many arms, these build many latest second where these | AND AND SHAPE WAS DOOR THAT THE DESCRIPTION OF THE PARTY AND ADDRESS OF THE PARTY ADDRESS |
| 1         | COAL ASH & COAL CO    | 100 | 15.22 | Tons |   |     |   | PORTW  |

Total Tax Cobal Floket



# WANTEST NON-HAZARDOUS MANIFEST

| -           | WASTE MANAGEMENT   | 1. Generator's US EPA                            | VID No. Ma  | nifest Doc N              | 1                  | I 2 D 1               |                      |             |          |              |  |  |
|-------------|--|--|---|---------------------------|--------------------|-----------------------|----------------------|-------------|----------|--------------|--|--|
|             | NON-HAZARDOUS MANIFEST   | N /  |   | 2. Page 1                 | of                 | 9:1                   | 4                    |             |          |              |  |  |
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER   |  | erator's Site Address (If dif<br>DRGIA POWER PLAN |                           | ailing):           |                       | est Number           | 6739        | 436      |              |  |  |
|             | 241 RALPH MCGILL BLVD NE,  | ALPH MCGILL BLVD NE, BIN#10221 155 CROSSGATE RD. |   |                           |                    |                       |                      |             |          |              |  |  |
|             | ATLANTA, GA 30308-3374   | POF  | RT WENTWORTH, GA                                  | 31407                     |                    |                       | Di State e           | enerator's  |          |              |  |  |
|             | 4. Generator's Phone 404-5   | 06-1365  |   |                           |                    |                       |                      |             |          |              |  |  |
|             | 5 Transporter 1 Company Name   | 1  | 6. US EPA ID                                      | Number                    |                    |                       | llusery (m.s. c)     |             |          |              |  |  |
|             | I'mstel Ga   | - 1:00   |   | C. State Transporter's ID |                    |                       |                      |             |          |              |  |  |
|             | 7. Transporter 2 Company Name  | 19111  | O LICEDAID  | Niverbau                  |                    | D. Transp             | orter's Phone        |             |          | Almenta meny |  |  |
|             | 7. Transporter 2 Company Name  |  | 8. US EPA ID                                      | Number                    |                    | E State T             | ransporter's IC      | )           |          |              |  |  |
|             |  |  |   |                           |                    |                       | orter's Phone        |             |          |              |  |  |
|             | 9. Designated Facility Name and Site   | Address  | 10. US EPA II                                     | D Number                  | 771-5              |                       |                      |             |          |              |  |  |
|             | SUPERIOR LANDFILL  |  |   |                           |                    | G. State F            | acility ID           |             |          |              |  |  |
|             | 3001 LITTLE NECK ROAD  |  |   |                           |                    | H. State F            | acility Phone        | 912-9       | 27-611   | .3           |  |  |
|             | Savannah, GA 31419   |  | anastra la secución                               |                           |                    | 1 4 30 30 30 40       |                      |             |          |              |  |  |
|             |  |  | THE SHOE SHOULD                                   |                           |                    |                       |                      |             |          |              |  |  |
| G           | 11. Description of Waste Materials   |  |   | No.                       | Type               | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol. | I. M        | nts      |              |  |  |
| E           | a. COAL ASH& COAL CONTAM   | INATED WASTE                                     |   |                           | ~ -                | . 77                  |                      |             | 73-0     | E TA         |  |  |
| N<br>E      |  |  |   | 107                       | 07                 | 18                    |                      |             |          | 100          |  |  |
| R           | WM Profile   |  |   |                           |                    |                       |                      |             |          |              |  |  |
| Α           | b.   |  |   |                           |                    |                       |                      |             |          |              |  |  |
| Т           |  |  |   |                           |                    |                       |                      | 1 m 1 1 m   |          | 5 6 6        |  |  |
| O<br>R      | w.   | /M Profile #                                     |   |                           | distriction.       |                       |                      | 09221101110 |          | Market Shir  |  |  |
| 1           | C.   |  |   |                           |                    |                       |                      |             |          |              |  |  |
|             |  |  |   |                           |                    |                       |                      |             |          |              |  |  |
|             |  | /M Profile #                                     |   |                           |                    |                       |                      |             |          | Harana       |  |  |
|             | d.   |  |   |                           |                    |                       |                      |             |          |              |  |  |
|             |  |  |   |                           |                    |                       |                      |             |          |              |  |  |
| 1           | J. Additional Descriptions for Mater   | K Disease  |   |                           | asserbilian (* 40) |                       |                      |             |          |              |  |  |
|             | J. Additional Descriptions for Mater   | k. Dispos  | al Location                                       | 27.                       | 171                |                       | 11                   |             |          |              |  |  |
| ä           |  |  | Cell  | 1                         | 00                 | 10                    | Level                | 9           |          |              |  |  |
|             | 48.7   |  |   | Grid                      | 1 4                | 10                    | 77                   |             |          |              |  |  |
|             | 15. Special Handling Instructions and  | Additional Information                           |   |                           | 0                  | NI                    | use                  |             |          |              |  |  |
| N           |  |  |   |                           |                    |                       |                      |             |          |              |  |  |
|             | D  | 12   | EMEDICENCY CON                                    | ITACT / DUI               | ONE NO             |                       |                      |             |          |              |  |  |
| 1           | Purchase Order # GPC1076029  | 13   | EMERGENCY CON                                     | MIACI / PHI               | ONE NO.:           |                       |                      |             |          |              |  |  |
| H           | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and       |  |   |                           |                    |                       |                      |             |          |              |  |  |
|             | accurately described, classified and p   |  |   |                           |                    |                       |                      | ive been iu | ny anu   |              |  |  |
|             | Printed Name   |  | Signature,"On behal                               |                           |                    |                       |                      | Month       | Day      | Year         |  |  |
|             | BFILIPOUICH  | and the second                                   | 18 to   | 1                         | 1                  |                       |                      | 5           | 9        | IX           |  |  |
| T<br>R      | 17. Transporter 1 Acknowledgement  | of Receipt of Materials                          |   | /                         | 0/                 | 375/7                 |                      |             |          |              |  |  |
| R<br>A<br>N | Printed Name   | OAHAII   | Signature   | 1 9                       | Steal              | 1                     |                      | Month       | Day      | Year         |  |  |
| S<br>P      | y 6 20 1/16  | Phillind   | y e serg  | 10                        | price              |                       |                      | 15          | 7        | 46           |  |  |
| 0           | 18. Transporter 2 Acknowledgement  | of Receipt of Materials                          |   |                           |                    |                       |                      | Month       | Day      | Year         |  |  |
| R<br>T<br>E | Printed Name   |  | Signature   |                           |                    |                       |                      | IVIOREN     | Day      | rear         |  |  |
| R           |  |  |   |                           |                    | and the second        | Mary 1948            |             |          |              |  |  |
| F           | 19. Certificate of Final Treatment/Di  |  |   |                           |                    |                       |                      |             | -115     | (            |  |  |
| F<br>A<br>C | I certify, on behalf of the above listed   |  |   | edge, the ab              | ove-descri         | bed waste v           | vas managed ii       | n compliand | e with a | 31.4         |  |  |
| L           | applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest. |  |   |                           |                    |                       |                      |             |          |              |  |  |
| i<br>T      |  | meation or receipt of no                         | Signature Signature                               | overed by th              | no mannesi         |                       | 30,000               | Month       | Day      | Vear         |  |  |
| Y           | Printed Name   | 1  | Signature   |                           |                    |                       |                      | enti        | / /      | 10           |  |  |
|             | White- TREATMENT, STORAGE, DISPO   | OSAL FACILITY COPY                               | Blue- GENERATOR                                   | #2 COPY                   |                    | Ye                    | ellow- GENERA        | TOR #1 COI  | PY       |              |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY

Original Ticket# 1252099

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739437 Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/09/2018 10:14:48

Out 05/09/2018 10:14:48

Scale

Inbound 1

Operator lbejaran! 1bejaran

Vehicle# JØ4

Billing #. 0001037

Gen EPA ID NR

Container

Driver

Check#

Gross

Tare Net Tons

55480 16 23800 lb/ 31580 lb 15,84

Comments

### WASTE MANAGEMENT

| PN COLC | d de       |         | 1 D%   | Qtv  | NOM  | Rate | Tax | Amount | Origin   |
|---------|------------|---------|--|--|------|------|-----|--------|----------|
| Pro     | net        |         | Sans Aid ( 77                                      | W. W. J.                                   |      |      |     |        |          |
| -       |            |         | and design names are as or other names family last | The first that have been said and that the |      |      |     |        | PORTW    |
| 4       | COOL OCH & | COAL CO | 100  | 15.84                                      | Tons |      |     |        | L'DIVI W |

Total Tax fobal ficket



|                       | NON-HAZARDOUS MANIFEST  | 1. Generator's US  | EPA ID No.  | Manifest Doc No.   | 2. Page 1  | of                               | 93          | 51              |      |
|-----------------------|---|--|---|--|--|----------------------------------|-------------|-----------------|------|
|                       | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,   |  | GEORGIA POWER PLA<br>SEORGIA POWER PLA<br>SES CROSSGATE RD. | and the second s |  | st Number                        | 6739        | 9437            |      |
|                       | ATLANTA, GA 30308-3374  | AND DESCRIPTION OF THE PROPERTY OF THE PROPERT | PORT WENTWORTH,   | GA 31407   |  | B. State G                       | ienerator's | i ID            |      |
|                       | 5. Transporter 1 Company Name   | ading  | 6. US EPA   | ID Number  | The second secon | ransporter's ID<br>orter's Phone |             |                 |      |
|                       | 7. Transporter 2 Company Name   |  | 8. US EPA   | ID Number  |  | ransporter's ID<br>orter's Phone |             |                 |      |
|                       | <ol> <li>Designated Facility Name and Site</li> <li>SUPERIOR LANDFILL</li> <li>3001 LITTLE NECK ROAD</li> </ol>             | Address  | 10. US EP   | A ID Number  | G. State F   | acility ID                       | 912.0       | 927-611         | 12   |
|                       | Savannah, GA 31419  |  |   |  | The state of   | active r none                    |             | 727-013         |      |
| G                     | 11. Description of Waste Materials  |  |   | 12. Containers No. Type  | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.             | L. N        | lisc. Comme     | ents |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAM  |  |   | TOH DI   | 717  |                                  |             |                 |      |
| R<br>A<br>T           | b.  | # 375200GAKF   | A   |  |  |                                  |             |                 |      |
| O<br>R                | c. W  | /M Profile #   |   |  |  |                                  |             |                 |      |
|                       | d.  | /M Profile #   |   |  |  |                                  |             |                 |      |
|                       |   | /M Profile #   |   |  |  |                                  |             |                 |      |
|                       | J. Additional Descriptions for Mater  | ials Listed Above  |   | K. Disposal Locati   | on 32  | 1125                             | Level       | 6               |      |
|                       | 15. Special Handling Instructions and   | Additional Informat  | ion   | Grid   | M  | 03L                              |             |                 |      |
|                       | Purchase Order # GPC1076029   | 3  | EMERGENCY C   | ONTACT / PHONE NO.   |  |                                  |             |                 |      |
|                       | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descriaccurately described, classified and p.                 |  |   |  |  |                                  | ve been fu  | lly and         |      |
|                       | Printed Name B + Npouick  |  | Signature "On bel   |  |  |                                  | Month       | Day             | Year |
| T<br>R<br>A<br>N<br>S | 17. Transporter 1 Acknowledgement Printed Name  | of Receipt of Mater  | Signature   | Le M   | get a  |                                  | Month       | Day             | Year |
| P O R T E R           | 18. Transporter 2 Acknowledgement Printed Name  | of Receipt of Mater  | als Signature   |  | 1  |                                  | Month       | Day             | Year |
| F A C                 | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | treatment facility, t<br>and licenses on the c   | lates listed above.   |  |  | as managed in                    | complian    | l<br>ce with al |      |
| L<br>I<br>T<br>Y      | 20. Facility Owner or Operator: Certi<br>Printed Name   | fication of receipt of   | non-hazardous materials<br>Signature                        | covered by this manif  | est.   |                                  | Month       | Day             | Year |
|                       | White-TREATMENT, STORAGE, DISPO   |  | Blue- GENERATO Gold- TRANSPORT                              |  | Yel  | llow- GENERAT                    | OR #1 CO    | PY              | U    |



Original Ticket# 1252124

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739438

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Time

In 05/09/2018 10:51:49

Out 05/09/2018 10:51:49

Scale

Operator Inbound 1 lbejaran

lbejaran

Grass Tare

54700 1b 22980 lb

Net Tons 31720 16 15,86

Comments

Vehicle# JØ6

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

| Pro            | duct   | LD% | Qty  | LIOM | Rate   | Tax  | Amount | Origin   |
|----------------|--|-----|--|------|--|--|--------|--|
| 490V 3000 1000 | and the contract and the third and the state of the third that the contract of the con |     | and sides does been paid to be some sales and deep the |      | THE COLUMN TWO COMES AND ADDRESS ASSESSMENT AND ADDRESS ASSESSMENT AND ADDRESS ASSESSMENT AND ADDRESS ASSESSMENT ADDRESS ASSESS | na siara nome sance arion arion arion anno anno anno anno anno | -      | SHIP AND YOUR WAY COLUMNS AND AND AND SAID SHIP SHIP AND AND |
| 1              | COAL ASH & COAL CO   | 100 | 15.86  | Tons |  |  |        | PORTW  |

J. Chosh

Total Tax fokal fludest



|                       | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA     |   | nifest Doc I              | No.           | 2. Page 1   | of                               | 9           | ,50          | /      |
|-----------------------|--|---------------------------|---|---------------------------|---------------|-------------|----------------------------------|-------------|--------------|--------|
|                       | 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEC                       | erator's Site Address (If d<br>DRGIA POWER PLAN |                           | ailing):      |             | st Number                        | 6739        | 9438         |        |
|                       | 241 RALPH MCGILL BLVD NE, E<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-50   |                           | CROSSGATE RD.<br>RT WENTWORTH, GA               | A 31407                   |               |             | B. State G                       | ienerator's | ID           |        |
|                       | 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | rading                    |   | Number  Number            |               |             | ransporter's IC<br>orter's Phone |             |              |        |
|                       | 9. Designated Facility Name and Site   | Address                   | 10. US EPA                                      | D Number                  |               |             | ransporter's ID<br>orter's Phone | )<br>       | 35.09631011  |        |
|                       | SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD   |                           |   |                           |               | G. State F  | acility ID<br>acility Phone      | 912-9       | 27-611       | 3      |
|                       | Savannah, GA 31419  11. Description of Waste Materials   |                           |   | 12. Co                    | ntainers      | 13. Total   | 14. Unit                         | nit         |              |        |
| G                     |  |                           |   | No.                       | Туре          | Quantity    | Wt./Vol.                         | I. M        | lisc. Commei | its    |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAM  WM Profile   |                           |   | 1                         | DI            | 18          |                                  |             |              |        |
| R<br>A                | b.   | # 3/3200GAKKA             | _   |                           |               |             |                                  |             |              |        |
| T<br>O<br>R           | CVI-II-ROS   | /M Profile #              |   |                           |               |             |                                  |             |              |        |
|                       | c.   |                           |   |                           | 2             |             |                                  |             |              |        |
| 448                   | d. W   | /M Profile #              | , j   |                           |               |             |                                  |             |              |        |
|                       |  | /M Profile #              |   |                           | allegia saile |             |                                  |             |              |        |
|                       | J. Additional Descriptions for Mater   | ials Listed Above         |   | K. Dispos<br>Cell<br>Grid | al Location   | MIL         | 0169                             | Level       | 61           |        |
|                       | 15. Special Handling Instructions and  | Additional Information    |   |                           |               | 1           | 1650                             |             |              |        |
| 0                     | Purchase Order # GPC1076029  | 3                         | EMERGENCY CO                                    | NTACT / PH                | ONE NO.:      |             |                                  |             |              |        |
|                       | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-describe accurately described, classified and particular than the control of th |                           |   |                           |               |             |                                  | ive been fu | lly and      |        |
|                       | Printed Name   |                           | Signature "On beha                              |                           |               |             |                                  | Month       | Day          | Year   |
| т                     | 17. Transporter 1 Acknowledgement  | of Receipt of Materials   |   |                           |               |             |                                  | 1           | 1            | 10     |
| T<br>R<br>A<br>N<br>S | Printed Name   |                           | Signature                                       | 41                        | 1 /           | 2.7         |                                  | Month       | Day          | Year   |
| P<br>O                | 18. Transporter 2 Acknowledgement  | of Receipt of Materials   | 1   | 1                         |               | 77.3        |                                  |             | 1            | 1      |
| RTER                  | Printed Name   |                           | Signature                                       | U                         |               |             |                                  | Month       | Day          | Year   |
| F<br>A<br>C           | 19. Certificate of Final Treatment/Dis   |                           | to the best of my knowl                         | edge. the at              | ove-descri    | bed waste w | vas managed ii                   | n complianc | ce with al   | VIA II |
| 1                     | applicable laws, regulations, permits a  | and licenses on the date  | es listed above.                                |                           |               |             |                                  |             |              |        |
| L                     | 20. Facility Owner or Operator: Certi  | fication of receipt of no |   | overed by th              | nis manifes   | t.          |                                  | 1,-         |              | 4      |
| Y                     | Printed Name   | L                         | Signature                                       | 1                         |               |             | The state of                     | Month (     | Day          | Year   |
| ī                     | White-TREATMENT, STORAGE, DISPO  | OSAL FACILITY COPY        | Blue- GENERATOR                                 | #2 COPY                   |               | Ye          | llow- GENERA                     | TOR #1 CO   | PY           |        |

Pink- FACILITY USE ONLY



Original Ticket# 1252114

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739439

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/09/2018 10:38:46

Out 05/09/2018 10:38:46

Scale

Inbound 1

Operator Ibejaran

Vehicle# JØ1

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

lbejaran

Gross

56160 lb 23340 1b

Tare Net

32820 lb

Tons 86.

Volume

16.41

Comments

### WASTE MANAGEMENT

| Pro | duct  | LD%    | Qty   | UOM  | Rate | Tax | Amount  | Origin   |
|-----|---|--------|-------|------|------|-----|---|--|
| -   | name large about stone stone stone these two- open sales these mine stone stone stone stone stone |        |       |      |      |     | COUNTY COURT THE ASSESS ASSESS ASSESS COURT WHEN THE STATE ASSESS ASSESS. | And they was after that this was more than the was and |
| 1   | COAL ASH & COAL   | CO 100 | 15.41 | Tons |      |     |   | PORTW  |

Total Tax fotal ficket



| 3. GG<br>GEC<br>2411<br>ATL<br>4. GG<br>5. Tr<br>7. Tr<br>9. DG<br>SUF<br>3000<br>Sav<br>G 11. 1<br>E a. C | ienerator's Mailing Address: ORGIA POWER I RALPH MCGILL BLVD NE, BIN#10221 LANTA, GA 30308-3374 ienerator's Phone 404-506-1365 ransporter 1 Company Name ransporter 2 Company Name Designated Facility Name and Site Address PERIOR LANDFILL D1 LITTLE NECK ROAD vannah, GA 31419  Description of Waste Materials | va   | dress (If diff<br>ER PLANT<br>E RD.<br>PRTH, GA<br>US EPA ID | 31407<br>Number  |                   | C. State Tr<br>D. Transpo<br>E. State Tr   | t Number  WNA  B. State G  ansporter's ID  orter's Phone  ansporter's ID |              |             | )        |  |  |
|--|---|--|--|------------------|-------------------|--|--|--------------|-------------|----------|--|--|
| 9. Do Sav  | ORGIA POWER I RALPH MCGILL BLVD NE, BIN#10221 LANTA, GA 30308-3374 Generator's Phone 404-506-1365 Transporter 1 Company Name  Designated Facility Name and Site Address PERIOR LANDFILL D1 LITTLE NECK ROAD Vannah, GA 31419  | GEORGIA POWE<br>155 CROSSGATE<br>PORT WENTWO | ER PLANT<br>ERD.<br>PRTH, GA<br>US EPA ID<br>US EPA ID       | 31407<br>Number  | ailing):          | C. State Tr D. Transpo E. State Tr   | B. State G ansporter's ID orter's Phone ansporter's ID                   | enerator's   |             |          |  |  |
| 9. Do SUF 3000 Sav   | ANTA, GA 30308-3374 Generator's Phone 404-506-1365 Fransporter 1 Company Name  Pesignated Facility Name and Site Address PERIOR LANDFILL D1 LITTLE NECK ROAD EVANDAN, GA 31419  | PORT WENTWO                                  | US EPA ID  | Number<br>Number |                   | D. Transpo   | ansporter's ID<br>orter's Phone<br>ansporter's ID                        |              | ID          |          |  |  |
| 7. Tr<br>9. Dr<br>SUF<br>300<br>Sav<br>11. I<br>E<br>R   | ransporter 1 Company Name ransporter 2 Company Name resignated Facility Name and Site Address PERIOR LANDFILL D1 LITTLE NECK ROAD vannah, GA 31419  | 8.   | US EPA ID  | Number           |                   | D. Transpo   | orter's Phone<br>ansporter's ID  |              |             |          |  |  |
| 9. Do<br>SUF<br>300<br>Sav<br>11. I  | Pesignated Facility Name and Site Address PERIOR LANDFILL D1 LITTLE NECK ROAD vannah, GA 31419  |  |  |                  |                   | D. Transpo   | orter's Phone<br>ansporter's ID  |              | arenes l    |          |  |  |
| 9. Do<br>SUF<br>300<br>Sav<br>11. I  | Pesignated Facility Name and Site Address PERIOR LANDFILL D1 LITTLE NECK ROAD vannah, GA 31419  |  |  |                  |                   | The state of the s |  |              |             |          |  |  |
| SUF<br>300<br>Sav<br>G 11.1<br>E a. C  | PERIOR LANDFILL<br>D1 LITTLE NECK ROAD<br>vannah, GA 31419  | 10.  | US EPA II  | ) Number         |                   | E. State Transporter's ID F. Transporter's Phone   |  |              |             |          |  |  |
| Sav<br>G 11.1<br>E a. C<br>N<br>E R  | vannah, GA 31419  |  |  |                  |                   | G. State F   | acility ID   |              |             |          |  |  |
| G 11. I<br>E a. C<br>N<br>E<br>R   |   |  |  |                  |                   | H. State Fa  | acility Phone  | 912-927-6113 |             | 3        |  |  |
| E a. C   | Description of Waste Materials  |  |  |                  |                   |  |  |              |             |          |  |  |
| N<br>E<br>R  |   |  |  | No.              | Type              | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.   | 1. M         | isc. Commen | its      |  |  |
| R  | COAL ASH& COAL CONTAMINATED WA  | STE  | -  | 501              | DT                | 18   |  |              |             |          |  |  |
|  | WM Profile # 3752000  | GAKRA  |  |                  |                   |  |  |              |             |          |  |  |
| д <b>b.</b><br>Т<br>О  |   |  |  |                  |                   |  |  |              |             |          |  |  |
| R  | WM Profile #  | T  |  |                  |                   |  |  |              |             |          |  |  |
| C.   | WM Profile #  |  |  |                  |                   |  |  |              |             |          |  |  |
| d.   | WIVI Profile #  |  |  |                  |                   | and a second of  |  |              |             | <u> </u> |  |  |
|  |   |  |  |                  |                   |  |  |              |             |          |  |  |
|  | WM Profile #<br>Additional Descriptions for Materials Listed Ab   | ove  |  | K. Dispos        | l<br>sal Location |  |  |              |             | ~        |  |  |
|  |   |  |  | Cell             | 1                 | 32   | 1124   | Level        | 61          | (A)      |  |  |
| 15.  | Special Handling Instructions and Additional Int  | ormation                                     |  | Grid             |                   |  | 161  | 1            |             | -        |  |  |
| Pur  | rchase Order # GPC10760293  | EMERO  | GENCY CON  | NTACT / PH       | ONE NO.:          |  |  |              |             |          |  |  |
|  | GENERATOR'S CERTIFICATE: ereby certify that the above-described materials   | are not hazardous wast                       | es as defin  | ed by CFR I      | Part 261 or       | any applicabl  | e state law, ha  | ave been fu  | Ily and     |          |  |  |
| acc  | curately described, classified and packaged and a   | re in proper condition for                   | or transpor  | tation acco      | ording to ap      | plicable regu  | lations.   |              |             | Veer     |  |  |
| Prin   | nted Name   | Signature                                    | "On behal  | t ot"            |                   |  |  | Month        | Day         | Year     |  |  |
| т 17.  | Transporter 1 Acknowledgement of Receipt of   | Materials                                    |  | in Mary          |                   | a T  | 13/1/  | -            | 1           | 4 (      |  |  |
| R<br>A<br>N  | Printed Name  | Signature                                    | 'el  | (                | en                | _/   |  | Month        | Day         | Year /   |  |  |
| s X  | . Transporter 2 Acknowledgement of Receipt of   | Materials                                    |  |                  |                   | 1  |  |              |             | 7 1      |  |  |
|  | Printed Name  | Signature                                    |  |                  |                   |  |  | Month        | Day         | Year     |  |  |
| 19.  | . Certificate of Final Treatment/Disposal ertify, on behalf of the above listed treatment fa  | cility, that to the best of                  | my knowle  | edge. the a      | bove-descr        | bed waste v  | vas managed i  | n complian   | ce with a   | H        |  |  |
| c app  | plicable laws, regulations, permits and licenses of   | on the dates listed above                    | ,  | , , , , , ,      |                   | yeura maaanaa 3  |  |              |             |          |  |  |
| 20.  | . Facility Owner or Operator: Certification of re-  | ceipt of non-hazardous r                     | materjáls co   | overed by t      | his manifes       | t.   |  | 1            | /           | 11       |  |  |
| 1 1  | Printed Name  | Signature                                    |  | 1                |                   | 12/2   |  | Month        | /Day/       | Year     |  |  |
| T<br>Y   |   |  | ENERATOR   | 11               | 1                 |  | ellow- GENERA  | 1)           |             | V        |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1252153

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Manifest 6739440

Destination

Generator

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/09/2018 11:57:59 In

Out 05/09/2018 11:57:59

Scale

Operator lbejaran Inbound 1

1be jaran

Gross Tare

55320 16 21520 lb

33800 lb Net 16.90 Tons

Comments

### WASTE MANAGEMENT

Vehicle# J12

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

| Product            | LD%            | Qty     | UOM      | Rate | Tax                        | Amount                     | Origin |
|--------------------|----------------|---------|----------|------|----------------------------|----------------------------|--------|
|                    | 4 7 70 7 5 5 5 |         | 20114449 |      | = 10 0 0 0 0 0 0 0 0 0 0 0 | gradulation and Artificial |        |
| t can usat & con c |                | 14, 900 | 1 (1)11. |      |                            |                            | 141414 |

Total Tax fotal ficket



| 7                          | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                 |   | Manifest Doc N   | lo.              | 2. Page 1             | of  | 11.05            |            |      |
|----------------------------|--|---|---|------------------|------------------|-----------------------|---|------------------|------------|------|
|                            | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, I  | Gene<br>GEO<br>BIN#10221 155                          | erator's Site Addres<br>DRGIA POWER P<br>CROSSGATE RD | LANT KRAFT       | ailing):         | 3447732333            | st Number  MNA  B. State G                          | 6739             |            | His  |
|                            | ATLANTA, GA 30308-3374 4. Generator's Phone 404-50 5. Transporter 1 Company Name 7. Transporter 2 Company Name             | 06-1365   |   | PA ID Number     |                  | D. Transp             | ransporter's ID<br>orter's Phone<br>ransporter's ID |                  |            |      |
|                            | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419                   | Address   | 10. US  | EPA ID Number    |                  | F. Transpo            | orter's Phone                                       |                  | 27-6113    |      |
| G<br>E                     | 11. Description of Waste Materials a. COAL ASH& COAL CONTAM  | INATED WASTE  |   | No.              | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.                                | I. Mi            | sc. Commen | ts   |
| N<br>E<br>R                |  | # 375200GAKRA   |   | 215              | DI.              | 18                    |   |                  |            |      |
| A<br>T<br>O<br>R           | b.<br>V  | /M Profile #  |   |                  |                  |                       |   |                  |            |      |
|                            |  | /M Profile #  | yan yan   | - 10 mm          |                  |                       |   |                  |            |      |
|                            |  | VM Profile #  |   | V Disease        | sal Location     |                       |   |                  |            |      |
|                            | J. Additional Descriptions for Mater   | riais Listed Above                                    |   | Cell<br>Grid     | A A              | 32                    | ) 124,  | Level            | G1         | 76 N |
|                            | 15. Special Handling Instructions and  | I Additional Information                              |   |                  |                  |                       | 1610  |                  |            |      |
|                            | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr                            |   | -   | Y CONTACT / PH   |                  | any applicab          | le state law, h                                     | ave been ful     | lly and    |      |
|                            | Printed Name  17. Transporter 1 Acknowledgemen   | ackaged and are in prop                               | per condition for tra<br>Signature "On                | nsportation acco | ording to ap     | oplicable regu        | ulations.   | Month 5          | Day        | Year |
| T<br>R<br>A<br>N<br>S<br>P | Printed Name  18. Transporter 2 Acknowledgemen   | hubert  | Signature   | TAME             | Sh               | chE                   | nT  | Month            | Day        | Year |
| R<br>T<br>E<br>R           | Printed Name   |   | Signature   |                  |                  |                       | 1   | Month            | Day        | Year |
| F<br>A<br>C                | 19. Certificate of Final Treatment/Di<br>I certify, on behalf of the above lister<br>applicable laws, regulations, permits | d treatment facility, that<br>and licenses on the dat | es listed above.                                      |                  |                  |                       | was managed i                                       | in compliand     | ce with al |      |
| I<br>T<br>Y                | 20. Facility Owner or Operator: Cer<br>Printed Name  | 405   | Signature   | ATOR #2 COPY     | nis manifes      |                       | ellow- GENERA                                       | Month ATOR #1 CO | Day        | Year |

Pink- FACILITY USE ONLY



Original Ticket# 1252152

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC Volume Vehicle# JØ7

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739441

Destination

[3]]

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/09/2018 11:55:38

Out 05/09/2018 11:55:38

Scale

Inbound 1 RENEE

RENEE

Operator

Container

Billing # 0001037

Gen EPA ID NR

Driver Check#

Gross Tare

52260 lb 21940 lb 30320 16

Net 15, 16 Tons

Comments

### WASTE MANAGEMENT

| Product              | LD% | Qty       | LIOM | Rate     | Tax                      | Amount        | Origin                       |
|----------------------|-----|-----------|------|----------|--------------------------|---------------|------------------------------|
|                      |     | METERSES. |      | ******** | · 医图 3 年 4 日 1 日 1 日 1 日 | 2222444 F 100 | N + N 1X 18 18 1 1 1 1 1 1 1 |
| 1 COAL ASH & COAL CO |     | 15. 16    | Tons |          |                          |               | POOLER                       |

Total Tax fobal fields



| WASTE MANAGEMENT   |   |  | 12                                 |                         | Falls a  |                                  |                     |          |  |  |
|--|---|--|------------------------------------|-------------------------|--|----------------------------------|---------------------|----------|--|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                     |  | anifest Doc No.                    | 2. Page 1 of            |  |                                  |                     |          |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE   | GEO   | rator's Site Address (If o<br>RGIA POWER PLAN<br>CROSSGATE RD. |                                    | ng):                    | A. Manifes   | MNA                              | 6739441             |          |  |  |
| ATLANTA, GA 30308-3374   |   | T WENTWORTH, G   | A 31407                            |                         |  | B. State G                       | Generator's ID      |          |  |  |
| 5. Transporter 1 Company Name  | ratina  | 6. US EPA I  | D Number                           |                         | A COLUMN TO THE REAL PROPERTY OF THE PERTY O | ransporter's ID<br>orter's Phone | )                   |          |  |  |
| 7. Transporter 2 Company Name /  |   | 8. US EPA I  | D Number                           |                         |  | ansporter's ID<br>orter's Phone  |                     |          |  |  |
| 9. Designated Facility Name and Si<br>SUPERIOR LANDFILL  | te Address  | 10. US EPA   | ID Number                          |                         | G. State Fa  |                                  | 912-927-61          | 12       |  |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |   |  |                                    |                         | H. State F   | acility Phone                    | 912-927-01          | 13       |  |  |
| G 11. Description of Waste Materials   |   |  | No.                                | Type                    | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.             | I. Misc. Comm       | nents    |  |  |
| a. COAL ASH& COAL CONTAI   |   |  | 507                                | DI                      | 17   |                                  |                     |          |  |  |
| R WM Profi   | le# 375200GAKRA   |  |                                    |                         |  |                                  |                     |          |  |  |
| T O R  | WM Profile #  |  |                                    |                         |  |                                  |                     |          |  |  |
| C.   | NAME DO STORE A   |  |                                    |                         |  |                                  |                     |          |  |  |
| d.   | WM Profile #  |  |                                    |                         |  |                                  |                     |          |  |  |
|  | WM Profile #  | The state of   |                                    |                         |  |                                  |                     |          |  |  |
| J. Additional Descriptions for Ma  | terials Listed Above                                      |  | K. Disposal  Cell  Grid            | Location                | 3201   | 19                               | Level (             |          |  |  |
| 15. Special Handling Instructions a  | nd Additional Information                                 |  |                                    |                         | M  | 654                              |                     |          |  |  |
| Purchase Order # GPC10760  | 293   | EMERGENCY C  | ONTACT / PHOI                      | NE NO.:                 |  |                                  |                     |          |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and  | cribed materials are not h                                | nazardous wastes as def  | ined by CFR Par<br>ortation accord | rt 261 or<br>ding to ap | any applicab   | le state law, h<br>ulations.     | nave been fully and |          |  |  |
| Printed Name   |   | Signature "On bel  | nalf of"                           |                         |  |                                  | Month Day           | Year / 8 |  |  |
| T 17. Transporter 1 Acknowledgement Acknowledg | ent of Receipt of Materials                               | Signature  | Sah                                | oll                     |  |                                  | Month Day           | Year /   |  |  |
| 18. Transporter 2 Acknowledgem   | ent of Receipt of Material                                |  |                                    |                         |  |                                  | Month Day           | Year     |  |  |
| Printed Name   |   | Signature  |                                    |                         |  |                                  |                     |          |  |  |
| 19. Certificate of Final Treatment, I certify, on behalf of the above lis applicable laws, regulations, perm   | ted treatment facility, tha<br>its and licenses on the da | tes listed above.  |                                    |                         |  | was managed                      | in compliance with  | n all    |  |  |
| 20. Facility Owner or Operator: C  | ertification of receipt of n                              | on-hazardous materials<br>Signature                            | covered by thi                     | is manife               | st.  |                                  | Month Da            | / Cygar  |  |  |
| White- TREATMENT, STORAGE, D   | SPOSAL FACILITY COPY                                      | Blue- GENERATO   | OR #2 COPY                         |                         | Y  | 'ellow- GENER                    | RATOR #1 COPY       |          |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1252157

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Cute

Manifest 6739442

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/09/2018 12:05:50

Out 05/09/2018 12:05:50

Scale Inbound 1

Operator lbejaran

Vehicle# J04

(sen 119) 1) NR

Billing # 0001037

Container

Driver

Check#

1be jaran

Gross Tare Net

58180 16 23800 lb

34380 lb Tons 17.19

Comments

### WASTE MANAGEMENT

| Pro   | duct               | LD% | Qty   | UOM  | Rate | Tax | Amount | Origin |
|-------|--------------------|-----|---|------|------|-----|--------|--------|
| ***** |                    |     | a clear mode stres even other blue team versi and o |      |      |     |        |        |
| 1     | COAL ASH & COAL CO | 100 | 17.19   | Tons |      |     |        | PORTW  |

Total Tax fohal floket



|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA                                  |  | nifest Doc I | Vo.           | 2. Page 1                | of                               | 11'            | 16           |  |
|------------------|---|--|--|--------------|---------------|--------------------------|----------------------------------|----------------|--------------|--|
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, I   | GEO  | rator's Site Address (If di<br>RGIA POWER PLAN'<br>CROSSGATE RD. |              | ailing):      |                          | st Number  MNA  B. State G       | 67394          | 42           |  |
|                  | ATLANTA, GA 30308-3374 4. Generator's Phone 404-50  | POR<br>06-1365   | T WENTWORTH, GA  | 31407        |               |                          |                                  |                |              |  |
|                  | 5. Fransporter 1 Company Name 7. Transporter 2 Company Name   | ading  | US EPA ID   US EPA ID  |              |               |                          | ransporter's ID<br>orter's Phone |                |              |  |
|                  | 9. Designated Facility Name and Site  | Address  | 10. US EPA I   | D Number     | - 111         | The second second second | ransporter's ID<br>orter's Phone |                |              |  |
|                  | SUPERIOR LANDFILL 3001 LITTLE NECK ROAD   | Address  | 10.  | o manuel     |               | G. State F               | acility ID<br>acility Phone      | 912-92         | 912-927-6113 |  |
|                  | Savannah, GA 31419  |  |  | 12. Co       | intainers     | 13, Total                | 14. Unit                         |                |              |  |
| G<br>E<br>N      | 11. Description of Waste Materials a. COAL ASH& COAL CONTAM   | INATED WASTE   |  | No.          | Туре          | Quantity                 | Wt./Vol.                         | I. Misc.       | Comments     |  |
| E<br>R           |   | # 375200GAKRA  |  | 101          |               |                          |                                  | las mails      |              |  |
| A<br>T<br>O<br>R | b.<br>V   | /M Profile #   |  |              |               |                          |                                  |                |              |  |
|                  | c.  | /M Profile #   |  |              |               |                          |                                  |                |              |  |
|                  | d.  |  |  |              |               |                          |                                  |                |              |  |
|                  | J. Additional Descriptions for Mate   | VM Profile #<br>rials Listed Above                     |  | K. Dispo     | sal Location  | 320                      | 124                              | Level 🕢        | J            |  |
|                  | 15. Special Handling Instructions and   | l Additional Information                               |  |              | (             | M                        | 163L                             | *              |              |  |
|                  | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr   | ibed materials are not ha                              | EMERGENCY CO   | ed by CFR    | Part 261 or a | any applicab             | le state law, ha                 | ave been fully | and          |  |
| Т                | accurately described, classified and printed Name  17. Transporter 1 Acknowledgemen   |  | Signature "On beha   | If of"       | ording to ap  | рисаріе геді             | diations.                        | Month          | Day Year     |  |
| T R A N S P O    | Printed Name  18. Transporter 2 Acknowledgemen  | ring   | Signature  | Ju           | L,            | Joan                     | 7                                | Month 5        | Day Year     |  |
| R<br>T<br>E<br>R | Printed Name  |  | Signature  |              |               |                          |                                  | Month          | Day Year     |  |
| F A C I I        | 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits<br>20. Facility Owner or Operator: Cer | d treatment facility, that<br>and licenses on the date | es listed above.   |              |               | PL-UZ                    | was managed i                    | n compliance   | with all     |  |
| L<br>T<br>Y      | 20. Facility Owner or Operator: Cer<br>Printed Name   | 1  | Signature  Blue- GENERATOR                                       | A            | uns mannes    |                          | ellow- GENERA                    | Month COP      | Day Year     |  |

Pink- FACILITY USE ONLY



Original Ticket# 1252185

Volume

Customer Name GEORGIAPOWE375200GAKRA GEDRGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Manifest 6739443

Destandion PO

Profile

Denerator

375 COMMERCIAN (LEGAL AST) & COOL (CONTAR) MOTED WORLD

188 OCOROTORNAZAT GERBOTO SORER DE DOLG KROEF.

Time

In 05/09/2018 12:46:59

Out 05/09/2018 12:46:59

Scale

Inbound 1

Operator lbejaran.

1 be jaran

Vehicle# J01

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Tare Net Tons

Gross

54760 1b 23340 lb

31420 lb 15.71

Comments

Product LD% Qty UOM Rate Tax Amount Origin COAL ASH & COAL CO 100 15.71 Tons POOLER

> Total Tax fotal fleket



|   | WASTE MANAGEMENT  |  |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
|---|---|--|-----------------|--|--------------------|---------------|------------|---------------------------|--|--------------------|-------------|-----------------------|--|--|
|   | NON-HAZARDOUS MANIFEST  | 1. Generator's U   | JS EPA<br>N / A |  | Manifest Doc       | No.           |            | 2. Page 1                 | of                                       | 11                 | , 3_        | 7                     |  |  |
|   | 3. Generator's Mailing Address:<br>GEORGIA POWER  |  |                 | rator's Site Address (<br>RGIA POWER PLA |                    | ailing):      |            |                           | st Number                                | 6739               | 9443        |                       |  |  |
|   | 241 RALPH MCGILL BLVD NE, B   | IN#10221   | 155             | CROSSGATE RD.                            |                    |               |            |                           | 200200103000                             | l<br>Generator's   | ID          | erat be               |  |  |
|   | ATLANTA, GA 30308-3374  |  | POR             | T WENTWORTH,                             | GA 31407           |               |            |                           | D. State (                               | Jenerator S        | טו          |                       |  |  |
|   | 4. Generator's Phone 404-50   | 6-1365   |                 |  |                    |               |            |                           |  | 1                  |             |                       |  |  |
|   | 5. Transporter 1 Company Name   | 1  |                 | 6. US EPA                                | ID Number          |               |            | C State T                 | rancoartaria II                          |                    |             |                       |  |  |
|   | ( 095461 G  | radial   | A               |  |                    |               |            |                           | ransporter's IE<br>orter's Phone         | )                  |             |                       |  |  |
|   | 7. Transporter 2 Company Name   |  | T               | 8. US EPA                                | ID Number          |               |            |                           |  |                    |             |                       |  |  |
| 0   |   |  | /               |  |                    |               |            | E. State Transporter's ID |  |                    |             |                       |  |  |
|   | 9. Designated Facility Name and Site A  | Address  | 7               | 10. US EP                                | A ID Number        |               | 78         | F. Transporter's Phone    |  |                    |             |                       |  |  |
|   | SUPERIOR LANDFILL   |  |                 |  |                    |               |            | G. State F                | acility ID                               |                    |             |                       |  |  |
| 4   | 3001 LITTLE NECK ROAD   |  |                 |  |                    |               |            | H. State F                | acility Phone                            | 912-9              | 927-611     | 3                     |  |  |
|   | Savannah, GA 31419  |  |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
|   |   |  |                 |  | 12 Co              | ntainers      |            | 13. Total                 | 14. Unit                                 |                    |             | To state in           |  |  |
| G   | 11. Description of Waste Materials  |  |                 |  | No.                | Ту            |            | Quantity                  | Wt./Vol.                                 | I. N               | lisc. Comme | nts                   |  |  |
| E   | a. COAL ASH& COAL CONTAMIN  | NATED WASTI  | E               |  |                    | 1             | /          | 17                        |  |                    |             |                       |  |  |
| E   |   |  |                 |  | 101                |               |            | 18                        | 4839000000000000000000000000000000000000 |                    |             | TO THE REAL PROPERTY. |  |  |
| R<br>A  | b. WM Profile #   | 375200GA   | KRA             |  |                    |               |            |                           | julijungsilijung et.                     |                    |             |                       |  |  |
| T   |   |  |                 |  |                    |               |            |                           |  | DE I               |             |                       |  |  |
| 0   | WN  | // Profile #   |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
| R   | ¢. 17   | c.   |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
|   |   |  |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
|   | d.  | WM Profile #   |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
|   | d.  |  |                 |  |                    |               |            |                           |  | 4                  |             |                       |  |  |
|   |   | de Estate de la companya de la comp |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
|   | J. Additional Descriptions for Materia  | /I Profile #<br>als Listed Above   |                 |  | K. Dispos          | alloca        | ation      |                           |  |                    |             |                       |  |  |
|   |   |  |                 |  | 0,000              |               | 1          | 1714                      | 109                                      |                    | 1es         | )                     |  |  |
|   |   |  |                 |  | Cell               |               |            | Duy.                      | 40                                       | Level              |             |                       |  |  |
|   | 15. Special Handling Instructions and A   | Additional Inform  | ation           |  | Grid               | 1             | 1          | XIL                       | ,50                                      |                    |             |                       |  |  |
|   |   |  |                 |  |                    | 1             | 1          |                           |  |                    |             |                       |  |  |
|   |   | 4 7 7  |                 | N. Well-                                 |                    |               |            |                           |  |                    |             |                       |  |  |
|   | Purchase Order # GPC10760293  |  |                 | EMERGENCY C                              | ONTACT / PH        | ONE N         | 0.:        |                           |  |                    | 100         |                       |  |  |
|   | 16. GENERATOR'S CERTIFICATE:  |  |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
|   | I hereby certify that the above-describe<br>accurately described, classified and page                           |  |                 |  |                    |               |            |                           |  | ive been fu        | lly and     |                       |  |  |
|   | Printed Name  | ckageu anu are n   | i prope         | Signature "On bel                        |                    | ruing (       | o app      | ilicable regu             | iations.                                 | Month              | Day         | Year                  |  |  |
|   | BFILIPOUICE   |  |                 | BR                                       |                    |               |            |                           |  | K                  | 9           | 18                    |  |  |
| T<br>R  | 17. Transporter 1 Acknowledgement o   | f Receipt of Mate  | erials          |  | 17                 | _             |            | /                         |  | THE REAL PROPERTY. |             |                       |  |  |
| T<br>R<br>A<br>N  | Printed Name  | m  |                 | Signature                                | -                  | 1             |            | /                         |  | Month              | Day         | Year                  |  |  |
| S<br>P<br>O   | 18. Transporter 2 Acknowledgement o   | of Receipt of Mate   | erials          | X  |                    |               |            | /                         |  | 0                  |             | 18                    |  |  |
| R   | Printed Name  | Signature  |                 |  |                    | 1             |            | Month                     | Day                                      | Year               |             |                       |  |  |
| R<br>T<br>E<br>R  |   |  |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
|   | 19. Certificate of Final Treatment/Disp   | incal  |                 |  |                    |               |            |                           |  |                    |             |                       |  |  |
| F   | The production of the control of the | vledge, the ab   | ove-d           | escrih                                   | ed waste w         | as managed ir | n complian | ce with al                |  |                    |             |                       |  |  |
| I certify, on behalf of the above listed treatment facility, that to the best of my knowled applicable laws, regulations, permits and licenses on the dates listed above. |   |  |                 |  |                    |               |            |                           |  | 2-0.P.((4))        |             |                       |  |  |
| L   | 20. Facility Owner or Operator: Certifi   | cation of receipt  | of nor          | n-hazardous materials                    | covered by the     | nis mai       | nifest.    |                           |  |                    |             | 11 00                 |  |  |
| Y   | Printed Name  | M)   |                 | Signature                                | ire Month Day Yesh |               |            |                           |  | Year               |             |                       |  |  |
| 1   | White- TREATMENT, STORAGE, DISPOS   | SAL FACILITY COR   | ov.             | Blue- GENERATO                           | R #2 COPY          |               |            | Vo                        | llow- GENERA                             | TOR#1 CO           | PV PV       |                       |  |  |
|   | VVIIICE INCATIVIENT, STURAGE, DISPUS  | OLI MULLI I LUP  | 100             | DIRECTOLINEDALL                          | IN THE CULT        |               |            | 16                        | HOW GLIVENA                              | CHATCO             | and M       |                       |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1252188

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018 Payment Type Credit Account

Manual Ticket#

Hauling Ticket#

Route

State Waste Code

Manifest 6739444

Destination

Generator

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/09/2018 12:50:59

Out 05/09/2018 12:50:59

Scale

Inbound 1

Operator lbe jaran

Vehicle# J06

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

lbejaran

Gross Tare

55520 16 22980 16

32540 1b Net 16.27 Tons

Comments

### WASTE WANAGEMENT

| Pro                | duct              | LD%    | Qty   | UDM  | Rate | Tax | Amount  | Origin |
|--------------------|-------------------|--------|-------|------|------|-----|---|--------|
| salese about pasts |                   |        |       |      |      |     | and regard whose depart artists many more allows where earlied brane bearing many |        |
| 1                  | COAL ASH & COAL C | 00 100 | 16.27 | Tons |      |     |   | POOLER |

Total Tax Pabal Ticket

403WM



# WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA                               |  | nifest Doc No.          | 2. Page 1 of                         | f  | 19.01               |  |  |  |
|---|---|--|-------------------------|--------------------------------------|--|---------------------|--|--|--|
| 3. Generator's Mailing Address: GEORGIA POWER   | GEC   | erator's Site Address (If di<br>DRGIA POWER PLAN |                         | A. Manifest                          | Number   | 6739444             |  |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5   |   | CROSSGATE RD.<br>IT WENTWORTH, GA                | A 31407                 |                                      | B. State G                                       | Generator's ID      |  |  |  |
| 5. Transporter 1 Company Name   | radina  | 6. US EPA ID                                     |                         |                                      | C. State Transporter's ID D. Transporter's Phone |                     |  |  |  |
| 7. Transporter 2 Company Name   9. Designated Facility Name and Site  | Address   | 8. US EPA ID                                     |                         |                                      | E. State Transporter's ID F. Transporter's Phone |                     |  |  |  |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  | Audress   | IU. USEPAT                                       | D Number                | G. State Fac                         |  | 912-927-6113        |  |  |  |
| Savannah, GA 31419  |   |  |                         |                                      |  |                     |  |  |  |
| G 11. Description of Waste Materials  |   |  | 12. Containers No. Type | 13. Total<br>Quantity                | 14. Unit<br>Wt./Vol.                             | I. Misc. Comments   |  |  |  |
| a. COAL ASH& COAL CONTAM  | # 375200GAKRA                                       | 5  | OGDT                    | 18                                   |  |                     |  |  |  |
| A <b>b</b> .  | # 3/3200GARRA                                       |  |                         |                                      |  |                     |  |  |  |
| T<br>O  | VM Profile #  |  |                         |                                      |  |                     |  |  |  |
| R c.  | vivi Frome #  | -  |                         |                                      |  |                     |  |  |  |
| V   | /M Profile #  |  |                         | 4                                    |  |                     |  |  |  |
| J. Additional Descriptions for Mater  | VM Profile #<br>rials Listed Above                  |  | K. Disposal Location    | V3201                                | 77   | Level 65            |  |  |  |
| 15. Special Handling Instructions and   | Additional Information                              |  |                         | 1)16                                 | 1  |                     |  |  |  |
| Purchase Order # GPC1076029   | 93  | EMERGENCY CON                                    | NTACT / PHONE NO.:      |                                      |  |                     |  |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and p                   | bed materials are not ha<br>ackaged and are in prop | er condition for transpor                        | tation according to a   | r any applicable<br>pplicable regula | state law, ha<br>tions.                          |                     |  |  |  |
| Printed Name B+1/1pourch  |   | Signature "On behal                              | 101                     |                                      |  | Month Day Year      |  |  |  |
| 17. Transporter 1 Acknowledgement   | 1   | Signature  | 14m                     |                                      |  | Month Day Year      |  |  |  |
| 7 18. Transporter 2 Acknowledgement<br>Printed Name   | of Receipt of Materials                             | Signature  |                         |                                      |  | Month Day Year      |  |  |  |
| 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | treatment facility, that                            |  | edge, the above-desc    | ribed waste was                      | s managed in                                     | compliance with all |  |  |  |
| 20. Facility Owner or Operator: Cert<br>Printed Name  | ification of receipt of no                          | n-hazardous materials co                         | overed by this manife   | est.                                 |  | Month Day Year      |  |  |  |
|   |   |  | 1                       |                                      |  | 1/10                |  |  |  |
| White- TREATMENT, STORAGE, DISPO<br>Pink- FACILITY USE O  |   | Blue- GENERATOR :<br>Gold- TRANSPORTER           |                         | Yello                                | ow- GENERA                                       | TOR #1 COPY         |  |  |  |



Superior Landfill 3001 Little Neck Rd Savaimali, 60, 30419 Phis (9)(4) 967- (3)(3)

Original Ticket# 1252214

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type through therough

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739445

Destination

Production.

SZEWENKEN (THE NEED & LOUIS CONTINUENCED RESERVE

TOS DEDRO (NEBRURAT DEDRO) (A POBER - PENMY KROFF

Time

05/09/2018 13:35:44 Out 05/09/2018 13:35:44

Scale Inbound 1

Operator 1bejaran Ibejaran

Vehicle# J12

Sen 1177 ID NR

Billing # 0001037

Driver

Check#

Gross Tare Net

Volume

52300 15 21520 16 30780 15

Tons 15.39

Comments

Product. MINI (M.) VAG Characterist. PORTW

COAL ASH & COAL CO 100

15.39 Tons

Tidad Tax



|   |  |  |  | 3/-  |                           |  |                      |  |  |
|---|--|--|--|--|---------------------------|--|----------------------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA  |  | inifest Doc No.  | 2. Page 1 o  | of                        | 12.5   | 33                   |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | The second secon | erator's Site Address (If d<br>ORGIA POWER PLAN  |  |  | st Number<br>MNA          | 6739445                                      |                      |  |  |
| 241 RALPH MCGILL BLVD NE,   | BIN#10221 155  | CROSSGATE RD.  |  |  | B. State Generator's ID   |  |                      |  |  |
| ATLANTA, GA 30308-3374  | POI  | RT WENTWORTH, G.   | A 31407  |  |                           |  |                      |  |  |
| 4. Generator's Phone 404-5  | 506-1365   |  |  |  |                           |  |                      |  |  |
| 5. Transporter 1 Company Name   | 1  | 6. US EPA II   | Number   |  |                           |  |                      |  |  |
| 12051/1   | not no   |  |  |  | C. State Transporter's ID |  |                      |  |  |
| 0421010   | 100119   | 8. US EPA II   | D. Franspe   | orter's Phone  |                           |  |                      |  |  |
| 7. Transporter 2 Company Name   |  | a. OSEFAII   | ) (Mulliber  | E. State Ti  | ansporter's ID            |  |                      |  |  |
|   |  |  | F. Transpo   | orter's Phone  |                           |  |                      |  |  |
| 9. Designated Facility Name and Sit   | e Address  | 10. US EPA   |  |  |                           |  |                      |  |  |
| SUPERIOR LANDFILL   |  |  |  |  |                           |  |                      |  |  |
| 3001 LITTLE NECK ROAD   |  |  | H. State F   | acility Phone  | 912-927-6                 | 113  |                      |  |  |
| Savannah, GA 31419  |  | ATHER DRIVE  |  |  |                           |  |                      |  |  |
|   |  |  | 12. Containers   | 12 7-1-1   | 14. Unit                  |  |                      |  |  |
| 11. Description of Waste Materials  |  |  | No. Type   | 13. Total Quantity   | Wt./Vol.                  | I. Misc. Com                                 | ments                |  |  |
| a. COAL ASH& COAL CONTAIN   | MINATED WASTE  |  |  | 1 157  |                           |  | * ! - !              |  |  |
|   |  | No.  | 717 1  | 110  |                           |  |                      |  |  |
| WM Profil   | e# 375200GAKRA   |  |  |  |                           |  |                      |  |  |
| b.  |  |  |  |  |                           |  |                      |  |  |
|   |  |  |  |  |                           |  |                      |  |  |
|   | WM Profile #   | The state of the state of  |  |  |                           |  |                      |  |  |
| C)  |  |  |  |  |                           |  |                      |  |  |
|   |  |  |  |  |                           |  |                      |  |  |
|   | WM Profile #   |  |  | hirti perencental  |                           |  |                      |  |  |
| d.  |  |  |  |  |                           | 100  |                      |  |  |
|   |  |  |  |  |                           |  |                      |  |  |
|   |  |  |  |  | 96.00                     |  |                      |  |  |
|   | WM Profile #   |  | K Disposal Loss  | tion   |                           |  | -                    |  |  |
| J. Additional Descriptions for Mat  | AND COUNTY OF A SECURITION OF THE SECURITION OF  |  | K. Disposal Loca   | tion   | 10.                       | 1  |                      |  |  |
|   | AND COUNTY OF A SECURITION OF THE SECURITION OF  |  | K. Disposal Loca   | tion   | 125                       | Level 6                                      | )                    |  |  |
|   | AND COUNTY OF A SECURITION OF THE SECURITION OF  |  |  | tion 137   | 3125                      | Level 4                                      | )                    |  |  |
|   | erials Listed Above  | n  | Cell   | tion<br>N37  | 125                       | Level 4                                      | >                    |  |  |
| J. Additional Descriptions for Mat  | erials Listed Above  | n  | Cell   | tion 37  | 125                       | Level (                                      |                      |  |  |
| J. Additional Descriptions for Mat  | erials Listed Above  |  | Cell<br>Grid   | N32  | 125                       | Level (P)                                    | >                    |  |  |
| J. Additional Descriptions for Mat  | e <b>rials Listed Above</b><br>nd Additional Informatio  |  | Cell   | N32  | 125                       | Level (P)                                    | )                    |  |  |
| J. Additional Descriptions for Mat  15. Special Handling Instructions an  Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:  | erials Listed Above  nd Additional Informatio  | EMERGENCY CO   | Cell Grid  ONTACT / PHONE NO   | N37  | 125                       |  |                      |  |  |
| J. Additional Descriptions for Mat  15. Special Handling Instructions an  Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriptions for Material Section 1.   | nd Additional Informatio   | EMERGENCY CO   | Cell Grid  DNTACT / PHONE Notes that the contract of the contr | D.:  | le state law, h           |  | d                    |  |  |
| J. Additional Descriptions for Material Section 15. Special Handling Instructions and Purchase Order # GPC107602 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description of the section | nd Additional Informatio   | EMERGENCY CO<br>hazardous wastes as defi<br>oper condition for transp  | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, hulations.  | nave been fully an                           |                      |  |  |
| J. Additional Descriptions for Mate 15. Special Handling Instructions and Purchase Order # GPC107602 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description described, classified and Printed Name  | nd Additional Informatio   | EMERGENCY CO   | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, h           |  |                      |  |  |
| J. Additional Descriptions for Material Section 15. Special Handling Instructions and Purchase Order # GPC107602 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description of the printed Name Printed Name  | nd Additional Information  293  cribed materials are not I   | hazardous wastes as defi<br>pper condition for transp<br>Signature "On beh   | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, h           | nave been fully an                           |                      |  |  |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme   | nd Additional Information  293  cribed materials are not I   | hazardous wastes as defi<br>pper condition for transp<br>Signature "On beh   | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, hulations.  | nave been fully an                           | y Year               |  |  |
| J. Additional Descriptions for Material Section 15. Special Handling Instructions and Purchase Order # GPC107602 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description of the printed Name Printed Name  | nd Additional Information  293  cribed materials are not I   | hazardous wastes as defi<br>oper condition for transp<br>Signature "On beh   | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, h           | nave been fully and                          | y Year               |  |  |
| J. Additional Descriptions for Mat  15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descripted described, classified and Printed Name  17. Transporter 1 Acknowledgemee Printed Name   | nd Additional Information 293 cribed materials are not I packaged and are in processor of Receipt of Material  | EMERGENCY CO hazardous wastes as defi oper condition for transp Signature "On beh ls Signature   | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, h           | Month Da                                     | y Year               |  |  |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgemee Printed Name   | nd Additional Information 293 cribed materials are not I packaged and are in processor of Receipt of Material  | EMERGENCY CO hazardous wastes as defi oper condition for transp Signature "On beh ls Signature   | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, h           | nave been fully and                          | y Year               |  |  |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descracturately described, classified and Printed Name  17. Transporter 1 Acknowledgeme  Printed Name  18. Transporter 2 Acknowledgemee  | nd Additional Information 293 cribed materials are not I packaged and are in processor of Receipt of Material  | hazardous wastes as defiper condition for transp Signature "On beh   | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, hulations.  | Month Da                                     | y Year               |  |  |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name   | nd Additional Information 293 cribed materials are not I packaged and are in product of Receipt of Material and of Receipt of Material and of Receipt of Material  | hazardous wastes as defiper condition for transp Signature "On beh   | Cell Grid  ONTACT / PHONE Note that the content of  | D.:  | le state law, hulations.  | Month Da                                     | y Year               |  |  |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment/  | nd Additional Information 293 cribed materials are not I packaged and are in proceeding the process of the proc | hazardous wastes as defi<br>oper condition for transp<br>Signature "On beh<br>Is<br>Signature  | Cell Grid  ONTACT / PHONE Note that the second of the seco | D.:  Lor any applicable regulations applicabl | llations.                 | Month Da Month Da Month Da                   | y Year y Year        |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/I certify, on behalf of the above list applicable laws, regulations, permi  | nd Additional Information 293  cribed materials are not I packaged and are in product of Receipt of Material ent of Receipt of Material control of Receipt  | hazardous wastes as defiper condition for transp Signature "On beh Is Signature Is Signature at to the best of my knowness listed above. | Cell Grid  ONTACT / PHONE Note that the second of the seco | o.:  Lor any applicable regulation of applicable regulation of applicable regulations applicable regulation of applicable regulations.   | llations.                 | Month Da Month Da Month Da                   | y Year y Year        |  |  |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/ I certify, on behalf of the above list   | nd Additional Information 293  cribed materials are not I packaged and are in product of Receipt of Material ent of Receipt of Material control of Receipt  | hazardous wastes as defiper condition for transp Signature "On beh Is Signature Is Signature at to the best of my knowness listed above. | Cell Grid  ONTACT / PHONE Note that the second of the seco | o.:  Lor any applicable regulation of applicable regulation of applicable regulations applicable regulation of applicable regulations.   | llations.                 | Month Da Month Da Month Da in compliance wit | y Year y Year y Year |  |  |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name  17. Transporter 1 Acknowledgeme Printed Name  18. Transporter 2 Acknowledgeme Printed Name  19. Certificate of Final Treatment/I certify, on behalf of the above list applicable laws, regulations, permi  | nd Additional Information 293  cribed materials are not I packaged and are in product of Receipt of Material ent of Receipt of Material control of Receipt  | hazardous wastes as defiper condition for transp Signature "On beh Is Signature Is Signature at to the best of my knowness listed above. | Cell Grid  ONTACT / PHONE Note that the second of the seco | o.:  Lor any applicable regulation of applicable regulation of applicable regulations applicable regulation of applicable regulations.   | llations.                 | Month Da Month Da Month Da                   | y Year y Year y Year |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1252227

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLORES TRUCKING LLC

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 67.99446

Destination

(14)

Profile 375 moderker (con 1831 & con (indian) with)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/09/2018 14:04:04

Dut 05/09/2018 14:04:04

Scale

Operator Inbound 1 lbejaran

Vehicle# J04

0001037

Container Driver

Billing #

Gen EPA ID NR

Check#

1bejaran

Gross Tare

56640 lb 23800 lb 32840 1b

Net Tons 16.42

Comments

110% (R.9 110M Rate) Ordina THE Amount Product PORTW

1 COAL ASH & CDAL CD 100

16.42 Tons

Tiday Tax fotal floket



| WASTE MANAGEMENT   |  |  |  |             |   |                  |                  |             |             |  |  |
|--|--|--|--|-------------|---|------------------|------------------|-------------|-------------|--|--|
| NON-HAZARDOUS M.   | A STATE OF THE PARTY OF THE PAR | S US EPA ID No.  N / A                   | Manifest Doc N                               | lo.         | 2. Page 1   | of               | 1.               | 04          | 0           |  |  |
| 3. Generator's Mailing A<br>GEORGIA POWER  | ddress:  | Generator's Site Address GEORGIA POWER F | Contract the contract to the contract to the | iling):     |   | st Number        | 6739             | 446         |             |  |  |
| 241 RALPH MCGILL   | BLVD NE, BIN#10221   | 155 CROSSGATE RE                         | ),   |             |   | B. State G       | l<br>ienerator's | ID          |             |  |  |
| ATLANTA, GA 30308  | 3-3374   | PORT WENTWORTI                           | H, GA 31407                                  |             |   | Di Giata d       | ionerator o      |             |             |  |  |
| 4. Generator's Phone   | 404-506-1365   |  |  |             |   |                  |                  |             |             |  |  |
| 5. Transporter 1 Compar  | ny Name  | 6. US E                                  | PA ID Number                                 | 1           | 18. 电多一系列。例如19. 19. 19. 19. 19. 19. 19. 19. 19. 19. |                  |                  |             |             |  |  |
| 11700  | 1 ( nordin   | 10                                       |  |             | C. State Transporter's ID D. Transporter's Phone    |                  |                  |             |             |  |  |
| 7. Transporter 2 Compar  | ny Name  | 8. US E                                  | PA ID Number                                 |             | D. Transporter's Phone                              |                  |                  |             |             |  |  |
|  | 9,000,000,000  |  |  |             | E. State Transporter's ID                           |                  |                  |             |             |  |  |
|  |  |  |  |             | F. Transp   | orter's Phone    |                  |             |             |  |  |
| 9. Designated Facility Na  |  | 10. US                                   | EPA ID Number                                |             |   |                  |                  |             |             |  |  |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK R  |  |  |  |             |   | acility ID       | 0400             |             |             |  |  |
| Savannah, GA 314   |  |  |  |             |   | acility Phone    | 912-9            | 27-6113     | 3           |  |  |
| Javailliali, GA 314  | 1.5  |  |  |             |   |                  |                  |             |             |  |  |
| G 11. Description of Waste   | Materials  | Intillianing the second second           | 12. Cor                                      | 450         | 13. Total   | 14. Unit         | I Mi             | isc. Commen | its         |  |  |
| 9  | CONTAMINATED WAS   | TE                                       | No.  | Type        | Quantity  | Wt./Vol.         |                  | Je: Commen  |             |  |  |
| N  | CONTAMINATED WAS   | I E                                      | TON  | NT          | IX  |                  |                  |             |             |  |  |
| E  | WM Profile # 375200G/  | ΔΚRΔ                                     |  | × ) [       |   |                  |                  |             |             |  |  |
| R<br>A <b>b.</b>   | WWW.FTOTILE# 37320007  |  |  |             |   |                  |                  |             |             |  |  |
| T  |  |  |  | 1           |   | W - W            |                  |             |             |  |  |
| 0  | WM Profile #   |  |  |             |   |                  |                  | (Marie Sall |             |  |  |
| R c.   |  |  |  |             |   | S (1997)         |                  |             |             |  |  |
|  |  |  |  |             | Land Comment  |                  |                  |             | J. 188, 171 |  |  |
|  | WM Profile #   |  |  |             |   |                  |                  |             |             |  |  |
| d.   |  |  |  |             |   |                  |                  |             |             |  |  |
|  |  |  |  |             |   |                  |                  |             |             |  |  |
| 1 Additional Description   | WM Profile #   |  | K Dispes                                     | al Location |   |                  |                  |             |             |  |  |
| J. Additional Description  | ons for Materials Listed Abov  |  | K. Dispos                                    | ai Locatioi | MI  | 174              |                  | 1           |             |  |  |
|  |  |  | Cell   |             | V) C  | l                | Level            | 0           |             |  |  |
|  |  | Name Add Bellin                          | Grid   |             |   | 36               |                  |             |             |  |  |
| 15. Special Handling Inst  | tructions and Additional Info  | rmation                                  |  |             | 711   | 4                |                  |             |             |  |  |
|  |  |  |  |             |   |                  |                  |             |             |  |  |
| Purchase Order # GF  | PC10760293   | EMERGENO                                 | CY CONTACT / PHO                             | ONE NO :    | 100   | 11               |                  |             |             |  |  |
| 16. GENERATOR'S CERTI  |  | EMERGEN                                  | ar continue ( ) ( ) (                        | 3112 110    |   |                  |                  |             |             |  |  |
|  | above-described materials ar   | e not hazardous wastes as                | defined by CFR P                             | art 261 or  | any applicab  | le state law. ha | ve been ful      | lv and      |             |  |  |
|  | ssified and packaged and are   |  |  |             |   |                  |                  |             |             |  |  |
| Printed Name   |  | Signature "On                            | behalf of"                                   |             |   |                  | Month            | Day         | Year        |  |  |
| B Filipon  | V C V  owledgement of Receipt of M   | atorials D. C                            |  |             |   |                  |                  | 1           | V ()        |  |  |
| R  | wieugement of Receipt of M   | Signature                                | 1 1  | MANUEL S    |   |                  | Month            | Day         | Year        |  |  |
| A Printed Name   | K TOUN   | 5 V 7                                    | 5 wh   | 10 5        | affect work.  | TER .            | 5                | 9           | 18          |  |  |
|  | wledgement of Receipt of M   | aterials                                 |  | 1           | 1   | 1                |                  |             |             |  |  |
| R Printed Name   |  | Signature                                | N N  | 11          | 1   | 1/11             | Month            | Day         | Year        |  |  |
| E R  |  |  |  | Cor         | E I   |                  |                  | W Si        |             |  |  |
| 19. Certificate of Final T   | reatment/Disposal  |  |  |             |   |                  |                  |             |             |  |  |
| I certify, on behalf of the  | e above listed treatment facil<br>ons, permits and licenses on   |  | knowledge, the ab                            | ove-descr   | ibed waste v  | vas managed ir   | n compliand      | e with all  |             |  |  |
| The second of th | perator: Certification of recei  |  | rials covered by th                          | nis manifes | st.   |                  |                  | 1           | 11          |  |  |
| Printed Name   |  | Signature                                | 1  |             |   |                  | Month            | Day /       | Year        |  |  |
|  | 7  |  |  |             |   |                  |                  | 1           |             |  |  |
| White-TREATMENT, STO   | ORAGE, DISPOSAL FACILITY C   | OPY Blue- GENER                          | ATOR #2 COPY                                 |             | Ye  | ellow- GENERA    | TOR #1 CO        | γ           |             |  |  |

Pink- FACILITY USE ONLY



Inbound 1

Original Ticket# 1252229

Volume

Constinuer Name Brinds (1914) 1971 (1914) 1871 (1914) 1881 (1915) 1881 (1914) (1914) (1

Ticket Date 05/09/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739447

Destruction (4)

Professo

Generator

lime

In 05/09/2018 14:08:05 Out 05/09/2018 14:08:05 Container Driver

Vehicle# J07

Check#

25 = 0

Billing # 0001037 Gen EPA ID NR

多君泰物的价格的 自印度 銀針 蓝 (4的) (4取1的形)加油 超强合计 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

> Scale Operator

> > Ibejaran lbejaran

Gross 51000 16 21940 lb Tare Net 29060 1b Tons 14.53

Comments

America. (Waiting Kirke Product 1 17% 14119

(3.04) (1.13) \$ (3.04) (3.1 F.00)

14.165 Tunt-

144016

Total Tax Potal Picket



# WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

|             | WASTE MANAGEMENT   |  |  |                      | 2 Degrat of  |                            |  |           |         |  |  |
|-------------|--|--|--|----------------------|--|----------------------------|--|-----------|---------|--|--|
|             | NON-HAZARDOUS MANIFEST   | 1. Generator's US E  | EPA ID No. M                                       | anifest Doc No.      | 2. Page 1 o  | of                         | 1  | 11        | 1       |  |  |
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER   |  | enerator's Site Address (If d<br>EORGIA POWER PLAN |                      | A. Manifes   | t Number                   | 6739   | 447       |         |  |  |
|             | 241 RALPH MCGILL BLVD NE, I  | BIN#10221 1.   | 55 CROSSGATE RD.                                   |                      |  | B. State Generator's ID    |  |           |         |  |  |
|             | ATLANTA, GA 30308-3374   | P  | ORT WENTWORTH, G                                   | A 31407              | The state of the   | D. State (                 | serierator 5 i   |           | 1       |  |  |
|             | The state of the s | 06-1365  |  |                      |  |                            |  |           |         |  |  |
|             | 5 Transporter 1 Company Name   | 1  | 6. US EPA II                                       | O Number             | G State To   | C. State Transporter's ID  |  |           |         |  |  |
|             | 10051016   | Madina   |  |                      |  | D. Transporter's Phone     |  |           |         |  |  |
|             | 7. Transporter 2 Company Name  |  | 8. US EPA I  | O Number             |  |                            |  |           |         |  |  |
|             |  |  |  |                      | THE PROPERTY OF THE PARTY OF TH | E. State Transporter's ID  |  |           |         |  |  |
|             | 9. Designated Facility Name and Site   | Address  | 10. US EPA   | 10. US EPA ID Number |  |                            | F. Transporter's Phone G. State Facility ID  |           |         |  |  |
|             | SUPERIOR LANDFILL  |  |  |                      |  |                            |  |           |         |  |  |
|             | 3001 LITTLE NECK ROAD  |  | The Later of                                       |                      | H. State Fa  | H. State Facility Phone 91 |  |           | 3       |  |  |
|             | Savannah, GA 31419   |  | Commission and the                                 |                      |  |                            |  |           |         |  |  |
|             |  |  | IIII II Albaya ilgi etalah                         | 12. Containers       | 13. Total  | 14. Unit                   |  |           |         |  |  |
| G           | 11. Description of Waste Materials   |  |  | vpe Quantity         | Wt./Vol.   | I. Mi                      | sc. Commen   | its       |         |  |  |
| E<br>N      | a. COAL ASH& COAL CONTAM   | Wall to the same of the same o | TIN  | - 17                 |  | 1                          |  |           |         |  |  |
| E           |  |  |  | 1010                 | 1110   |                            |  |           | and the |  |  |
| R           | b. WM Profile  | # 375200GAKR   | A  |                      |  |                            |  |           |         |  |  |
| A<br>T      | <b>b.</b>  |  |  |                      |  |                            |  |           |         |  |  |
| 0           |  | /M Profile #   |  |                      |  |                            |  |           |         |  |  |
| R           | C.   | NAT TOME #   |  |                      |  |                            | INTERNATION OF THE PARTY OF THE |           |         |  |  |
|             |  |  |  |                      |  | Us- E                      |  |           |         |  |  |
|             |  | /M Profile #   |  |                      |  |                            |  |           |         |  |  |
|             | d.   |  |  |                      |  | 45-11                      |  |           |         |  |  |
|             |  |  |  |                      |  | 100000                     |  |           |         |  |  |
|             | J. Additional Descriptions for Mate  | VM Profile #<br>rials Listed Above   |  | K. Disposal Loc      | ation  |                            |  |           |         |  |  |
|             |  |  |  |                      | 10/11  | 179                        | 1  | 0         |         |  |  |
|             |  |  |  | Cell                 | Noce   | 11                         | Level  |           |         |  |  |
|             | 15. Special Handling Instructions and  | l Additional Informat  | ion  | Grid                 | 1 1 1 1  | 0)6                        |  |           |         |  |  |
|             |  |  |  |                      | 000.   |                            |  |           |         |  |  |
|             |  |  |  | A Company            |  |                            | فاللين   |           |         |  |  |
|             | Purchase Order # GPC1076029  | 93   | EMERGENCY CO                                       | NTACT / PHONE N      | NO.:   |                            |  |           |         |  |  |
|             | 16. GENERATOR'S CERTIFICATE:   |  |  |                      |  | The same factors           |  |           |         |  |  |
|             | I hereby certify that the above-descri<br>accurately described, classified and p   | ibed materials are no  | t hazardous wastes as defi                         | ned by CFR Part 26   | 51 or any applicabl<br>to applicable regu  | e state law, h<br>lations. | ave been fu  | ly and    |         |  |  |
|             | Printed Name   | acting color and are in p  | Signature "On beh                                  |                      |  |                            | Month  | Day       | Year    |  |  |
|             | BFILIPOUICH  |  | BR   |                      |  |                            |  | 4         | 118     |  |  |
| T<br>R      | 17. Transporter 1 Acknowledgemen   | t of Receipt of Mater  |  | 01                   |  |                            | Month  | Day       | Year    |  |  |
| A<br>N      | Printed Name X TAH   | 6KHH+  | Signature  | Talke                |  |                            | Nonui  | 9         | 1/1/    |  |  |
| S<br>P<br>O | 18. Transporter 2 Acknowledgemen   | t of Receipt of Mater  | ials   |                      |  |                            |  | 1 =       | 10      |  |  |
| R           | Printed Name   |  | Signature  |                      | 7 3  |                            | Month  | Day       | Year    |  |  |
| E<br>R      |  |  | 11 3 12 1  |                      |  |                            |  | *         |         |  |  |
|             | 19. Certificate of Final Treatment/Di  | sposal   |  | 1. 17.4              | A CHANGE   |                            |  | 1111      |         |  |  |
| F<br>A      | I certify, on behalf of the above listed   | d treatment facility, t  | hat to the best of my know                         | ledge, the above-    | described waste w  | as managed                 | in compliand   | e with al | F       |  |  |
| C           | applicable laws, regulations, permits  | and licenses on the  | dates listed above.                                |                      |  |                            |  |           |         |  |  |
| 1           | 20. Facility Owner or Operator: Cer  | tification of receipt o  |  | covered by this ma   | anifest.   |                            | NAME   | Davi      | Year    |  |  |
| Y           | Printed Name   | 1  | Signature  |                      |  |                            | Month  | Day       | 1 igai  |  |  |
|             | White- TREATMENT, STORAGE, DISP  | OSAL FACILITY COPY   | Blue- GENERATO                                     | R #2 COPY            | Ye   | llow- GENER                | ATOR #1 CO   | PY        |         |  |  |
|             | Pink- FACILITY USE C   |  | Gold- TRANSPORT                                    |                      |  |                            |  |           |         |  |  |



Superior Find(i)) SVM( Little Neck Rd > Savannah, M. 31419 Ph. (502) 557 (113

(minima) flekell tripes

Customer Name 64 DRO APONI SZERWISAKRA 64 (1883) Carroler 14 (1813) TRUCK) NR 144:

flickest Date Wil/W9/20018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739448

Destination

Profile - 37G-WENKEN CON (MALE CON CONTINUOUS) MECH )

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/09/2018 14:22:12

Out 05/09/2018 14:22:12

Scale Inbound 1

Operator Ibejaran

lbejaran

Gross Tare Net

Tons

Volume

54040 15 22980 lb

31060 lb 15.53

Comments

Unhighest June

Gen EPA ID NR

0001037

Container

Billing #

Driver

Check#

- Product 10% (26.5) 18.66 Radio Tros Omound insign CION ASSE & LOOP TO LOOP italia house

Tetal Tax fotal floket



| WASIEN   | MANAGEMENT                               | 1 Canavatavla IIC  | EDA ID N                                       | 4:f+ D               | M                       | 1 2 0 1                   | œ l                             |   |        |  |  |
|--|--|--|--|----------------------|-------------------------|---------------------------|---------------------------------|---|--------|--|--|
| NON-H  | HAZARDOUS MANIFEST                       | 1. Generator's US I  | / A  | Manifest Doc         | NO.                     | 2. Page 1 o               | OT .                            | 1:42                                    |        |  |  |
| The second second second   | ntor's Mailing Address:<br>IA POWER      |  | enerator's Site Address (#<br>EORGIA POWER PLA |                      | ailing):                |                           | st Number                       | 6739448                                 |        |  |  |
| And the second s | PH MCGILL BLVD NE, I<br>A, GA 30308-3374 | and the second of the second o | 55 CROSSGATE RD.<br>ORT WENTWORTH, 0           | GA 31407             |                         |                           |                                 | ienerator's ID                          | N      |  |  |
| 4. Genera  | ator's Phone 404-50                      | 06-1365  |  |                      |                         |                           |                                 |   |        |  |  |
| 5 Transpo  | orter 1 Company Name                     | radina   | 6. US EPA                                      | ID Number            |                         |                           | ansporter's ID<br>orter's Phone |   |        |  |  |
| 7. Transp  | orter 2 Company Name                     | - C11111   | 8. US EPA                                      | ID Number            |                         | E. State Transporter's ID |                                 |   |        |  |  |
|  |  |  |  |                      |                         |                           |                                 |   |        |  |  |
| 9 Design   | ated Facility Name and Site              | Address  | 10. US EPA                                     |                      | F. Transporter's Phone  |                           |                                 |   |        |  |  |
| and the second of the second   | OR LANDFILL                              | Audiess  | 10. 03617                                      | 10. US EPA ID Number |                         |                           |                                 | G. State Facility ID                    |        |  |  |
| 3001 LIT   | TTLE NECK ROAD                           |  |  |                      |                         |                           |                                 | 912-927-611                             | 3      |  |  |
| Savann   | nah, GA 31419                            |  |  |                      |                         |                           |                                 |   |        |  |  |
|  |  |  |  | 12. Containers       |                         |                           |                                 |   |        |  |  |
| G 11. Descr  | iption of Waste Materials                |  |  | No.                  | Type                    | 13. Total<br>Quantity     | 14. Unit<br>Wt./Vol.            | I. Misc. Comments                       |        |  |  |
| a. COAL  | ASH& COAL CONTAM                         | INATED WASTE   |  | TAL                  | 7-                      | 17                        |                                 |   |        |  |  |
| E  |  |  |  | 704                  | 11)/                    | 1.6                       |                                 |   |        |  |  |
| R  | WM Profile                               | # 375200GAKR   | KA .   |                      |                         |                           |                                 |   |        |  |  |
| д <b>b.</b><br>Т   |  |  |  |                      |                         |                           |                                 |   |        |  |  |
| o  |  | /M Profile #   |  |                      |                         |                           |                                 |   |        |  |  |
| R c.   | V  | /ivi Proffie #   |  |                      | )) = = <del>5</del> .11 |                           |                                 |   |        |  |  |
|  |  |  |  |                      |                         |                           |                                 |   |        |  |  |
|  | W  | /M Profile #   |  |                      |                         |                           |                                 |   |        |  |  |
| d  |  |  | All same specific                              |                      |                         | V                         |                                 | # + *\#                                 |        |  |  |
|  |  |  |  |                      |                         |                           |                                 |   |        |  |  |
| I Addis  | W<br>ional Descriptions for Mater        | /M Profile #   |  | V Disno              | <br>sal Location        |                           |                                 |   |        |  |  |
| J. Additi  | ional Descriptions for Mater             | ilais Listeu Above   |  | K. Dispo             | Sai Location            | 117                       | 1171                            | (0)                                     |        |  |  |
| 1  |  |  |  | Cell                 | 1                       | 1)1                       | 110                             | Level                                   |        |  |  |
| 15. 6  |  | Additional Informat  | 10   | Grid                 | 1                       | 8                         | 31                              |   |        |  |  |
| 15. Speci  | ial Handling Instructions and            | i Additional Illionnat   | tion   |                      |                         | 916                       | 10                              |   |        |  |  |
|  |  |  |  |                      |                         |                           |                                 |   |        |  |  |
| Purchase   | Order # GPC1076029                       | 93   | EMERGENCY C                                    | ONTACT / PH          | IONE NO.:               |                           |                                 |   |        |  |  |
| 16. GENE   | ERATOR'S CERTIFICATE:                    |  |  |                      |                         |                           |                                 |   |        |  |  |
| I hereby   | certify that the above-descri            | bed materials are no   | ot hazardous wastes as de                      | ined by CFR          | Part 261 or             | any applicabl             | e state law, ha                 | ave been fully and                      |        |  |  |
| Printed N  | ly described, classified and p           | ackaged and are in p   | Signature "On be                               | nalf of"             | ording to ap            | piicable regu             | lations.                        | Month Day                               | Year   |  |  |
| B  | Filipovich                               |  | BP-  | -                    |                         |                           |                                 | 59                                      | 10     |  |  |
|  | sporter 1 Acknowledgement                | t of Receipt of Mater  | rials  |                      | 0                       | /                         |                                 |   |        |  |  |
| A Printe   | ed Name                                  |  | Signature                                      | . 1                  | ( nu                    | 1/                        |                                 | Month Day                               | Year   |  |  |
| s V  | ) - CKOSDY                               | - 6 D  | 1.1. X   | MAI                  | JUNE                    | 2/                        |                                 | 1017                                    | 10     |  |  |
|  | sporter 2 Acknowledgement<br>ed Name     | t of Receipt of Mater  | Signature                                      |                      |                         | 1                         |                                 | Month Day                               | Year   |  |  |
| E  | a rume                                   |  |  | -                    |                         |                           |                                 |   |        |  |  |
| R 10 Corti   | ificate of Final Tracture /D:            |  |  |                      |                         |                           |                                 | 1 |        |  |  |
| 19. Certificate of Final Treatment/Disposal    Factor   I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the ab  |  |  |  |                      |                         | bed waste w               | as managed i                    | n compliance with a                     | Л      |  |  |
| c applicabl  | le laws, regulations, permits            | and licenses on the  | dates listed above.                            |                      |                         |                           | 9                               |   | n gode |  |  |
| 20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manif  |  |  |  |                      | this manifes            | t.                        |                                 | la constant de                          | 111    |  |  |
| T Printe   | ed Name                                  | VX)  | Signature                                      | 1                    |                         |                           |                                 | Month Day                               | / Year |  |  |
|  |  | 7  | Div. CENTRATO                                  | 10 #2 CODY           | THE STATE OF            | V.                        | ellow- GENERA                   | TOR #1 COPY                             |        |  |  |
| White- T   | REATMENT, STORAGE, DISP                  | ~ ~  |  |                      |                         | 1.6                       | HOW- GENERA                     | TOR #1 COF1                             |        |  |  |
|  | Pink- FACILITY USE C                     | JINLY  | Gold- TRANSPOR                                 | FU #T COLL           |                         |                           |                                 |   |        |  |  |



(minima) ficketh teasin

Volume

Customer Name Bluke) Oblik 27.290060KKO Bluke) Carrier - HIUNE IRUCKING III

Ticket Date 05/09/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739449

Destination

(21)

Profile 37540060KRO (COD OST & COD CONTOMINATED WASTE)
Conversion 126 DEGROCOPSRCIAT GEORGIA POWER PLANT KROFT

Time

05/09/2018 14:36:56 In Out 05/09/2018 14:36:56

Scale Inbound 1

Operator lbejaran Ibejaran

Gross Tare

54420 1b 23340 15 31080 lb

Net Tons

15.54

Community

Vehicle# JØ1

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

Om court Rate TRUK 124.0 (1(1)4) 1 10% Printing.

(अप) (१३) है (अप) अप)

dicted Tons

国民国

Or 1

Test Test Inbat Ticket



| ,                     | NON-HAZARDOUS MANIFEST   | 1. Generator's US E   | PA ID No. Mai   | nifest Doc             | of           | 1.29         |                |                        |
|-----------------------|--|-----------------------|---|------------------------|--------------|--------------|----------------|------------------------|
|                       | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, BI   | G                     | enerator's Site Address (If dif<br>EORGIA POWER PLANT<br>55 CROSSGATE RD. |                        | ailing):     |              | st Number      | 6739449                |
|                       | ATLANTA, GA 30308-3374  4. Generator's Phone 404-506   | P                     | ORT WENTWORTH, GA   | 31407                  |              |              | B. State       | Generator's ID         |
|                       | 5. Transporter 1 Company Name  | ding                  |   |                        |              |              |                | ID                     |
|                       | 7. Transporter 2 Company Name  |                       | 8. US EPA ID  | 10. US EPA ID Number   |              |              |                | D                      |
|                       | 9. Designated Facility Name and Site A SUPERIOR LANDFILL 3001 LITTLE NECK ROAD   | aaress                | 10. US EPA II   | To. OS EFA ID Nullibel |              |              |                | 912-927-6113           |
| ,                     | Savannah, GA 31419  11. Description of Waste Materials   |                       |   | 70.0                   | ntainers     | 13. Total    | 14. Unit       | I. Misc. Comments      |
| G<br>E<br>N<br>E      | a. COAL ASH& COAL CONTAMIN   | NATED WASTE           |   | No.                    | Туре         | Quantity / 🗸 | Wt./Vol.       |                        |
| R<br>A<br>T           | WM Profile #   | 375200GAKR            | Α   | Q1                     |              |              |                |                        |
| O<br>R                | c. WN  | /I Profile #          |   |                        |              |              |                |                        |
|                       | d.   | Л Profile #           |   |                        |              | unues sessai |                |                        |
|                       | WN  J. Additional Descriptions for Materia   | // Profile #          |   | V Diana                |              |              |                |                        |
|                       | 3. Additional Descriptions for Materia   | is Listeu Above       |   | Cell<br>Grid           | sal Location | 1520         | 129            | Level 6                |
|                       | 15. Special Handling Instructions and A  | Additional Informati  | on  | d in                   |              | MI           | 63             |                        |
|                       | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE:   |                       | EMERGENCY CON   | ITACT / PH             | ONE NO.:     |              |                |                        |
|                       | I hereby certify that the above-describe<br>accurately described, classified and pace<br>Printed Name                            |                       |   | tation acco            |              |              |                | Month Day Year         |
| T<br>R<br>A<br>N      | 17. Transporter 1 Acknowledgement of Printed Name  | als Signature         | Month Da  |                        |              |              |                |                        |
| S P O R T E           | 18. Transporter 2 Acknowledgement of Printed Name  | Signature             |   |                        |              |              | Month Day Year |                        |
| R<br>F<br>A<br>C      | 19. Certificate of Final Treatment/Disp<br>I certify, on behalf of the above listed t<br>applicable laws, regulations, permits a | reatment facility, th |   | dge, the a             | bove-descri  | bed waste w  | vas managed    | in compliance with all |
| I<br>L<br>I<br>T<br>Y | 20. Facility Owner or Operator: Certifi Printed Name   |                       |   | vered by t             | his manifes  | t.           |                | Month Day (Year        |
|                       | White- TREATMENT, STORAGE, DISPOS  | SALEACILITY CODY      | Blue- GENERATOR   | to CODY                |              | Ve           | llow- GENER    | ATOR #1 COPY           |

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY Superior Landiil .DADL Libble Neck Hd Savannah, GA, 31419 Ph: (912) 927-6113

(monima) Fleteral Using/M

Consequer Name (d'IREX DECISI 27,69006DER) (d'ORE) Carrière 11 (DE C TRUECONS 1) C Planton Date Mis/My/2013

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Wester Code

Manifest 6739450

Destination 13()

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/09/2018 15:56:32

Out 05/09/2018 15:56:32

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Container

Billing # 0001037

Sen (19) 10 NK

Driver

Check#

Gross Tare Net Tons

Vehicle# Ji2 Velime

55620 1b 21520 lb 34100 lb 17.05

Comments

Product

Amount

Origin

1 COAL ASH & COAL CO 100 17.05 Tons

PORTW

THEN THE Inhal Tlokak



| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                    |  | anifest Doc I | No.               | 2. Page 1 o  | of                         | 310                      | 7        |
|--|--|--|---------------|-------------------|--|----------------------------|--------------------------|----------|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374   | GEO<br>BIN#10221 155                                     | erator's Site Address (IF d<br>DRGIA POWER PLAN<br>CROSSGATE RD.<br>ET WENTWORTH, G  | IT KRAFT      | ailing):          | 12382788852765286  | st Number  MNA  B. State C | 673945<br>Generator's ID | 0        |
| 4. Generator's Phone 404-5  5. Transporter 1 Company Name  7. Transporter 2 Company Name   | raling   |  | D Number      |                   | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID |                            |                          |          |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | Address  | 10. US EPA   | ID Number     |                   | G. State F   | acility ID                 | 912-927-                 | -6113    |
| 11. Description of Waste Materials   |  |  | 12. Co        | ontainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.       | I. Misc. C               | omments  |
| a. COAL ASH& COAL CONTAN   | INATED WASTE  # 375200GAKRA                              | constitution of the consti | 215           | DT                | N  |                            |                          |          |
| b.   | WM Profile #   |  |               |                   |  |                            |                          |          |
| c.   | WM Profile #   |  |               |                   |  |                            |                          |          |
| d.   | WM Profile #   |  |               |                   |  |                            |                          |          |
| J. Additional Descriptions for Mate  | APPLICATION RESULTS DANS SECURIS CA                      |  | K. Dispo      | osal Location     | V32  | 0119                       | Level                    | 5        |
| 15. Special Handling Instructions an   | d Additional Information                                 |  |               |                   | 201  | 600                        |                          |          |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc  | ribed materials are not h                                | EMERGENCY C  | ined by CFR   | Part 261 or       | any applicat   | ole state law, l           | nave been fully          | and      |
| accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement   | packaged and are in pro                                  | per condition for transp<br>Signature "On bel  | ortation acc  | cording to a      | pplicable reg  | ulations.                  | Month                    | Day Ye   |
| Printed Name  JAMFS  Sample Sa | hobert   | Signature  | mls           | S                 | hub  | het                        | Month                    | Day Ye   |
| Printed Name   |  | Signature  |               |                   |  |                            | Month                    | Day Y    |
| 19. Certificate of Final Treatment/I<br>I certify, on behalf of the above list<br>applicable laws, regulations, permit   | ed treatment facility, that<br>ts and licenses on the da | tes listed above.  |               |                   |  | was managed                | in compliance            | with all |
| 20. Facility Owner or Operator: Ce   | ertification of receipt of r                             | oon-hazardous materials<br>Signature   | covered by    | this manife       |  | rellow- GENER              | Month                    | Day y    |

Pink- FACILITY USE ONLY

(wigins) Ticket# 1252269

Constance Name Of ORECOGNAL SZERMEDERS OF ORES CORP. FOR S TRUCKING III.

Ticket Date 05/09/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Destination

Mantrost 67.89431

Profile

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/09/2018 15:54:02

Out 05/09/2018 15:54:02

Scale Inbound 1 LBEJARAN

Operator LBEJARAN

Container Driver

Billing # 0001037

Gen EPA ID NR

Check#

Gross Tare Net Tons

59580 lb 23800 16 35780 16 17.89

Comments

403WM

The they were the

Vehicle# J04 Volume

Omerent.

F EINS TEST & COM CO (MA TY, 18) Times





| H   | NON-HAZARDOUS MANIFEST   | 1. Generator's US       | EPA ID No.   | Manifest Doo   | No.             | 2. Page  | 1 of   |                                  |                        |  |
|-----|--|-------------------------|--|--|-----------------|--|--|----------------------------------|------------------------|--|
| +   | NON-HAZARDOUS WANIFEST   | N                       | / A  |  |                 | 2680   |  | 311                              | 1                      |  |
|     | 3. Generator's Mailing Address:  |                         | Generator's Site Addr  | PSS (If different than   | es a Illia a Iv |  |  | 2.1                              |                        |  |
|     | GEORGIA POWER  |                         | GEORGIA POWER  | PLANT KRAFT  | nalling);       |  | est Number   | 6739451                          |                        |  |
|     | 241 RALPH MCGILL BLVD NE, E  |                         | L55 CROSSGATE R  |  |                 | V  | VMNA   |                                  |                        |  |
|     | ATLANTA, GA 30308-3374   |                         | PORT WENTWORT  |  |                 |  | B. State (   | Generator's ID                   |                        |  |
|     | 4. Generator's Phone 404-50  | 06-1365                 |  | 11, 47 31407   |                 |  |  |                                  |                        |  |
|     | 5. Transporter 1 Company Name  |                         | 6. US  | EPA ID Number  |                 |  |  | Albanica Karonell Paris, and San |                        |  |
|     | [ ] = [ = [ ]  | ~- /                    |  | L. ATID HUMBER   |                 | C State  | Transportor's II   |                                  |                        |  |
|     | FORMA O  | 1901100                 | A  |  |                 | C. State Transporter's ID D. Transporter's Phone |  |                                  |                        |  |
|     | 7. Transporter 2 Company Name  |                         | 8. US  | EPA ID Number  | 1117500         |  |  |                                  |                        |  |
|     |  |                         | 1  |  |                 | E. State   | Fransporter's ID   | )                                | 2141504102003111111111 |  |
| V   | 9. Designated Facility Name and Site   | Address                 | 10. 119  | FDA ID N I   |                 | F. Transp  | orter's Phone  |                                  |                        |  |
|     | SUPERIOR LANDFILL  |                         | 10.  | 10. US EPA ID Number   |                 |  |  |                                  |                        |  |
|     | 3001 LITTLE NECK ROAD  |                         |  |  |                 | G. State   | Facility ID  |                                  | i se yi-               |  |
|     | Savannah, GA 31419   |                         |  |  |                 | H. State   | acility Phone  | 912-927-61                       | L13                    |  |
|     |  |                         |  |  |                 |  |  |                                  |                        |  |
| G   | 11. Description of Waste Materials   |                         | Parameters of the parameters o | 12. Co   | ntainers        | 13. Total  | 14. Unit   |                                  |                        |  |
| E   | a. COAL ASH& COAL CONTAMII   | NATED MASTE             |  | No.  | Туре            | Quantity   | Wt./Vol.   | I. Misc. Comn                    | nents                  |  |
| N   | a. COME ASING COME CONTAININ   | NATED WASTE             |  | -11  | 100             | 157  |  |                                  | 1                      |  |
| E   | MANA Duestle #   | 27F200CAVD              |  | TH   | 101             | 1 6  |  |                                  |                        |  |
| R   | b, WM Profile #  | 375200GAKR              | A  |  | Mark            |  |  |                                  |                        |  |
| T   |  |                         |  |  |                 | -  |  |                                  |                        |  |
| 0   |  |                         |  |  |                 |  |  |                                  |                        |  |
| R   | c. WN  | // Profile #            | ***  |  |                 |  |  |                                  |                        |  |
|     |  |                         |  | 1  |                 |  |  |                                  |                        |  |
|     | WA   | / Profile #             |  |  |                 |  |  |                                  |                        |  |
|     | d.   | in i rome ii            |  |  |                 |  |  |                                  | 100                    |  |
|     |  |                         |  |  |                 |  |  |                                  |                        |  |
|     | WA   | 1 Profile #             |  |  |                 |  |  | NA CONTRACTOR                    |                        |  |
| 1   | J. Additional Descriptions for Materia   | Is Listed Above         |  | K Dispos   | al Location     |  |  |                                  |                        |  |
|     |  |                         |  | k. Dispos  | ai Location     | 1.   | 04   | / (                              |                        |  |
|     |  |                         |  | Cell   | 1               | 110  | 117  | Level 4                          |                        |  |
| 7   | 15 Special Handling Instruction  |                         |  | Grid   | 1               | MI   | 32   |                                  |                        |  |
| 3   | 15. Special Handling Instructions and A  | dditional Informatio    | on   |  |                 | 100.0  |  | - V-                             |                        |  |
|     |  |                         |  |  |                 |  |  |                                  |                        |  |
| 1   | Purchase Order # GPC10760293   |                         |  |  |                 |  |  |                                  |                        |  |
| -   | The second of th |                         | EMERGENC   | CONTACT / PHO  | ONE NO.:        |  |  |                                  |                        |  |
|     | 16. GENERATOR'S CERTIFICATE:   |                         |  |  |                 |  | - H  |                                  | -0.7                   |  |
|     | I hereby certify that the above-described  | d materials are not     | hazardous wastes as o  | defined by CFR Pa  | art 261 or ar   | ny applicable                                    | state law, hav   | e been fully and                 |                        |  |
|     | accurately described, classified and pack<br>Printed Name  | raged and are in pro    | Signature "On b  | isportation accor  | ding to app     | licable regul                                    | ations.  |                                  |                        |  |
|     | BFILIDOVICE  |                         | REPO   | chan of  |                 |  |  | Month Day                        | Year                   |  |
| T   | 17. Transporter 1 Acknowledgement of   | Receipt of Material     | ls   | Property and the Control of the Cont |                 |  |  | 019                              | 1/0                    |  |
| A   | Printed Name   |                         | Signature  | 1/   | 71              | . 7  |  | Month Day                        | Lac                    |  |
| S   | X KIVIC YO   | Lnc,                    | V  | John II  | lar 1           | An   | 15   | Month Day                        | Year                   |  |
| 0 / | 18. Transporter 2 Acknowledgement of   | Receipt of Material     | s  | -/ 1   |                 | A BOOK   | A CONTRACTOR OF THE PARTY OF TH |                                  | A                      |  |
| T   | Printed Name   |                         | Signature  |  | 1               | 1  | 1  | Month Day                        | Year                   |  |
| R   |  |                         | STATE OF THE STATE |  | 0               | CO VIVE  | 1  |                                  | , cai                  |  |
|     | 19. Certificate of Final Treatment/Dispo   | sal                     |  | TO COMPANY   |                 |  |  |                                  |                        |  |
|     | I certify, on behalf of the above listed tre   | t to the hest of my len | owledge the sta  | wo doc   | d               |  | Contract Con |                                  |                        |  |
| -   | Trimes and regulations, permits and  | les listed above.       |  |  | ea waste wa     | s managed in c                                   | ompliance with al  | 1                                |                        |  |
|     | 20. Facility Owner or Operator: Certifica  | on-hazardous materia    | Is covered by this   | s manifest   | TO VERE         |  |  |                                  |                        |  |
|     | Printed Name   | 111                     | Signature  |  |                 |  |  | Month Day                        | Lyéar                  |  |
|     |  | 1                       |  |  | -               |  |  | ) / bay )                        | Fear                   |  |
|     | White-TREATMENT, STORAGE, DISPOSA  | L FACILITY COPY         | Blue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY  |  |                 |  |  |                                  |                        |  |
|     | Pink- FACILITY USE ONLY  | V                       | Gold- TRANSPOR   |  |                 |  |  |                                  |                        |  |

Volume



Superior Land(1) 3000 Little Nack Rd Savannah, GA, 31419 Ph: (912) 927-6113

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier FLOF Ticket Date 05/09/2018 Vehicle# J06

Ticket Date 05/09/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739452 Destination

Destil

PO

Profile Demorator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
186 GEORG (APPROXIMIT GEORGEAN POLICE PLANT REAFT

Time In 05/09/2018 16:47:58 Out 05/09/2018 16:47:58 Scale Inbound 1 Operator RENEE RENEE

Container

Billing #

Gen EPA ID NR

Driver

Check#

Gross Tare Net Tons 56700 lb 22980 lb 33720 lb 16.86

Comments

Product LD: Dty

----

Oty DOM

Rate

Tax

FLORES TRUCKING LLC

0001037

Amount

Origin

COAL ASH & COAL CO 100

16.86 Tons

1

PORTW

osh J

Total Tax Cotal ficket



| NON HAZADDOUS ASSAULT  | 1. Generator's US EPA  | A ID No. N   | No. Manifest Doc No. |             |                        | 1 of   |                           |         |  |
|--|--|--|----------------------|-------------|------------------------|--|---------------------------|---------|--|
| NON-HAZARDOUS MANIFEST   | N/   |  |                      |             | 2. Page                | 101  | -                         | 1-1     |  |
| 3. Generator's Mailing Address:  |  |  |                      |             |                        |  | -                         | 11      |  |
| GEORGIA POWER  | Gene   | erator's Site Address (If  | different than ma    | iling):     | A. Manif               | est Number   | 5700.0                    |         |  |
| 241 RALPH MCGILL BLVD NE, E  |  | RGIA POWER PLAI  | VI KRAFT             |             | V                      | VMNA   | 673945                    | 52      |  |
| ATLANTA, GA 30308-3374   |  | CROSSGATE RD.  |                      |             |                        | B State 0  | Generator's ID            |         |  |
|  | POR  | T WENTWORTH, O   | A 31407              |             | Harris Ar              | D. State C   | cherator 3 ID             |         |  |
|  | 06-1365  |  |                      |             |                        |  |                           |         |  |
| 5. Transporter 1 Company Name  |  | 6. US EPA I  | D Number             |             |                        |  |                           |         |  |
| 11 MOLT !  | 20100  |  |                      |             | C. State               | Fransporter's ID   |                           |         |  |
| 7. Transporter 2 Company Name  | PULLY -  | Δ.   |                      |             | D. Transporter's Phone |  |                           |         |  |
| transporter a company wante  | 1  | 8. US EPA I  | D Number             |             |                        |  |                           |         |  |
|  | V  |  |                      |             |                        | ransporter's ID  |                           |         |  |
| 9. Designated Facility Name and Site A   | Address  | 10. US FPA   | ID Normalis and      |             | F. Transp              | orter's Phone  |                           |         |  |
| SUPERIOR LANDFILL  |  | 10. US EPA ID Number   |                      |             |                        |  |                           |         |  |
| 3001 LITTLE NECK ROAD  |  |  |                      |             | G. State I             | acility ID   |                           |         |  |
| Savannah, GA 31419   |  | Printed and the second and the secon |                      |             | H. State I             | acility Phone  | 912-927-                  | 6113    |  |
| 54.4.man, 6/(51415)  |  |  |                      |             |                        |  | AND ASSESSED THE ASSESSED |         |  |
| G 11. Description of Waste Materials   |  |  | 12. Cont             | ainers      |                        |  |                           |         |  |
|  |  |  | No.                  | Туре        | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.   | I. Misc. Co               | omments |  |
| a. COAL ASH& COAL CONTAMII   | NA FED WASTE   |  | 1                    | _           | 1 eming                |  |                           |         |  |
|  |  |  | 100                  | 01          | 18                     |  |                           |         |  |
| WM Profile #   | 375200GAKRA  | 2  |                      |             |                        |  |                           |         |  |
| <b>b</b> .   |  |  |                      |             | 9-1-1-1-1              | SUPPLY STATES  |                           |         |  |
|  | and the  |  |                      | 1           |                        |  |                           |         |  |
| WN   | /I Profile #   | No. of the last of |                      |             |                        |  |                           |         |  |
| C.   | WELLY TO   | A  |                      |             |                        |  |                           |         |  |
|  |  | 15   |                      | 111         |                        |  |                           | 1       |  |
| d. WN  | 1 Profile #  | 19   |                      |             |                        |  |                           |         |  |
| a.   | ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )  |  |                      | 1000        | €.                     | No. 10 and 10 an |                           |         |  |
|  |  | 45.53  |                      | 31 10-      |                        |  |                           |         |  |
| WN   | 1 Profile #  | 13   |                      |             |                        |  |                           |         |  |
| J. Additional Descriptions for Materia   | ls Listed Above  |  | K. Disposal          | Location    |                        |  |                           |         |  |
|  |  | 2.9  |                      |             | 4                      |  |                           |         |  |
| Max and a second second  |  |  | Cell                 | 1           | 1010                   |  | _evel-                    |         |  |
| 15. Special Handling Instructions and A  | dditional Information  |  | Grid                 | IN          | 5101-                  | 7 (  | 00110                     | 03/     |  |
| and Actions and Actions  | duttorial information  |  |                      |             |                        |  | 1                         |         |  |
|  |  |  |                      |             |                        | t  | 65-                       | 61      |  |
| Purchase Order # GPC10760293   |  |  |                      |             |                        |  |                           | 1-1-    |  |
| The Late and the State of the S |  | EMERGENCY CON  | ITACT / PHON         | IE NO.:     | L LINE                 |  |                           |         |  |
| 16. GENERATOR'S CERTIFICATE:   |  |  |                      |             | Y                      |  |                           | 1 2     |  |
| I hereby certify that the above-described accurately described, classified and pack  | d materials are not haza   | irdous wastes as define  | d by CFR Pari        | 261 or any  | y applicable           | state law, have  | been fully and            | d       |  |
| accurately described, classified and pack<br>Printed Name  | kaged and are in proper  | condition for transport  | ation accord         | ng to appli | cable regula           | ations.  |                           |         |  |
| B Filipovich   |  | Signature "On behalf   | ot                   |             |                        |  | Month Da                  | y Year  |  |
| 17. Transporter 1 Acknowledgement of   | Receipt of Materials   |  |                      | ^           |                        |  | 017                       | 10      |  |
| \ Printed Name   |  | Signature  | 111                  | 1           |                        |  |                           |         |  |
| VII CKASh  | 1  | Vignature 144  | Mh                   | 1           |                        |  | Month Day                 | / Year  |  |
| 18. Transporter 2 Acknowledgement of   | Receipt of Materials   | 11-16  | 1                    | 1           |                        |  | 511                       | 17      |  |
| Printed Name   |  | Signature  | -0                   | /           |                        |  |                           | 100     |  |
|  |  | Signature  |                      |             |                        |  | Month Day                 | / Year  |  |
|  | A STATE OF THE STA |  |                      | Y           | 2 (-)                  |  |                           |         |  |
| 19. Certificate of Final Treatment/Dispos  |  |  |                      |             | - Wind                 |  |                           |         |  |
| I certify, on behalf of the above listed tre   | eatment facility, that to  | the best of my knowled   | ge, the above        | e-described | d waste wa             | s managed in co  | ompliance with            | all     |  |
| - FF   | lincerises on the dates if   | sted above.  |                      |             |                        |  |                           |         |  |
| 20. Facility Owner or Operator, Certifica  | ation of receipt of non-h  |  | ered by this i       | manifest.   |                        |  |                           |         |  |
| Printed Name   | Control of the state of the sta | Signature /  |                      |             |                        |  | Month Day                 | Vear    |  |
| VO   |  |  |                      |             |                        |  | 7511                      | 1118    |  |
| White-TREATMENT, STORAGE, DISPOSA  | L FACILITY COPY  | Blue- GENERATOR #2   | 2 COPY               | THE WE      | Yello                  | ow- GENERATO   | R #1 COPY                 | 1       |  |
| Pink- FACILITY USE ONLY  |  | Gold-TRANSPORTER   | 1 COPY               |             |                        |  | EN-                       |         |  |

Original Ticket# 1252273

Englander Name BLORE BEING ZA PROGRESS BLORE Carrier 11 (BLG TRUCKING LEC

Ticket Date 05/09/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739453

Destination

1911

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPURCHAT GEORGIA POWER - PLANT KRAFT

Time 05/09/2018 16:03:23 In

Out 05/09/2018 16:03:23

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Vehicle# J07

Gen EPA ID NR

0001037

Container

Billing #

Driver

Check#

Gross Net Tons

54060 16 21940 lb 32120 16 16.06

Product

Comments

LD% Cty LOM Rate Tax

Amount

Origin

COAL ASH & COAL CO 100

15.06 Tons

PORTW

intal floket





|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's US EP    |  | anifest Doc No.  | 2. Page 1 of                            |  |            |              |                        |  |  |
|------------------|---|-------------------------|--|--|---|--|------------|--------------|------------------------|--|--|
|                  |   | N /                     | Α  |  |   |  |            | 5. 2         | 2                      |  |  |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER  |                         | nerator's Site Address (If<br>ORGIA POWER PLAT   | Control of the Contro | A. Manifest Nur                         |  | 6739       | 9453         |                        |  |  |
|                  | 241 RALPH MCGILL BLVD NE, E   | BIN#10221 15!           | 5 CROSSGATE RD.  |  | 100000000000000000000000000000000000000 | B. State Generator's ID                          |            |              |                        |  |  |
|                  | ATLANTA, GA 30308-3374  |                         | RT WENTWORTH, G  | A 31407  |   |  |            |              |                        |  |  |
|                  |   | 06-1365                 |  |  |   |  |            |              |                        |  |  |
|                  | 5. Transporter 1 Company Name   | V                       | 6. US EPA I  | D Number   | C SI V T                                |  |            |              |                        |  |  |
|                  | ( Bastal -  | anima                   |  |  |   | C. State Transporter's ID D. Transporter's Phone |            |              |                        |  |  |
| Ī                | 7. Transporter 2 Company Name   | TOUTH                   | 8. US EPA I  | D Number   | D. Hansporter                           | , i iione  |            |              |                        |  |  |
|                  |   | . 0                     |  |  | E. State Transporter's                  | E. State Transporter's ID                        |            |              |                        |  |  |
| +                | 9. Designated Facility Name and Site  | Address                 | 10. US FPA   | 10. US EPA ID Number   |   |  |            |              |                        |  |  |
|                  | SUPERIOR LANDFILL   |                         | 201  | G. State Facility  | ID                                      |  |            |              |                        |  |  |
|                  | 3001 LITTLE NECK ROAD   |                         |  |  | H. State Facility                       |  | 912-9      | 27-611       | 3                      |  |  |
| M                | Savannah, GA 31419  |                         |  |  |   | Thomas and the second                            |            | 2, 011       |                        |  |  |
|                  |   |                         |  |  |   |  |            |              |                        |  |  |
| G                | 11. Description of Waste Materials  |                         |  | No. Ty   |   | . Unit<br>t./Vol.                                | I. N       | lisc. Commer | nts                    |  |  |
| E<br>N           | a. COAL ASH& COAL CONTAM  | INATED WASTE            |  | 1,1  | 717                                     | -  |            | EN TO        |                        |  |  |
| E                |   |                         |  | XIL  |   |  |            |              | TALLY MAZE THE CONTROL |  |  |
| R                |   | # 375200GAKRA           |  |  |   |  |            |              |                        |  |  |
| A<br>T           | b.  |                         |  |  |   |  |            |              |                        |  |  |
| 0                |   |                         |  |  |   |  |            |              |                        |  |  |
| R                | C.  | M Profile #             |  |  |   |  |            |              |                        |  |  |
|                  |   |                         |  |  |   |  |            |              |                        |  |  |
|                  |   | M Profile #             |  |  | Racinalida di Sa                        |  |            |              | in the same            |  |  |
|                  | d.  |                         |  |  |   |  | 100        |              |                        |  |  |
|                  |   |                         |  |  |   |  |            |              |                        |  |  |
| -                | J. Additional Descriptions for Mater  | M Profile #             |  | K. Disposal Loc  |   |  |            |              |                        |  |  |
|                  | J. Additional Descriptions for Mater  | iais Listeu Above       |  | K. Disposal Loc  | n/87/11                                 | n 187 1171                                       |            |              |                        |  |  |
| 3                |   |                         |  | Cell   | NJOOI                                   |  | Level      |              |                        |  |  |
| -                | AE CONTRACTOR OF THE PROPERTY | A LUC IN C              |  | Grid   | 1.213                                   | 7  |            |              |                        |  |  |
|                  | 15. Special Handling Instructions and   | Additional Information  | n  |  | 0-0160                                  |  |            |              |                        |  |  |
|                  |   |                         | 0.45   |  | A STATE OF                              |  |            |              |                        |  |  |
|                  | Purchase Order # GPC1076029   | 3                       | EMERGENCY CO   | NTACT / PHONE N  | 10.:                                    |  |            |              |                        |  |  |
|                  | 16. GENERATOR'S CERTIFICATE:  |                         |  |  |   |  |            |              |                        |  |  |
|                  | I hereby certify that the above-describ   | oed materials are not h | nazardous wastes as defi   | ned by CFR Part 26   | 1 or any applicable state               | e law, hav                                       | ve been fu | lly and      |                        |  |  |
|                  | accurately described, classified and pa   | ackaged and are in pro  |  |  | to applicable regulation                | s.   |            |              |                        |  |  |
|                  | Printed Name B + Novich   |                         | Signature "On beh  | alt of"  |   |  | Month      | Day          | Year //                |  |  |
| Т                | 17. Transporter 1 Acknowledgement   | of Receipt of Materials | S  | -11  |   | Y Y  | ()         |              | 112                    |  |  |
| T<br>R<br>A<br>N | Printed Names - 111   | MIN                     | Signature  | AN.  | /                                       | - 77/  | Month      | Day          | Year                   |  |  |
| S                | VELTURN CY  | RAH                     | X SAIII  | 1 me   |   |  | 5          | 9            | 17                     |  |  |
| P<br>O<br>R<br>T | 18. Transporter 2 Acknowledgement   | of Receipt of Material  | 1/   | ast vis  |   |  | 1          | ,            |                        |  |  |
| T<br>E           | Printed Name  |                         | Signature  |  |   |  | Month      | Day          | Year                   |  |  |
| R                |   |                         | 1. 4- 1  |  |   |  |            |              |                        |  |  |
| F                | 19. Certificate of Final Treatment/Dis  | 404                     |  |  |   |  |            |              |                        |  |  |
| A<br>C           | I certify, on behalf of the above listed applicable laws, regulations, permits a  | ledge, the above-o      | described waste was ma   | naged in   | complian                                | ce with all                                      | - 1        |              |                        |  |  |
| L                | 20. Facility Owner or Operator: Certi   |                         | THE RESERVE OF THE PARTY OF THE | covered by this ma   | nifest.                                 |  |            | 4            |                        |  |  |
| T                | Printed Name  |                         | Signature  | 1  |   | 7  | Month      | CDay         | Year                   |  |  |
| Υ                |   |                         |  |  |   |  | 7          | 11           | 0                      |  |  |
|                  | White-TREATMENT, STORAGE, DISPO   | SAL FACILITY COPY       | #2 COPY  | Yellow-  | GENERAT                                 | OR #1 CO   | PY         |              |                        |  |  |

Pink- FACILITY USE ONLY

Volume



Superjur Land(5)) .000( 1.10) to Merck 161 -Savannah, GA, 31419 Ph: (912) 927-6113

Constance Name (4 (Ms) OPDM 375 9906 DRO (1 (Ms) Carrier 11 (Ms) TRUCKO MS (11)

Ficket Date 03/09/2001

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739454

Destination

1213

In

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/09/2018 16:35:07 Out 05/09/2018 16:35:07

Scale Inbound 1

Operator RENEE RENEE

Volute to B JW1

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net . Tons

57280 15 23340 lb 33940 16 16.97

Comments

Firaging 4.

1 DYREE EUROPE HUMA NAMAZERA ERAT Om to their

COAL ASH & COAL CO 100

16.97 Tons

PORTW

Total Tax fobat flicket

cer //



| NON-HAZARDOUS MANIFEST  | A ID No. M                                   | No.                                 | 2. Page        | 1 of                 | of                        |                           |                           |           |  |  |
|---|--|-------------------------------------|----------------|----------------------|---------------------------|---------------------------|---------------------------|-----------|--|--|
|   | N/   |                                     |                |                      |                           | 20.                       | > -                       | -1        |  |  |
| 3. Generator's Mailing Address:   | Gen  | erator's Site Address (If           | lifferent than | malling).            |                           |                           | 7.7                       |           |  |  |
| GEORGIA POWER   | GEO  | ORGIA POWER PLAN                    | IT KRAFT       | maning):             |                           | fest Number               | 6739454                   | 1         |  |  |
| 241 RALPH MCGILL BLVD NE, E   |  | CROSSGATE RD.                       |                |                      | V                         | VMNA                      |                           |           |  |  |
| ATLANTA, GA 30308-3374  |  | RT WENTWORTH, G                     | A 31407        |                      |                           | B. State                  | Generator's ID            | 1         |  |  |
| 4. Generator's Phone 404-50   | 06-1365                                      |                                     |                |                      |                           |                           |                           |           |  |  |
| 5. Transporter 1 Company Name   |  | 6. US EPA II                        | O Number       |                      |                           |                           |                           |           |  |  |
| 11/205/21/1   | and -  |                                     |                |                      | C. State Transporter's ID |                           |                           |           |  |  |
| 7. Transporter 2 Company Name   | MALIAG                                       |                                     |                |                      |                           | porter's Phone            |                           |           |  |  |
| Transporter 2 company Name  | N  | 8. US EPA II                        | Number 1       | 100                  |                           |                           |                           |           |  |  |
|   |  |                                     |                |                      |                           | E. State Transporter's ID |                           |           |  |  |
| 9. Designated Facility Name and Site  | Address                                      | 10. US EPA                          |                | F. Transp            | orter's Phone             |                           |                           |           |  |  |
| SUPERIOR LANDFILL   |  |                                     |                | G State              | To allie u ID             |                           |                           |           |  |  |
| 3001 LITTLE NECK ROAD   |  |                                     |                |                      | G. State Facility ID      |                           |                           |           |  |  |
| Savannah, GA 31419  |  |                                     |                |                      | H. State                  | Facility Phone            | 912-927-6113              |           |  |  |
|   | N=1-2  |                                     |                |                      |                           |                           |                           |           |  |  |
| G 11. Description of Waste Materials  |  |                                     | No.            | ontainers<br>Type    | 13. Total<br>Quantity     | 14. Unit<br>Wt./Vol.      | I. Misc. Comments         | 6018      |  |  |
| a. COAL ASH& COAL CONTAMII  | NATED WASTE                                  |                                     |                | .,,,,                | Quantity                  | vvt./vol.                 |                           | 725       |  |  |
|   |  | -                                   | 10             | DI                   | 11X                       |                           |                           |           |  |  |
|   | 375200GAKRA                                  | 1                                   | V/             |                      |                           |                           |                           | diameter. |  |  |
| \ b.  |  | THE RESERVE                         |                |                      |                           |                           |                           |           |  |  |
|   |  |                                     | 9-1            |                      |                           |                           |                           |           |  |  |
| WN  | /I Profile #                                 |                                     |                |                      |                           |                           |                           | OR SHARES |  |  |
| C.  |  |                                     |                |                      |                           |                           |                           | . Initia  |  |  |
|   |  |                                     |                |                      |                           |                           |                           |           |  |  |
| d.  | 1 Profile #                                  |                                     |                |                      |                           |                           |                           |           |  |  |
|   |  |                                     |                |                      |                           |                           |                           |           |  |  |
|   |  |                                     |                |                      | J                         |                           |                           |           |  |  |
| J. Additional Descriptions for Materia  | 1 Profile #                                  |                                     |                |                      |                           |                           | William Commission of the |           |  |  |
| Securitions for iviateria   | is Listed Above                              |                                     | K. Dispos      | al Location          |                           |                           |                           |           |  |  |
|   |  |                                     | Cell           |                      |                           |                           |                           |           |  |  |
|   |  |                                     | Grid           | Λ                    | 13201.                    | 79                        | Level                     | 7         |  |  |
| 15. Special Handling Instructions and A   | dditional Information                        |                                     |                | - 1                  |                           |                           | 00000                     | -         |  |  |
|   |  |                                     |                |                      |                           |                           | 1-0                       |           |  |  |
| District Co. L. W. Co. Co. Co. Co. Co. Co. Co. Co. Co. Co                                 |  |                                     |                |                      |                           |                           | 6つ.17                     | 1         |  |  |
| Purchase Order # GPC10760293  |  | EMERGENCY CON                       | TACT / PHC     | NE NO.:              |                           |                           |                           |           |  |  |
| 16. GENERATOR'S CERTIFICATE:  |  |                                     |                |                      |                           |                           |                           |           |  |  |
| I hereby certify that the above-described accurately described, classified and pack       | d materials are not haz                      | ardous wastes as define             | d by CFR Pa    | rt 261 or a          | ny applicable             | state law, hav            | ve been fully and         |           |  |  |
| accurately described, classified and pack<br>Printed Name                                 | taged and are in proper                      | condition for transport             | ation accor    | ding to app          | licable regul             | ations.                   |                           |           |  |  |
| BFILIPOURL  |  | Signature "On behalf                | ot"            |                      |                           |                           | Month Day                 | Year      |  |  |
| 17. Transporter 1 Acknowledgement of  | Receipt of Materials                         | 0                                   |                | 1                    | - /                       | 1                         | 591                       | X         |  |  |
| Printed Name  |  | Signature                           | 1              | 7                    | -/                        | 1                         |                           |           |  |  |
| X roma ( Con  | 310001                                       | Signature                           | 1 2            | 4                    | . 6                       |                           | 199                       | Year      |  |  |
| 18. Transporter 2 Acknowledgement of  | Receipt of Materials                         | U                                   |                | 90                   | 1                         |                           | 5 9 1                     | 1         |  |  |
| Printed Name  |  | Signature                           |                |                      | -(-/                      |                           |                           |           |  |  |
|   |  |                                     |                |                      | (                         |                           | Month Day γ               | /ear      |  |  |
| 19. Certificate of Final Treatment/Dispos   | cal  |                                     |                |                      |                           |                           |                           |           |  |  |
|   |  | the best - C                        |                | N Chart S S Property |                           |                           |                           |           |  |  |
| I certify, on behalf of the above listed tre<br>applicable laws, regulations, permits and | licenses on the dates I                      | tile pest of my knowled isted above | ge, the abo    | ve-describ           | ed waste wa               | s managed in              | compliance with all       |           |  |  |
| 20. Facility Owner or Operator: Certifica   | ition of receipt of non-l                    | nazardous materials cov             | ared by this   | monifost             |                           |                           |                           | 349       |  |  |
| Printed Name  | /  | Signature                           | ered by this   | mannest.             |                           |                           |                           |           |  |  |
| (0  |  | ((1)                                |                |                      |                           |                           | Month Day Y               | ear       |  |  |
| White-TREATMENT, STORAGE, DISPOSA   | - TREATMENT, STORAGE, DISPOSAL FACILITY COPY |                                     |                |                      | V <sub>e</sub> II         | DW- GENERATO              | 00011                     | 8         |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253335

Volumo

Cardoner Name (3 (183) APARTS 7 FUNCTION (185) Carrier 111 KG Ficket Date WS/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

State Waste Code

Manifest 6739455

Destination. [3]]

In

Profile

SZEGWENKEN (CHE OSE & CONTINUED WASHI) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/15/2018 08:10:28 Out 05/15/2018 08:10:28

Scale Inbound 1

WW

Operator rb

rb

Gross Tare Net

58820 16 25340 1b 33480 16

16.74

Comments

Printing

1 33%

UIM +

Reder

Volicetoh 1.10

Gen EPA ID NR

Container

Driver

Check# Billing #

170

19/19/19/37

film (1111).

Tons

(h-inin

COAL ASH & COAL CO 100

16.74 Tons

PORTW

Tidad Tax Total Ticket



|             | WASTE MANAGEMENT  | 1. Generator's US EPA                | ID No. Mai  | nifest Doc No            | ).              | 2. Page 1 c  | of   |                        |              |           |  |
|-------------|---|--------------------------------------|---|--------------------------|-----------------|--|--|------------------------|--------------|-----------|--|
|             | NON-HAZARDOUS MANIFEST  | N /                                  | A   |                          |                 |  |  | 7'1                    | 5            |           |  |
|             | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, ATLANTA, GA 30308-3374 4. Generator's Phone 404-5 | GEC<br>BIN#10221 155                 | erator's Site Address (If dif<br>DRGIA POWER PLANT<br>CROSSGATE RD.<br>RT WENTWORTH, GA | KRAFT                    | ing):           | A. Manifes   | MNA  | 67394<br>Generator's I | 946-52-53    |           |  |
|             | 5, Transporter 1 Company Name   | 00-1303                              | 6. US EPA ID  | Number                   |                 |  |  |                        |              |           |  |
|             | 1120-110  | ~ /                                  |   |                          |                 | _ 3,774,040,000,000,000,000,000                            | ansporter's II   | )                      |              |           |  |
|             | [ W 3491 G  | rachag                               | a HC FDA ID   | Name of the last         |                 | D. Transporter's Phone                                     |  |                        |              |           |  |
|             | 7. Transporter 2 Company Name   |                                      | 8. US EPA ID  | Number                   |                 | E. State Tr  | ansporter's II   | )                      |              |           |  |
|             |   |                                      |   |                          | Elg.            | F. Transporter's Phone                                     |  |                        |              |           |  |
|             | 9. Designated Facility Name and Site  | Address                              | 10. US EPA I  | D Number                 |                 | G. State Facility ID  H. State Facility Phone 912-927-6113 |  |                        |              |           |  |
|             | SUPERIOR LANDFILL   |                                      |   |                          |                 |  |  |                        |              |           |  |
|             | 3001 LITTLE NECK ROAD   |                                      |   |                          |                 | H. State F   | acility Phone  | 912-9                  | 27-0113      |           |  |
|             | Savannah, GA 31419  |                                      |   |                          |                 |  |  |                        |              |           |  |
| G           | 11. Description of Waste Materials  |                                      |   | 12. Cont                 | tainers<br>Type | 13. Total<br>Quantity                                      | 14. Unit<br>Wt./Vol.   | I. Mis                 | sc. Comment  | ts        |  |
| E           | a. COAL ASH& COAL CONTAM  | IINATED WASTE                        |   | No.                      |                 | 1 = -  |  |                        | F 9 3        |           |  |
| N           | a. COME POPIC CONTECTION  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   | 110                      | DT              | 11   |  |                        |              |           |  |
| E<br>R      | WM Profile  | # 375200GAKRA                        | d   | $\mathcal{J}\mathcal{G}$ |                 | 777 H ***<br>5   |  |                        |              |           |  |
| A           | b.  |                                      |   |                          |                 |  |  |                        |              |           |  |
| T           |   |                                      |   |                          |                 |  | The state of the s |                        |              |           |  |
| R           |   | VM Profile #                         |   |                          |                 |  |  |                        | riskovalili. |           |  |
|             | C.  |                                      |   |                          |                 |  |  |                        |              |           |  |
|             |   | VM Profile #                         |   |                          | files estate    |  | The second   |                        |              | 700740000 |  |
|             | d.  | 20 - U. (L.) algoto. Warreston       |   |                          |                 |  |  |                        |              |           |  |
|             |   |                                      |   |                          |                 | 14.7   |  |                        |              |           |  |
|             |   | WM Profile #                         |   |                          |                 |  |  |                        |              |           |  |
|             | J. Additional Descriptions for Mate   | erials Listed Above                  |   | K. Disposa               | al Location     | 11374  | 1179   |                        | 6            |           |  |
|             |   |                                      |   | Cell                     |                 | V .  | 71   | Level                  |              |           |  |
|             |   |                                      |   | Grid                     | - 6             | 1  | 0)   |                        |              |           |  |
|             | 15. Special Handling Instructions an  | d Additional Information             | n   |                          |                 |  |  |                        |              |           |  |
|             |   |                                      |   |                          |                 |  |  |                        |              |           |  |
|             | Purchase Order # GPC107602  | 93                                   | EMERGENCY CO  | NTACT / PHO              | ONE NO.:        |  |  | 711                    |              |           |  |
|             | 16. GENERATOR'S CERTIFICATE:  |                                      |   |                          |                 |  |  | ALL TO                 | V 3          |           |  |
|             | I hereby certify that the above-desc  | ribed materials are not l            | nazardous wastes as defir   | ed by CFR Pa             | art 261 or      | any applicab   | le state law, h  | nave been fu           | lly and      |           |  |
|             | accurately described, classified and  | packaged and are in pro              | per condition for transpo<br>Signature "On beha   | rtation acco             | rding to ap     | oplicable regi   | ulations.  | Month                  | Day          | Year      |  |
|             | Printed Name  |                                      | Signature On bena   | iii Oi                   |                 |  |  | K                      | IK           | 12        |  |
| Т           | 17. Transporter 1 Acknowledgemen  | nt of Receipt of Material            | s   | -/                       | 7               | Equal (  |  | New York               | )            | 0         |  |
| R<br>A      | Printed Name  | non                                  | Signature   | 11/                      | 0 0             | 0  | 1000   | Month                  | Day          | Year      |  |
| S           | ×111. C'1111111   | WII                                  | X TYI,  | 1000                     | mys             | er-  |  | 15                     | 15           | 11        |  |
| OR          | 18. Transporter 2 Acknowledgemen  | nt of Receipt of Material            |   |                          | /               |  |  | Month                  | Day          | Year      |  |
| TE          | Printed Name  |                                      | Signature   |                          |                 |  |  |                        |              |           |  |
| R           |   | k k                                  |   |                          | 7               |  |  |                        |              | 1         |  |
| F<br>A<br>C | 19. Certificate of Final Treatment/I<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permit   | ed treatment facility, tha           | at to the best of my know<br>tes listed above.  | ledge, the ab            | oove-descr      | ibed waste   | was managed  | in complian            | ce with al   | I         |  |
| I<br>L      | 20. Facility Owner or Operator: Ce  | rtification of receipt of r          | non-hazardous materials   | covered by th            | nis manife:     | st.  | With the   |                        |              |           |  |
| T           | Printed Name  | ) ~                                  | Signature   |                          | -0.315          |  |  | Month                  | Day          | Year      |  |
| Y           | H   |                                      | 11  |                          |                 |  |  | )                      | DV.          | 1         |  |
| 1           | White-TREATMENT, STORAGE, DIS   | POSAL FACILITY COPY                  | Blue- GENERATOR   | R #2 COPY                |                 | Y  | ellow- GENER   | KATOR #1 CO            | PY           | 1         |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253336

Volume

Customer Name 6 (186) APONT 375 FUNCTORER 6 (186) Carrier 1111(8)

Ticket Date 05/15/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Manifest 6739456

Destination

(14)

In

Profile Generator

SZEWMERKEN (CODE ASTER (CODE CONTAMINATED WOSAL) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

05/15/2018 08:12:51 Out 05/15/2018 08:12:51

Scale Inbound 1

rb .

Operator

rb

Vehicle# LØ7

Gen EPA ID NR

0001037

Container

Billing #

Driver

Check#

Gross Tare Net Tons

56720 1b 25240 16 31480 16 15.74

(heigh)

PORTW

Comments

Predict 1 10% (16.9 (16.9) Rich ( America. COAL ASH & COAL CO 100 15.74 Tons

> Total Table fobal fleket



| NON-HAZARDOUS MANIFEST   | 1. Generator's US E     | PA ID No.                | Manifest Doc        | No.          | 2. Page                   | 1 of                   |               |                        |  |  |  |
|--|-------------------------|--------------------------|---------------------|--------------|---------------------------|------------------------|---------------|------------------------|--|--|--|
| NON-TIAZARDOUS MANIFEST  | N,                      | / A                      |                     |              | 1 1 2                     |                        | 71            | 10                     |  |  |  |
| 3. Generator's Mailing Address:  | Ge                      | enerator's Site Address  | If different than n | nailing):    | A Manit                   | est Number             | 1             | 11                     |  |  |  |
| GEORGIA POWER  | G                       | EORGIA POWER PLA         |                     |              |                           | VMNA                   | 6739456       |                        |  |  |  |
| 241 RALPH MCGILL BLVD NE,  | BIN#10221 15            | 55 CROSSGATE RD.         |                     |              | V                         |                        |               |                        |  |  |  |
| ATLANTA, GA 30308-3374   | PC                      | ORT WENTWORTH,           | GA 31407            |              |                           | B. State               | Generator     | 's ID                  |  |  |  |
|  | 06-1365                 |                          |                     |              |                           |                        |               |                        |  |  |  |
| 5. Transporter 1 Company Name  |                         | 6. US EPA                | ID Number           |              | No de la companya         | Henry III              | 2000 Page 200 |                        |  |  |  |
| 1005111  | malina                  |                          |                     |              | C. State Transporter's ID |                        |               |                        |  |  |  |
| 7. Transporter 2 Company Name  | 1001110                 | 8. US FPA                | 18.00               |              | D. Trans                  | D. Transporter's Phone |               |                        |  |  |  |
|  |                         | o. US EPA                | ID Number           |              | E Ctata                   | Fransporter's I        |               |                        |  |  |  |
|  |                         |                          |                     |              |                           | orter's Phone          |               |                        |  |  |  |
| 9. Designated Facility Name and Site   | Address                 | 10. US EP                | A ID Number         | d'in         |                           |                        |               |                        |  |  |  |
| SUPERIOR LANDFILL  |                         |                          |                     |              | G. State                  | Facility ID            |               |                        |  |  |  |
| 3001 LITTLE NECK ROAD  |                         |                          |                     |              | H. State                  | Facility Phone         | 912-          | 927-6113               |  |  |  |
| Savannah, GA 31419   |                         |                          | gamanan ja          |              |                           |                        |               |                        |  |  |  |
| 11. Description of Waste Materials   |                         |                          | 12.6-               | ontainers    |                           |                        |               |                        |  |  |  |
|  | 400 000 000 000 000     | Charles In 1891          | No.                 | Type         | 13. Total<br>Quantity     | 14. Unit<br>Wt./Vol.   | 1. 1          | Misc. Comments         |  |  |  |
| a. COAL ASH& COAL CONTAM   | INATED WASTE            |                          |                     | 1            | 157                       |                        |               | M TOWN I -             |  |  |  |
|  |                         |                          | 107                 | 1)           | 11 (                      |                        |               |                        |  |  |  |
| b. WM Profile  | # 375200GAKRA           | 0                        |                     |              |                           |                        |               | um Azz Alban           |  |  |  |
| 0.   |                         |                          |                     |              |                           |                        |               |                        |  |  |  |
|  |                         |                          |                     | EV N         | 3                         |                        |               |                        |  |  |  |
| W  | M Profile #             | MEYNER TON               |                     | William !    |                           |                        | 6/COVID-      | 334,877,711111,724-772 |  |  |  |
| c,   |                         |                          |                     |              |                           |                        |               |                        |  |  |  |
|  |                         |                          |                     |              |                           |                        |               |                        |  |  |  |
| d.   | M Profile #             |                          |                     |              |                           |                        |               |                        |  |  |  |
|  |                         |                          |                     |              |                           |                        |               |                        |  |  |  |
|  |                         |                          |                     |              |                           |                        |               |                        |  |  |  |
| J. Additional Descriptions for Materi  | M Profile #             |                          | K Di-               |              |                           |                        |               |                        |  |  |  |
| The state of the s | ais Listeu Above        |                          | K. Dispos           | al Location  | o no.                     |                        |               | 15                     |  |  |  |
|  |                         |                          | Cell                |              | V)/0                      | 177                    | Level         | 6                      |  |  |  |
|  |                         |                          | Grid                |              | 10:                       | 71                     | Level         |                        |  |  |  |
| 15. Special Handling Instructions and  | Additional Information  | ń                        |                     |              | VIII                      | 156                    |               | War and                |  |  |  |
|  |                         |                          |                     |              |                           | 1                      |               |                        |  |  |  |
| D. L. O. L. W. Cholomore   |                         |                          |                     | 0.8          | 7.5                       |                        |               | 100                    |  |  |  |
| Purchase Order # GPC10760293   | 3                       | EMERGENCY CO             | ONTACT / PHO        | ONE NO.:     |                           |                        |               |                        |  |  |  |
| 16. GENERATOR'S CERTIFICATE:   |                         |                          |                     |              |                           |                        |               |                        |  |  |  |
| I hereby certify that the above-describ  | ed materials are not h  | nazardous wastes as defi | ned by CFR Pa       | art 261 or a | any applicable            | e state law, ha        | ve been fu    | lly and                |  |  |  |
| accurately described, classified and pa<br>Printed Name  | ckaged and are in pro   | Signature "On beh        |                     | rding to ap  | plicable regu             | lations.               |               |                        |  |  |  |
| BFILIPOVICE  |                         | Salaras Oli Dell         | uil Ol              |              |                           |                        | Month         | Day Year               |  |  |  |
| 17. Transporter 1 Acknowledgement of   | of Receipt of Materials |                          |                     | Λ            | 4457515                   |                        | 10            | 10116                  |  |  |  |
| / Printed Name   | VIII                    | ( / Signature / /        | 10                  | - In         | 0                         |                        | Month         | Day Year               |  |  |  |
| ( UY, le   | 2 X( )                  | 1 0 1                    | 1 1                 | Q K          | X                         |                        | Wolldi        | Day Year               |  |  |  |
| 18. Transporter 2 Acknowledgement of   | of Receipt of Materials | /                        |                     |              | S                         |                        | 0             | 1 1/1                  |  |  |  |
| Printed Name   |                         | Signature                |                     |              |                           |                        | Month         | Day Year               |  |  |  |
|  |                         |                          |                     |              |                           |                        |               | , , , , , , ,          |  |  |  |
| 19. Certificate of Final Treatment/Disp  | osal                    |                          |                     |              |                           | - (4 <u></u>           |               |                        |  |  |  |
| I certify, on behalf of the above listed t   |                         | to the hest of my know   | ledge the she       | ove-docest   | hod wasta                 |                        |               |                        |  |  |  |
| applicable laws, regulations, permits an   | of licenses on the date | es listed above.         | icuge, the abo      | ove-descrit  | ued waste wa              | as managed in          | complianc     | e with all             |  |  |  |
| 20. Facility Owner or Operator: Certifi  | cation of receipt of no | on-hazardous materials o | covered by thi      | is manifest  |                           |                        |               |                        |  |  |  |
| Printed Name   | NO.                     | Signature                |                     |              |                           |                        | Month         | Day Year               |  |  |  |
|  | TV                      | (                        | ~                   | -            | -                         |                        | (             | Day Year               |  |  |  |
| White- TREATMENT, STORAGE, DISPOS  | di examinaria           | Blue- GENERATOR          | Procession .        |              |                           | low- GENERAT           |               |                        |  |  |  |

Pink-FACILITY USE ONLY



Original ficketh USSASA

Volume

Customer Name SLOREJOPOW 37520060KRO BLOKET Carrier 15 000 N

Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest ` 6739457 Destination

(21)

In

Prufile ... Generator SYMPONERICO (CODE DELLE CODE CONTOMONDED MESTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/15/2018 08:06:45 Out 05/15/2018 08:06:45

Scale Inbound 1

Operator rb

Gross Tare

61720 lb 25280 16 36440 lb

Net Tons 18.22

Comments

Vehicle# 34

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Product. 1 11% (41.17 1月11月 Wite. Dimenting. (heigh) PORTW COAL ASH & COAL CO 100 18.22 Tons

1

Tutal Tax Intal ficket



|                            | NON-HAZARDOUS MANIFEST  1. Generator's US I   | EPA ID No. Mar   | ifest Doc N           | lo.          | 2. Page 1  | of                   | 9.           | 2            | 3      |  |
|----------------------------|---|--|-----------------------|--------------|--|----------------------|--------------|--------------|--------|--|
|                            | GEORGIA POWER G   | enerator's Site Address (If diff<br>EORGIA POWER PLANT |                       | iling):      |  | st Number            | 6739         | 457          |        |  |
|                            |   | 55 CROSSGATE RD.<br>ORT WENTWORTH, GA                  | 31407                 |              | B. State Generator's ID                          |                      |              |              |        |  |
|                            | 5. Transporter 1 Company Name   | 6. US EPA ID   | Number                |              | C. State Transporter's ID D. Transporter's Phone |                      |              |              |        |  |
|                            | 7. Transporter 2 Company Name   | 8. US EPA ID   | Number                |              | E. State T                                       | ransporter's ID      |              |              |        |  |
|                            | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD  | 10. US EPA II  | ) Number              |              | G. State F                                       | acility ID           | 012.0        | 27.6442      |        |  |
|                            | Savannah, GA 31419  |  |                       |              |  | acility Phone        | 912-9.       | 27-6113      |        |  |
| G                          | 11. Description of Waste Materials  |  | No.                   | Type         | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol. | l. Mi        | sc. Comments | i      |  |
| E<br>N<br>E                | a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKR   | B  | 134                   | DT           | 17   |                      |              |              |        |  |
| R<br>A<br>T<br>O           | b.  | ^  |                       |              |  |                      |              |              |        |  |
| R                          | c. WM Profile #   |  |                       |              |  |                      |              |              |        |  |
|                            | d. WM Profile #   |  |                       |              |  |                      |              |              |        |  |
|                            | WM Profile #  |  |                       |              |  |                      |              |              |        |  |
|                            | J. Additional Descriptions for Materials Listed Above   |  | K. Dispos  Cell  Grid | al Location  | 32   | 31                   | Level        | 6            |        |  |
|                            | 15. Special Handling Instructions and Additional Informat   | ion  | dilu                  | 6            | XII  | 0)0                  |              | -            |        |  |
|                            | Purchase Order # GPC10760293  | EMERGENCY CON  | TACT / PHO            | ONE NO.:     |  |                      |              |              |        |  |
|                            | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are no accurately described, classified and packaged and are in p                 | ot hazardous wastes as define                          | ed by CFR P           | art 261 or a | any applicabl                                    | e state law, ha      | ive been ful | ly and       |        |  |
| 7                          | Printed Name B + Novice  17. Transporter 1 Acknowledgement of Receipt of Mater  | Signature "On behal                                    |                       |              |  |                      | Month 5      | Day 15       | Year / |  |
| R<br>A<br>N<br>S           | Printed Name  | Signature  |                       | ~            | ~  |                      | Month        | Day /5       | Year   |  |
| P<br>O<br>R<br>T<br>E<br>R | 18. Transporter 2 Acknowledgement of Receipt of Mater Printed Name  | Signature  |                       |              |  |                      | Month        | Day          | Year   |  |
| F<br>A<br>C                | 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, tapplicable laws, regulations, permits and licenses on the | dates listed above.                                    |                       |              |  | vas managed ir       | n complianc  | e with all   |        |  |
| L<br>I<br>T                | 20. Facility Owner or Operator: Certification of receipt o  | f non-hazardous materials co<br>Signature              | vered by th           | nis manifest |  |                      | Month        | ) Day        | Year   |  |
| Y                          | White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  | Blue- GENERATOR  | t2 COPY               | 10           | Ye   | ellow- GENERA        | TOR #1 CO    | )/<br>py     | V      |  |

Pink- FACILITY USE ONLY



Original ftetenk# 12533337

Untume

Cartomer Name 6 (486) first fill 876 670/66 (486) 6 (486) Caerder - 16 fill) N

ficket Date Wollished B

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Ruska

litate Waste Cale

Manifest

6739458

Destination

13(1

Ful 330

SYSTEMATICAL COOK WITH A COOK CONTONION OF THE WEST !

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/15/2018 08:15:19 Out 05/15/2018 08:39:10

Scale Inbound 1 Dutbound

Operator

rb

LBEJARAN

Gross Tare

64800 1b 27960 lb

Net Tons

36840 1b 18.42

Comments

Prachat

1 11%

田園

Vehiclek W

Container

ditting #

Gen HY ID NR

Driver

Check#

00010.37

Omenust.

(moinin

COAL ASH & COAL CO 100

18.42 Tons

PORTW

Total Tax fotal ficket



| -           |  |                     |  |                                       |               |              |                 |            |   |           |
|-------------|--|---------------------|--|---------------------------------------|---------------|--------------|-----------------|------------|---|-----------|
|             | NON-HAZARDOUS MANIFEST  1. Generat   | tor's US EPA<br>N / |  | nifest Doc N                          | lo.           | 2. Page 1    | of              | 7          | 27                                      |           |
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER   | 2000000             | erator's Site Address (If di<br>DRGIA POWER PLAN |                                       | illing):      | 1,00,000,000 | st Number       | 6739       | 9458                                    | bw (      |
| b           | 241 RALPH MCGILL BLVD NE, BIN#10221  | 1000000             | CROSSGATE RD.                                    |                                       |               | VV           | MNA             |            |   |           |
|             | ATLANTA, GA 30308-3374   |                     | RT WENTWORTH, GA                                 | 31407                                 |               |              | B. State G      | enerator's | ID .                                    |           |
| Ħ           | 4. Generator's Phone 404-506-1365  |                     |  |                                       |               |              |                 |            |   |           |
|             | 5. Transporter 1 Company Name  |                     | 6. US EPA ID                                     | Number                                | (0)           |              |                 |            |   |           |
|             | (1. 1. 0. 1.   |                     |  | · · · · · · · · · · · · · · · · · · · |               | C. State T   | ransporter's ID | 7          |   |           |
|             | LOQS491 15/1901  | 79                  |  |                                       |               |              | orter's Phone   | e La Roy E |   | (1550 P.E |
|             | 7. Transporter 2 Company Name  |                     | 8. US EPA ID                                     | Number                                | 1             |              |                 |            |   |           |
|             |  |                     |  |                                       |               |              | ransporter's ID |            |   | L v       |
|             | 9. Designated Facility Name and Site Address   |                     | 10. US EPA I                                     | D Niveshau                            |               | F. Transp    | orter's Phone   |            |   |           |
|             | SUPERIOR LANDFILL  |                     | IU. US EPA I                                     | D Number                              |               | C Chile F    |                 |            |   |           |
|             | 3001 LITTLE NECK ROAD  |                     |  |                                       |               | G. State F   |                 |            |   |           |
| П           | Savannah, GA 31419   |                     |  |                                       |               | H. State F   | acility Phone   | 912-9      | 927-6113                                | 3         |
|             | Savaillali, GA 31419   |                     |  |                                       |               |              |                 |            |   |           |
|             | 11 Description - 51M - 4 - 84 - 4 - 1  |                     |  | 12. Con                               | ntainers      | 13. Total    | 14. Unit        |            |   |           |
| G           | 11. Description of Waste Materials   |                     |  | No.                                   | Туре          | Quantity     | Wt./Vol.        | I. N       | lisc. Commen                            | ts        |
| E<br>N      | a. COAL ASH& COAL CONTAMINATED W   | /ASTE               |  | 140                                   | 1-            | 177          |                 |            |   |           |
| E           |  |                     | 1  | 37-28                                 | 1)            | 18           |                 |            |   |           |
| R           | WM Profile # 375200  | OGAKRA              |  |                                       |               |              |                 |            |   |           |
| A           | b  |                     |  |                                       |               |              |                 |            |   |           |
| T<br>O      |  |                     |  |                                       | 200           |              |                 |            |   |           |
| R           | WM Profile #   |                     |  | reaction with the                     |               |              |                 |            | 111111111111111111111111111111111111111 |           |
| 9           | <b>c.</b>  |                     |  |                                       | ATT TO        |              |                 | 77         |   |           |
| ч           | the same of the sa |                     |  | Alexandra (Alexandra)                 |               |              |                 |            |   |           |
|             | WM Profile #   |                     |  |                                       |               | 1.100        |                 |            |   | A TOTAL   |
|             | d.   |                     |  | - 18                                  |               |              |                 |            |   |           |
|             |  |                     |  |                                       |               |              | in and          |            |   |           |
|             | WM Profile #   |                     |  |                                       | Harris Street |              |                 |            |   |           |
|             | J. Additional Descriptions for Materials Listed Al   | bove                |  | K. Disposa                            | al Location   |              |                 | N          | 197.                                    | 1176      |
|             |  |                     |  | Cell                                  |               |              |                 | Lavel      | 15cm                                    | 161       |
|             |  |                     |  | Grid                                  |               |              |                 | Level '    | 211                                     | 157       |
| -           | 15. Special Handling Instructions and Additional In  | nformation          |  |                                       |               | F-1-1        |                 | ,          | 1000                                    |           |
|             |  |                     |  |                                       |               |              |                 |            | (e)                                     | 1         |
|             |  |                     |  |                                       |               |              |                 |            |   |           |
|             | Purchase Order # GPC10760293   |                     | EMERGENCY CON                                    | ITACT / PHO                           | ONE NO.:      |              |                 |            |   |           |
|             | 16. GENERATOR'S CERTIFICATE:   |                     |  |                                       |               |              |                 |            |   |           |
|             | I hereby certify that the above-described material   | s are not ha        | azardous wastes as define                        | ed by CER Pa                          | ert 261 or a  | ny annlicahl | e state law, ha | ve heen fu | lly and                                 |           |
|             | accurately described, classified and packaged and  |                     |  |                                       |               |              |                 | ve been id | ny ana                                  |           |
|             | Printed Name   |                     | Signature "On behal                              | f of"                                 |               |              |                 | Month      | Day                                     | Year      |
| Į.          | BFILIPOUICH  |                     | BK   |                                       |               |              |                 | 5          | 15                                      | 16        |
| T<br>R      | 17. Transporter 1 Acknowledgement of Receipt of  | f Materials         |  | 11                                    | 1             |              |                 |            | 1                                       |           |
| A<br>N<br>S | Printed Name   |                     | Signature  | / //                                  | -             |              |                 | Month      | Day                                     | Year      |
| S           | X Jode by May - )  |                     | 1 1017   | 2011                                  | V             |              |                 | 5          | 15                                      | 17        |
| O<br>R      | 18. Transporter 2 Acknowledgement of Receipt of  | f Materials         | /  | /                                     |               |              |                 |            |   | ,         |
| TE          | Printed Name   |                     | Signature  |                                       |               |              |                 | Month      | Day                                     | Year      |
| R           |  |                     |  |                                       |               |              |                 |            |   |           |
| H           | 19. Certificate of Final Treatment/Disposal  | 100                 |  |                                       | -             |              |                 |            |   |           |
| F<br>A<br>C | I certify, on behalf of the above listed treatment fa  | acility, that       | to the best of my knowle                         | dge, the ab                           | ove-describ   | oed waste w  | as managed in   | compliano  | e with all                              |           |
| C           | applicable laws, regulations, permits and licenses   |                     |  | 5 ,                                   |               |              |                 |            |   |           |
| L           | 20. Facility Owner or Operator: Certification of re  | eceipt of no        | n-hazardous materials co                         | vered by th                           | is manifest   | 1            |                 |            |   |           |
| T           | Printed Name   | V-7                 | Signature  | 1 2 2                                 | 1/            | 70           |                 | Month      | Day                                     | Year      |
|             | ()   | 10                  |  |                                       | V             | K            |                 | ALC: N     |   |           |
|             | White-TREATMENT, STORAGE, DISPOSAL FACILITY  | Y COPY              | Blue- GENERATOR #                                | ‡2 COPY                               | 11            | // Ye        | llow- GENERAT   | OR #1 CO   | PΥ                                      |           |

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Original Ticket# 1253344

Volume

Constance Name (SEIRS) OPONESYS POWERSKE SEDSES Carrier - B AND N

ficket Oate W3/15/2018

Payment Type Gredit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739459

Destination

(31)

In

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

Out 05/15/2018 08:27:22

05/15/2018 08:27:22

Scale Inbound 1 rb

Operator

United to B. Child

Gen EPA ID NR

0001037

Container Driver

Check# Billing #

rb

Gross Tare

59160 lb 21800 lb

Net 37360 lb 18.68 Tons

Comments

### WASTE MANAGEMENT

| Pro | duct               | LD% | Qty               | UOM       | Rate | Tax | Amount | Origin                          |
|-----|--------------------|-----|-------------------|-----------|------|-----|--------|---------------------------------|
|     |                    |     | * H # # H F F F F | 医罗德格氏性 化二 |      |     |        | P R R R R R R R R R R R R R R R |
| 1   | COAL ASH & COAL CO | 100 | 18.58             | Tons      |      |     |        | PORTW                           |

Total Tax febal fishert





| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                                |   | nifest Doc No.                   | 2. Page 1 c                        | of  | 7                   | .30          | 2    |
|--|--|---|----------------------------------|------------------------------------|---|---------------------|--------------|------|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | BIN#10221 GEC<br>155<br>POF                          | erator's Site Address (If dif<br>DRGIA POWER PLANT<br>CROSSGATE RD.<br>RT WENTWORTH, GA | T KRAFT                          | A. Manifes                         | MNA   | 6739<br>Generator's |              |      |
| 4. Generator's Phone 404-5 Transporter 1 Company Name 7. Transporter 2 Company Name  | 606-1365  <br>Cading                                 | 6. US EPA ID  |                                  | D. Transpo                         | ansporter's IC<br>orter's Phone<br>ansporter's IC |                     |              |      |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | e Address  | 10. US EPA I  | D Number                         | G. State Fa                        | rter's Phone<br>acility ID<br>acility Phone       | 912-9               | 27-6113      |      |
| 11. Description of Waste Materials   | 15 10 15 15  |   | 12. Containers No. Type          | 13. Total<br>Quantity              | 14. Unit<br>Wt./Vol.                              | I. Mi               | isc. Comment | S    |
| a. COAL ASH& COAL CONTAN   |  | 3   | 12401                            | 18                                 |   |                     |              |      |
| b.   | e# 375200GAKRA  WM Profile#                          |   |                                  |                                    |   |                     |              |      |
|  | WM Profile #   |   |                                  |                                    |   | an Illian           | Seminor      |      |
| d,   | WM Profile #   |   |                                  |                                    |   |                     | um al saids  |      |
| J. Additional Descriptions for Mat   | erials Listed Above                                  |   | K. Disposal Location  Cell  Grid | 131                                | 7L  | Level               | 1,5          |      |
| 15. Special Handling Instructions ar   | nd Additional Information                            | n   |                                  | 201.                               |   |                     |              |      |
| Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc accurately described, classified and Printed Name              | ribed materials are not h                            | nazardous wastes as defin   | rtation according to a           | r any applicabl<br>applicable regu | e state law, hi<br>lations.                       | ave been fu         | lly and      | Year |
| 17. Transporter 1 Acknowledgeme Printed Name   |  | Signature   | lup                              |                                    |   | Month 5             | Day / 5      | Year |
| 18. Transporter 2 Acknowledgeme Printed Name   | nt of Receipt of Materials                           | Signature   |                                  | W.                                 |   | Month               | Day          | Year |
| 19. Certificate of Final Treatment/l<br>I certify, on behalf of the above list<br>applicable laws, regulations, permit<br>20. Facility Owner or Operator: Ce | ed treatment facility, thats and licenses on the dat | tes listed above.<br>on-hazardous materials c   |                                  |                                    | ras managed i                                     | in compliand        | ce with all  |      |
| Printed Name   | PS   | Signature   | C                                |                                    |   | ATOR #1 CO          | Day /        | Year |

Pink- FACILITY USE ONLY



Original Ticket# 1253388

Volume

Costoner Name BLORE OPUN 37520060KBO BLORE) Carrier J. OND N

Ticket Date 05/15/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739460

Destination

PO

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In Ø5/15/2018 10:02:16

Out 05/15/2018 10:02:16

Scale Inbound 1

Operator RB RB

Vehicle# 34 Container

Billing #

Sen EPh 10 NR

191919 1 1913 7

Driver

Check#

60140 lb Gross 25280 1b Tare Net 34860 1b Tons 17.43

Comments

Product Qty Rate Tax MOU Amount Origin LD% 1 COAL ASH & COAL CO 100 17.43 Tons PORTW

Total Tax fobal ficket



| WASIE MANAGEMENT  |  |                    |   |                       |                                  | -01   |        |
|---|--|--------------------|---|-----------------------|----------------------------------|---|--------|
|   | EPA ID No. N<br>/ A                              | ∕Ianifest Doc No   | ).                                      | 2. Page 1             | of                               | 9.2   | 0      |
| GEORGIA POWER G   | enerator's Site Address (If<br>EORGIA POWER PLA) |                    | ing):                                   | 115                   | est Number                       | 6739460   |        |
|   | 55 CROSSGATE RD.                                 | CA 24407           |   | 1                     |                                  | ienerator's ID  |        |
| 4. Generator's Phone 404-506-1365   | ORT WENTWORTH, G                                 | 3A 314U/           |   |                       |                                  |   |        |
| 5. Transporter 1 Company Name   | 6. US EPA  | ID Number          |   |                       |                                  |   |        |
| Logstal Gradina   |  |                    |   |                       | ransporter's ID<br>orter's Phone |   |        |
| 7. Transporter 2 Company Name   | 8. US EPA  | ID Number          |   | E. State T            | ransporter's ID                  |   |        |
| 9. Designated Facility Name and Site Address  | / 10. US FPA                                     | ID Number          |   |                       | orter's Phone                    |   |        |
| SUPERIOR LANDFILL   | IU. USEPA  | (ID Number         |   | G. State F            | acility ID                       |   |        |
| 3001 LITTLE NECK ROAD Savannah, GA 31419  |  |                    |   | H. State F            | acility Phone                    | 912-927-61  | 13     |
| Savaillari, GA 31413  |  |                    |   |                       |                                  |   |        |
| G 11. Description of Waste Materials  |  | 12. Contai<br>No.  | iners<br>Type                           | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.             | I. Misc. Comm   | ents   |
| a. COAL ASH& COAL CONTAMINATED WASTE  | -  | Pholli             | 7                                       | 17                    |                                  |   |        |
| E<br>R WM Profile # 375200GAKRA   | 4  | P 151              |   |                       |                                  |   |        |
| Λ <b>b</b> .  |  |                    |   |                       |                                  | CONTRACTOR OF THE PROPERTY OF |        |
| WM Profile #  |  |                    |   |                       |                                  |   |        |
| c.  |  |                    |   |                       |                                  |   |        |
| WM Profile #  |  |                    |   |                       |                                  |   |        |
| d.  |  |                    |   |                       |                                  |   |        |
| WM Profile #  |  |                    |   |                       |                                  |   |        |
| J. Additional Descriptions for Materials Listed Above   |  | K. Disposal L      | Location                                |                       | - 6                              |   |        |
|   |  | Cell               | Th                                      | 371                   | 1/4                              | Level 6   | 1      |
| 15. Special Handling Instructions and Additional Information  |  | Grid               | 1                                       | 871                   | 31                               |   |        |
| 25. Special rightaning instructions and Additional Information  | ni.  |                    |   | -) 1 4                | 3                                |   |        |
| Purchase Order # GPC10760293  |  |                    | *************************************** |                       |                                  | 10000   |        |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE:  | EMERGENCY CO                                     | NTACT / PHONI      | E NO.:                                  |                       |                                  |   |        |
| I hereby certify that the above-described materials are not   | hazardous wastes as defir                        | ned by CFR Part    | 261 or ar                               | ny applicable         | e state law, hav                 | e been fully and  |        |
| accurately described, classified and packaged and are in pro-<br>Printed Name   | Signature "On beha                               |                    | ng to app                               | licable regul         | ations.                          | Month Day   | Year   |
| 17. Transporter 1 Acknowledgement of Receipt of Materia   | BPLL   |                    |   |                       |                                  | 5 15  | 1/8    |
| Printed Name  | Signature  | e                  | 7                                       | 7                     |                                  | Month Day   | Year   |
| 18. Transporter 2 Acknowledgement of Receipt of Material  | 10   |                    |   |                       |                                  | 5 15  | 1/8    |
| Printed Name  | Signature  |                    |   |                       |                                  | Month Day   | Year   |
|   |  | 1 1 1 2 1 3        | 11/1/19                                 |                       |                                  |   |        |
| 19. Certificate of Final Treatment/Disposal   | at to the best of a section                      | adas il            | - d 9                                   | i e                   |                                  |   |        |
| I certify, on behalf of the above listed treatment facility, the applicable laws, regulations, permits and licenses on the da | tes listed above.                                | THE REAL PROPERTY. |   | ed waste wa           | as managed in                    | compliance with a   |        |
| 20. Facility Owner or Operator: Certification of receipt of n   |  | overed by this r   | manifest.                               |                       |                                  | 6 16  | E 7. 7 |
|   | Signature  | 11                 |   |                       |                                  | (Month / (Day   | (Year  |
| White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  | Blue- GENERATOR                                  |                    |   | Yel                   | low- GENERATO                    | OR #1 COPY  | 1      |
| Pink- FACILITY USE ONLY   | Gold- TRANSPORTER                                | R #1 COPY          |   |                       |                                  |   |        |



Original Ticket# 1253390

Customer Name BEIRG OPUN SZEWNSOKKO BEURG Carrier IIIKS

Ticket Date 05/15/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

though a

State Waste Code

Manifest 6739461

Destination ...

P0

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Vehicle# L10 Container Driver Check# Witting # **WWW LW37** 

Gen EPA ID NR

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Rate

Time

In 05/15/2018 10:05:05 Out 05/15/2018 10:05:05

Scale Inbound 1

LD%

RB

Operator

HOU

Gross Tare Net

Volume

61160 lb 25340 1b 35820 1b 17.91

Comments

Product

Oty

Tax

Origin Amount

PORTW

1 COAL ASH & COAL CO 100

17.91 Tons

Total Tax

fotal floket



|                       | NON-HAZARDOUS MANIFEST  | 1. Generator's U                           | JS EPA ID No       | D. M   | anifest Doc I      | No.              | 2. Page 1                      | of   | 9.0                      | U               |
|-----------------------|---|--|--------------------|--|--------------------|------------------|--------------------------------|--|--------------------------|-----------------|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, E ATLANTA, GA 30308-3374 4. Generator's Phone 404-50  | BIN#10221<br>06-1365                       | GEORGIA<br>155 CRO | 's Site Address (If o<br>A POWER PLAN<br>SSGATE RD.<br>ENTWORTH, G           | IT KRAFT           | ailing):         |                                | st Number  MNA  B. State G   | 673946<br>Generator's ID | 61              |
|                       | 7. Transporter 2 Company Name   | adino                                      | 8.                 |  | D Number  D Number |                  | D. Transp                      | ransporter's ID<br>orter's Phone<br>ransporter's ID<br>orter's Phone |                          |                 |
|                       | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | Address                                    | 10.                | US EPA   | ID Number          |                  | G. State F                     |  | 912-927                  | 7-6113          |
| G                     | 11. Description of Waste Materials  |  |                    |  | 12. Co             | ntainers<br>Type | 13. Total<br>Quantity          | 14. Unit<br>Wt./Vol.   | I. Misc.                 | Comments        |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAM  | INATED WASTI<br># 375200GAk                |                    |  | 110                | DI               | 17                             |  |                          |                 |
| R<br>A<br>T<br>O<br>R | b.  | M Profile #                                |                    |  |                    |                  |                                |  |                          |                 |
|                       | d.  | M Profile #                                |                    |  |                    |                  |                                |  |                          |                 |
|                       | w   | M Profile #                                |                    |  |                    |                  |                                |  |                          |                 |
|                       | J. Additional Descriptions for Materi   | ials Listed Above                          |                    | 1  | K. Dispos          | al Location      | 1) a                           | 13211  | Level 2                  | 1-651           |
|                       | 15. Special Handling Instructions and   | Additional Inform                          | ation              |  | ,                  |                  | 16-1                           |  | ,-1                      |                 |
|                       | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-describe accurately described, classified and particle Name   | oed materials are r                        | proper con         | EMERGENCY CO<br>us wastes as defir<br>dition for transpo<br>gnature "On beha | ed by CFR P        | art 261 or a     | ny applicable<br>plicable regu | e state law, ha<br>lations.  |                          | and<br>Day Year |
| T<br>R                | 17. Transporter 1 Acknowledgement   | of Receipt of Mate                         | erials             | D T  | 7                  | )                |                                |  | 1511                     | 318             |
| ANSPO                 | Printed Name  18. Transporter 2 Acknowledgement   | of Receipt of Mate                         | X                  | gnature  | Han                | 1261             |                                |  | Month /                  | Day Year        |
| R<br>T<br>E<br>R      | Printed Name  |  | Si                 | gnature  |                    |                  |                                |  | Month                    | Day Year        |
| F A C I L I T Y       | 19. Certificate of Final Treatment/Dis<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits a<br>20. Facility Owner on Operator: Certification of Certification (Certification) | treatment facility,<br>and licenses on the | of non-haza        | d above.   |                    |                  |                                | as managed in  |                          | vith all        |
|                       | White- TREATMENT, STORAGE, DISPO  | SAL FACILITY COP                           | Y F                | Blue-GENERATOR   | #2 COPY            |                  | Yel                            | low- GENERAT   | OR #1 COPY               | ال ١١ ر         |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253392

Volume

Customer Name 6 (086) OPOM 375890000880 6 0860 Carrier 11188

Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739462

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/15/2018 10:09:38 Out 05/15/2018 10:09:38

Scale Inbound 1

LI)%

Qty

Operator RB RB

Vehicle# L07

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net Tons

56040 lb 25240 lb 30800 16

15.40

Comments

Product

Rate

Tax

COAL ASH & COAL CO 100 15.40 Tons

MOU

Amount

Origin

PORTW

Tutal Tant Total Ticket



| WASTE MANAGEMENT  | 1. Generator's US EPA  | ID No. Mai  | nifest Doc No |                          | 2. Page 1 c                                       | of                           | · ·           | 0   | _            |  |  |
|---|--|---|---------------|--------------------------|---|------------------------------|---------------|---|--------------|--|--|
| NON-HAZARDOUS MANIFEST  | N / A  | <sup>3</sup>  | 30 11-1       |                          |   | -65                          | 9             | 2X  | , = <u>'</u> |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                                  | GEO  | rator's Site Address (If dif<br>RGIA POWER PLANT      |               | ng):                     | A. Manifes  | t Number<br><b>VINA</b>      | 67394         | 162                                       |              |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5 |  | CROSSGATE RD.<br>T WENTWORTH, GA                      | 31407         |                          | B. State Generator's ID                           |                              |               |   |              |  |  |
| 5, Transporter 1 Company Name   | 00-1303  | 6. US EPA ID  | Number        |                          |   |                              |               |   |              |  |  |
| 1005111   | malin  |   |               |                          | C. State Transporter's ID  D. Transporter's Phone |                              |               |   |              |  |  |
| 7. Transporter 2 Company Name   | ICHINA   | 8. US EPA ID  | Number        |                          | orter s Priorie                                   | one                          |               |   |              |  |  |
|   |  |   |               |                          | PLOSON ASSESSMENT BASES                           | ansporter's ID               |               |   |              |  |  |
| 9. Designated Facility Name and Site  | Address  | 10. US EPA I  | D Number      |                          | F. Transpo  | orter's Phone                |               |   |              |  |  |
| SUPERIOR LANDFILL   |  |   |               |                          | G. State Fa                                       | acility ID                   |               |   |              |  |  |
| 3001 LITTLE NECK ROAD   |  |   |               |                          | H. State F  | acility Phone                | 912-92        | 27-6113                                   |              |  |  |
| Savannah, GA 31419  |  |   |               |                          |   |                              |               |   |              |  |  |
| At B  |  |   | 12. Cont      |                          | 13. Total   | 14. Unit                     | I. Mis        | c. Comments                               | 5            |  |  |
| E 2 COAL ASH& COAL CONTAIN  | INIATED WASTE  |   | No.           | Type                     | Quantity  | Wt./Vol.                     |               | 20-11-00-00-00-00-00-00-00-00-00-00-00-00 |              |  |  |
| a. COAL ASH& COAL CONTAN  | IIINATED WASTE   | ~   | MI            | T                        | 18  |                              |               |   |              |  |  |
| R WM Profile  | # 375200GAKRA  | 0   | 501           |                          |   |                              |               |   |              |  |  |
| A <b>b</b> .  |  |   |               |                          |   |                              | 4.            |   |              |  |  |
| T O   |  |   |               |                          |   |                              |               |   |              |  |  |
| R c.  | WM Profile #   |   |               |                          |   |                              |               |   |              |  |  |
|   |  |   |               |                          |   |                              |               |   |              |  |  |
|   | WM Profile #   |   |               |                          |   |                              |               |   |              |  |  |
| d.  |  |   |               |                          |   |                              |               |   |              |  |  |
|   | WM Profile #   |   |               |                          |   |                              |               |   |              |  |  |
| J. Additional Descriptions for Mate   | All the profit of the control of the |   | K. Disposa    | I Location               |   |                              |               |   |              |  |  |
|   |  |   | Cell   \_     |                          |   | 1,111                        | Level         |   | -00          |  |  |
|   | 1  |   | Grid          | 20                       | 1296  | 29/11                        | 956           | ESS                                       | 4            |  |  |
| 15. Special Handling Instructions an  | d Additional Information   |   |               |                          |   |                              |               |   |              |  |  |
| Purchase Order # GPC107602  | 93   | EMERGENCY CO  | NTACT / PHC   | NE NO.:                  |   |                              |               |   |              |  |  |
| 16. GENERATOR'S CERTIFICATE:  |  |   | 74            | 1.251                    | ie i  | la akaka lawa ik             | ava been ful  | llyand                                    |              |  |  |
| I hereby certify that the above-desc<br>accurately described, classified and      | ribed materials are not ha   | azardous wastes as defir<br>per condition for transpo | rtation accor | ort 261 or<br>ding to ap | any applicad<br>oplicable regi                    | ie state iaw, n<br>ulations. | ave been ru   | ily allu                                  |              |  |  |
| Printed Name  | puckages and are in prop   | Signature "On beha                                    | lf of"        | Harry.                   |   | The same                     | Month         | Day                                       | Year         |  |  |
| B+1/10011ch   |  | KK  |               |                          |   |                              | 5             | 10  | 10           |  |  |
| 17. Transporter 1 Acknowledgement Printed Name                                    | nt of Receipt of Materials   | Signature   | 1 7           | 2                        |   |                              | Month         | Day                                       | Year         |  |  |
| Printed Name  | ex.  | V V   | 10            |                          |   |                              | 5             | 15  | 18           |  |  |
| 18. Transporter 2 Acknowledgeme   | nt of Receipt of Materials   |   |               |                          |   |                              | Month         | Day                                       | Year         |  |  |
| Printed Name  |  | Signature   |               |                          |   |                              | Worth         | Day                                       | rear         |  |  |
| R   |  |   |               |                          |   |                              |               |   |              |  |  |
| 19. Certificate of Final Treatment/I  | Disposal   | t to the hest of my know                              | ledge, the ah | ove-desci                | ibed waste  | was managed                  | in complian   | ce with all                               |              |  |  |
| c applicable laws, regulations, permi   | s and licenses on the dat  | es listed above.                                      | V             |                          |   |                              |               |   | 3/4          |  |  |
| 20. Facility Owner or Operator: Ce  | rtification of receipt of no   | on-hazardous materials                                | covered by th | is manife                | st.   |                              | A.d. and last | Davis                                     | Ti voor      |  |  |
| Printed Name  | (3   | Signature   | (12)          |                          |   |                              | Month         | Day                                       | Year         |  |  |
| White- TREATMENT, STORAGE, DIS  | POSAL FACILITY COPY  | Blue- GENERATOI                                       | R#2 COPY      | -                        | Y   | ellow- GENER                 | ATOR #1 CO    | PY  | 1            |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253396

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N

Ticket Date 05/15/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739463

Destination PO ·

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/15/2018 10:14:49 Out 05/15/2018 10:14:49

Scale Inbound 1

Operator

RB RB

Gross Tare Net Tons

59840 15 21800 15 38040 15

19.02

Product

Comments

UOM

Vehicle# BN24

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Amount

Origin

1 COAL ASH & COAL CO 100 19.02 Tons

PORTW

Total Tax fobal ficket





| NON HAZARDOUS MANUELL   | 1. Generator's US EP      | PA ID No. M                  | No.           | 2. Page                  | 1 of                  |   |  |  |  |  |  |
|---|---------------------------|------------------------------|---------------|--------------------------|-----------------------|---|--|--|--|--|--|
| NON-HAZARDOUS MANIFEST  | N/                        |                              |               |                          | 2.1 ugc               | 101   | 0.00   |  |  |  |  |
| 3. Generator's Mailing Address:   |                           | nerator's Site Address (If o | lifforout at  |                          |                       |   | 1.50   |  |  |  |  |
| GEORGIA POWER   | GE                        | ORGIA POWER PLAN             | IT KRAFT      | mailing):                |                       | fest Number   | 6739463  |  |  |  |  |
| 241 RALPH MCGILL BLVD NE, E   |                           | 5 CROSSGATE RD.              |               |                          |                       | VVIVINA   |  |  |  |  |  |
| ATLANTA, GA 30308-3374  |                           | RT WENTWORTH, G              | A 31407       |                          |                       | B. State Generator's ID                               |  |  |  |  |  |
| 4. Generator's Phone 404-50   | 06-1365                   |                              |               |                          | A 77 1- 6"            |   |  |  |  |  |  |
| 5. Transporter 1 Company Name   |                           | 6. US EPA II                 | ) Number      |                          |                       | RE ARRIGINATION                                       |  |  |  |  |  |
| 1/12/2011/1   | No 1:00                   |                              |               |                          | C. State              | Transporter's   | ID   |  |  |  |  |
| 7. Transporter 2 Company Name   | 100,19                    |                              |               | 1                        |                       | porter's Phon   |  |  |  |  |  |
| , and a sempany name  |                           | 8. US EPA II                 | ) Number      |                          |                       |   |  |  |  |  |  |
|   |                           |                              |               |                          |                       | Transporter's   |  |  |  |  |  |
| 9. Designated Facility Name and Site  | Address                   | 10. US EPA                   | D Number      | 6                        | r. ITalis             | oorter's Phone  |  |  |  |  |  |
| SUPERIOR LANDFILL   |                           |                              |               |                          | G. State              | Facility ID   |  |  |  |  |  |
| 3001 LITTLE NECK ROAD   |                           | Programme and the second     |               |                          |                       | G. State Facility ID  H. State Facility Phone 912-927 |  |  |  |  |  |
| Savannah, GA 31419  |                           |                              | Edward.       |                          | Th. State             | racility Phone  | 912-927-6113   |  |  |  |  |
| 11 Decembring of the  |                           |                              |               |                          |                       |   | <b>沙村子以下了个人</b> 下去。  |  |  |  |  |
| 11. Description of Waste Materials  |                           |                              | 12. Co<br>No. | ntainers<br>Type         | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.                                  | I. Misc. Comments  |  |  |  |  |
| a. COAL ASH& COAL CONTAMII  | NATED WASTE               |                              | 1             | ., 100                   | additity              | vv., voi.   |  |  |  |  |  |
| a series and code containing  |                           | RI                           | DU            | 171                      | 11%                   |   |  |  |  |  |  |
| b. WM Profile #   | 375200GAKRA               | וט                           |               |                          |                       |   |  |  |  |  |  |
| 0.  |                           |                              |               |                          |                       |   |  |  |  |  |  |
|   |                           |                              |               |                          | at the                |   |  |  |  |  |  |
| c. WN   | // Profile #              |                              |               |                          |                       |   |  |  |  |  |  |
|   |                           |                              |               | 775                      |                       |   | 277.75   |  |  |  |  |
| W/b   | /I Profile #              |                              |               |                          |                       |   |  |  |  |  |  |
| d.  | i Frome #                 |                              |               |                          |                       |   | metage-subsequences  |  |  |  |  |
|   |                           |                              |               |                          |                       |   |  |  |  |  |  |
| WM  | 1 Profile #               |                              |               |                          |                       |   |  |  |  |  |  |
| J. Additional Descriptions for Materia  |                           |                              | K. Disposa    | al Locatio               |                       |   |  |  |  |  |  |
|   |                           |                              | iii Disposi   | ai Locatio               | 101                   | 1174  | 11   |  |  |  |  |
|   |                           |                              | Cell          | The state of             | Vil                   | 1//   | Level Of   |  |  |  |  |
| 15. Special Handling Instructions and Ad  | alatet                    |                              | Grid          | 1                        | h                     | 27  |  |  |  |  |  |
| 25. Special Hariding instructions and Ad  | uditional information     |                              |               | (                        | N16                   | 1   |  |  |  |  |  |
|   |                           |                              |               |                          |                       |   |  |  |  |  |  |
| Purchase Order # GPC10760293  |                           | EMERGENCY CON                | TACT / DUG    | MENO                     |                       |   |  |  |  |  |  |
| 16. GENERATOR'S CERTIFICATE:  |                           | EWENGENCT CON                | IACI / PHO    | INE NO.:                 |                       |   |  |  |  |  |  |
| I hereby certify that the above-described accurately described, classified and pack | d materials are not bas   | zardous wastos as define     | d by ord n    |                          |                       |   |  |  |  |  |  |
| , and a paci  | caged and are in prope    | er condition for transport.  | ation accor   | ort 261 or<br>ding to an | any applicable        | e state law, ha                                       | ive been fully and   |  |  |  |  |
| Printed Name  |                           | Signature "On behalf         | of\"          | amg to up                | opiicable regul       | ations,   | Month Day Year   |  |  |  |  |
| D+1/1POVICE   |                           | BAN                          |               |                          |                       |   | 5 15 17  |  |  |  |  |
| 17. Transporter 1 Acknowledgement of  | Receipt of Materials      | 11/110                       | 1             |                          |                       |   |  |  |  |  |  |
| Printed Name  |                           | Signature                    | M             |                          | 1/200                 |   | Month Day Year   |  |  |  |  |
| 1   | D                         | X I WI                       | MA            |                          |                       |   | 5 18 19  |  |  |  |  |
| 18. Transporter 2 Acknowledgement of<br>Printed Name                                | Receipt of Materials      |                              | ,             |                          | 40                    |   | 1211   |  |  |  |  |
| Timed Name  |                           | Signature                    |               |                          |                       | 777   | Month Day Year   |  |  |  |  |
|   |                           | V A 7-17 - 16-16             |               |                          |                       |   |  |  |  |  |  |
| 19. Certificate of Final Treatment/Dispos   | sal                       |                              |               | 1                        |                       | AVEN  |  |  |  |  |  |
| I certify, on behalf of the above listed tre  | eatment facility, that to | the best of my knowled       | ge, the abo   | ve-descri                | bed waste wa          | ıs managed in   | compliance with all  |  |  |  |  |
| , g, p  | incenses on the dates     | listed above.                |               |                          |                       | <b>2</b> 000  | and the second s |  |  |  |  |
| <ol> <li>Facility Owner or Operator: Certification</li> <li>Printed Name</li> </ol> | ition of receipt of non-  | - C-0.000                    | ered by this  | manifes                  |                       |   | 110  |  |  |  |  |
| Timed Name  | HI                        | Signature                    | 1             |                          |                       |   | Month Day Year   |  |  |  |  |
| White- TREATMENT, STORAGE, DISPOSA  | LEACHITY CORY             | Dive CENTE : To              | 005           |                          | WEET E                |   |  |  |  |  |  |
| THE THIRTY, STONAGE, DISPUSA  | GLAGILITY COPY            | Blue- GENERATOR #2           | COPY          |                          | Yell                  | ow- GENERAT   | OR #1 COPY   |  |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253397

Volume

Customer Name BLORE) APONT SZEWOSAKAT BLORE) Carrier 3: AND N

Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739464

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In Ø5/15/2018 10:16:38

Out 05/15/2018 10:16:38

Scale Inbound 1

RB

Operator

Vehicle# 38

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

RB

Gross Tare Net Tons

60980 lb 27960 16 33020 lb

16.51

Comments

Product

Amount

Origin

1 COAL ASH & COAL CO 100

16.51 Tons PORTW

Total Tax Total Ticket



|        | NO.  | 1. Generator's U                                       | S EPA ID No.         | M                            | anifest Doc   | No.  | 2. Page 1  | l of                 |              |                |
|--------|--|--|----------------------|------------------------------|---------------|--|--|----------------------|--------------|----------------|
|        | NON-HAZARDOUS MANIFEST   | 1  | I/A                  |                              |               |  | 2.1460   |                      | a.           | 5/             |
|        | 3. Generator's Mailing Address:  | 0.54   |                      | Address us                   |               |  |  |                      |              | 20             |
|        | GEORGIA POWER  | 78-19  | Generator's Site A   |                              |               | ailing):   | A. Manif   | est Number           | 6720         | 9464           |
|        | 241 RALPH MCGILL BLVD NE, E  | RIN#10221  | 155 CROSSGA          |                              | ITKKAFI       |  | V  | VMNA                 | 0/3          | 7404           |
|        | ATLANTA, GA 30308-3374   | A PERSONAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN |                      |                              | A 24 407      |  |  | B. State             | Generator's  | i ID           |
|        |  | 06-1365  | PORT WENTW           | OKIH, G                      | A 3140/       |  |  |                      |              |                |
| -      | 5. Transporter 1 Company Name  | 06-1365  |                      |                              |               |  |  |                      |              |                |
|        | The state of the s | 1  | 6.                   | US EPA II                    | O Number      |  |  |                      |              |                |
|        | 10954616   | Padin  | 0                    |                              |               |  | The second secon | Transporter's I      |              |                |
|        | 7. Transporter 2 Company Name  | J. C. L.   | 8.                   | IIS FPA II                   | ) Number      |  | D. Transp  | oorter's Phone       |              | 4.0            |
|        |  |  |                      |                              | - ivallibel   |  | F State 7  | ransporter's I       | D            |                |
| -      |  | YS   |                      |                              |               |  |  | orter's Phone        |              |                |
|        | 9. Designated Facility Name and Site   | Address  | 10.                  | US EPA                       | ID Number     |  |  |                      | Harana e     |                |
| A Pro- | SUPERIOR LANDFILL  |  | No.                  |                              |               |  | G. State I   | Facility ID          |              |                |
|        | 3001 LITTLE NECK ROAD  |  |                      |                              |               |  | H. State I   | acility Phone        | 912-9        | 927-6113       |
|        | Savannah, GA 31419   |  |                      |                              | War in        |  |  |                      | 7,10         | 27 0113        |
|        |  |  |                      |                              |               |  |  |                      |              |                |
| 20     | 11. Description of Waste Materials   |  |                      |                              | No.           | Type   | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol. | I. M         | lisc. Comments |
| E<br>N | a. COAL ASH& COAL CONTAMI  | NATED WASTE  | *                    | 7 7 6                        |               | - Ipc  | 1C-7   | vvc./ voi.           |              |                |
| E      |  |  |                      | 7                            | n28           | 117  | IX   |                      |              |                |
| R      | WM Profile #   | 375200GAK  | RA                   | -                            | 11-0          |  |  | LEUI                 |              |                |
|        | b.   |  |                      |                              |               |  |  |                      |              |                |
| T      |  | 1 m. Sec.  |                      |                              |               |  |  |                      |              |                |
| O<br>R | W  | M Profile #  |                      |                              |               |  |  |                      |              |                |
|        | C.   |  | West Transport       |                              |               |  | 100  |                      |              | IIII A.S. III. |
|        |  |  |                      |                              |               |  |  |                      | 4            |                |
|        |  | M Profile #  |                      |                              |               |  |  |                      |              |                |
|        | d.   |  |                      | 7 11                         |               |  |  |                      |              |                |
|        |  |  |                      |                              |               |  |  |                      |              |                |
|        |  | M Profile #  |                      |                              |               |  |  |                      |              |                |
|        | . Additional Descriptions for Materia  | als Listed Above                                       |                      |                              | K. Disposa    | l Location   |  |                      |              |                |
|        |  |  |                      |                              |               | 1  | (371)  | 125                  |              | 41             |
|        |  |  |                      |                              | Cell          |  | VIO  |                      | Level        |                |
|        | 15. Special Handling Instructions and A  | Additional Informat                                    | tion                 |                              | Grid          | 1/2  | MI   | 36                   |              |                |
|        |  | tuditional informa                                     | tion                 |                              |               |  | 100  |                      |              |                |
| 100    |  |  |                      |                              |               |  |  |                      |              |                |
| F      | Purchase Order # GPC10760293   | Merchanic  | EMED                 | GENCY CON                    | ITACT / PHO   | NE NO  |  |                      |              |                |
|        | 6. GENERATOR'S CERTIFICATE:  |  | LIVILIN              | driver con                   | ITACT / PHO   | INE INO.:  |  | 41                   |              | V              |
| 1 1 2  |  | d materials are a                                      | . L                  |                              |               | A CANADA AND A CAN |  |                      |              |                |
| ā      | hereby certify that the above-describe<br>occurately described, classified and pac   | kaged and are in r                                     | proper condition for | es as define<br>or transport | tation accord | rt 261 or a  | ny applicable  | e state law, ha      | ve been full | y and          |
| F      | rinted Name  |  |                      | "On behalf                   |               | aing to app  | ilicable regul   | lations.             | Month        | Day Ves        |
|        | BFILIDOVICH  |  | R                    | tee                          |               |  |  |                      | K            | Day Year       |
| 1      | 7. Transporter 1 Acknowledgement of  | f Receipt of Mater                                     | ials                 |                              | -1            |  |  |                      | - U L        |                |
| A      | Printed Name   |  | Signature            | 9 11                         | M             | Files  | 17 17  |                      | Month        | Day Year       |
| X      | 13/16/1/109  | 4/9  | X 15                 | They                         | 164-          |  | _  |                      | 5            | 15-17          |
| 1      | 8. Transporter 2 Acknowledgement o   | f Receipt of Mater                                     | ials /               |                              | -             |  |  |                      | 1            | 2/6            |
| ì      | Printed Name   |  | Signature            | 4                            |               |  |  |                      | Month        | Day Year       |
| 3      |  |  | V. Julian            |                              |               |  |  |                      |              |                |
| 1      | Certificate of Final Treatment/Dispos  | osal   |                      |                              |               |  |  |                      |              |                |
|        | certify, on behalf of the above listed tr  |  | hat to the hest of   | my knowla                    | dge the she   | ve-deserit   | od wasta   |                      | 1.           | ***            |
| a      | pplicable laws, regulations, permits an  | d licenses on the c                                    | lates listed above.  |                              | age, the abo  | ve-uescrib   | eu waste wa  | as managed in        | compliance   | with all       |
|        | 0. Facility Owner or Operator: Certific  |  |                      |                              | vered by this | manifest   | A TORAL  |                      |              |                |
|        | Printed Name   | 1  | Signature            |                              | 1             | ^  |  |                      | Month        | Day Year       |
|        | (T)  | )  |                      |                              | 6             | /  |  |                      |              | 1) /           |
| ν      | Vhite- TREATMENT, STORAGE, DISPOS,   | AL FACILITY COPY                                       | Blue- GEN            | NERATOR #                    | 2 COPY        |  | Yell   | low- GENERAT         | OR #1 COPY   |                |
|        | Pink- FACILITY USE ONL   |  |                      | NSPORTER                     |               |  |  | Jantina              | CISTIL COFT  |                |



4 to 10

Superior Landfill 3001 Little Neck Rd Savannah, BA, 31419 Ph: (912) 927-6113

Original Ticket# 1253436

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier
Ticket Date 05/15/2018 Vehicle#
Payment Type Credit Account Container

Manual Ticket# Hauling Ticket# Route State Waste Code

Manifest 6739465 Destination

Destin.

Profile Generator GI Carrier B AND N
Vehicle# 34
Container
Driver
Check#
Billing # 0001037
Gen EPA ID NR

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/15/2018 11:43:12 Out 05/15/2018 11:43:12

Scale Inbound 1

Operator rb rb Gross 60020 1b Tare 25280 1b Net 34740 1b Tons 17.37

Comments

waste management

Product LD% Qty UOM Rate Tax Amount Origin

1 COAL ASH & COAL CO 100 17.37 Tons

Total Tax fobal finket



| NON HAZARDOUS MANUSSON   | 1. Generator's US EPA      | ID No.             | Manifest Doc No.             | 2. Page  | e 1 of                           |                        |               |  |  |  |
|--|----------------------------|--------------------|------------------------------|--|----------------------------------|------------------------|---------------|--|--|--|
| NON-HAZARDOUS MANIFEST   | N/A                        | 4                  |                              | 2. r age   | 2 1 01                           | 11.                    |               |  |  |  |
| 3. Generator's Mailing Address:  |                            |                    |                              |  |                                  | - 11                   | 00            |  |  |  |
| GEORGIA POWER  | GEO                        | RGIA POWER I       | SS (If different than mailin | g): A. Mar   | ifest Number                     | C720                   | 165           |  |  |  |
| 241 RALPH MCGILL BLVD NE, I  |                            | CROSSGATE RI       |                              | United States  | WMNA                             | 67394                  | 105           |  |  |  |
| ATLANTA, GA 30308-3374   |                            | T WENTWORT         |                              |  | B. State (                       | Generator's II         | )             |  |  |  |
|  | 06-1365                    | I WENTWORT         | п, GA 31407                  |  |                                  |                        |               |  |  |  |
| 5/Transporter 1 Company Name   | 30 1303                    | 6. US I            | EPA ID Number                |  |                                  |                        |               |  |  |  |
| 1/2001/10  |                            | 0. 031             | PA ID Number                 | 6 5++  |                                  |                        |               |  |  |  |
| 109516161  | adina                      |                    |                              |  | Transporter's II sporter's Phone | )                      |               |  |  |  |
| 7. Transporter 2 Company Name  |                            | 8. US E            | PA ID Number                 | D. Hall  | sporter's Phone                  |                        |               |  |  |  |
|  |                            |                    |                              | E. State   | Transporter's IE                 |                        | okazan diring |  |  |  |
| 9. Designated Facility Name and Site   | Addross                    | 40                 |                              |  | sporter's Phone                  | MI TO YOU              |               |  |  |  |
| SUPERIOR LANDFILL  | Address                    | 10. US             | EPA ID Number                |  |                                  |                        |               |  |  |  |
| 3001 LITTLE NECK ROAD  |                            |                    |                              | G. State   | e Facility ID                    |                        |               |  |  |  |
| Savannah, GA 31419   |                            |                    |                              | H. State   | Facility Phone                   |                        |               |  |  |  |
| 34411 GA 31413   |                            |                    |                              | Philipping Control   |                                  |                        |               |  |  |  |
| G 11. Description of Waste Materials   |                            |                    | 12. Contain                  |  |                                  |                        |               |  |  |  |
|  |                            |                    |                              | Type 13. Total Quantity  | 14. Unit<br>Wt./Vol.             | I. Misc.               | Comments      |  |  |  |
| a. COAL ASH& COAL CONTAMI  | NATED WASTE                |                    | -TI11                        | / ~  |                                  |                        | REPERTY.      |  |  |  |
|  |                            |                    | 4034T                        | 1118   |                                  |                        |               |  |  |  |
| WM Profile #   | 375200GAKRA                | and the same of    |                              |  |                                  |                        | 14            |  |  |  |
| ( <b>b</b> ,   |                            |                    |                              |  |                                  | SEASON SERVICE SERVICE |               |  |  |  |
|  |                            |                    |                              | - A A  |                                  |                        |               |  |  |  |
| A SACRO CONTRACTOR CON | M Profile #                |                    |                              | Harage and the control of  |                                  |                        |               |  |  |  |
| C.   |                            |                    |                              | A STATE OF THE STA |                                  |                        |               |  |  |  |
|  |                            |                    |                              | 1 1 1 1 1 1  |                                  |                        |               |  |  |  |
| d. Wi  | /I Profile #               |                    |                              |  | Y T                              |                        |               |  |  |  |
| u.   |                            |                    |                              |  |                                  |                        |               |  |  |  |
|  |                            |                    |                              | The second   |                                  |                        |               |  |  |  |
| WN   | /I Profile #               |                    |                              |  |                                  |                        |               |  |  |  |
| J. Additional Descriptions for Materia   | ls Listed Above            |                    | K. Disposal Lo               | cation   |                                  |                        |               |  |  |  |
|  |                            |                    |                              |  |                                  |                        |               |  |  |  |
|  |                            |                    | Cell                         | 0/1/1  | 96)0,1                           | Level )                | 1-10          |  |  |  |
| 15. Special Handling Instructions and A  | dditional Information      |                    | Grid (U)                     | 4010   | 1-00//                           | 610                    | 6001          |  |  |  |
|  |                            |                    |                              |  |                                  |                        |               |  |  |  |
|  |                            |                    |                              |  |                                  |                        |               |  |  |  |
| Purchase Order # GPC10760293   |                            | FMFRGENCY          | CONTACT / PHONE I            | NO .   |                                  |                        |               |  |  |  |
| 16. GENERATOR'S CERTIFICATE:   | Type I I I                 |                    | CONTACT/THONE                | VO   |                                  |                        |               |  |  |  |
| I hereby certify that the above-describe accurately described, classified and pac  | d materials are not hazar  | rdous wastes as d  | ofined by CED Down           |  |                                  |                        |               |  |  |  |
| , , , , , , , and and pac  | kaged and are in proper of | condition for tran | sportation according         | of any applicab  | le state law, hav                | e been fully a         | nd            |  |  |  |
| Printed Name   |                            | Signature "On be   | ehalf of"                    | to applicable regi   | nations.                         | Month I                | Day V         |  |  |  |
| 12 Tilipovich  |                            | BFU                | 2                            |  |                                  | K I                    | Day Year      |  |  |  |
| 17. Transporter 1 Acknowledgement of   | Receipt of Materials       |                    |                              |  |                                  | J 1:                   | TIX           |  |  |  |
| Printed Name   | 11111111                   | Signature          |                              | 7 -7-  |                                  | Month, [               | Day Year      |  |  |  |
|  | U                          | 1~1                | E E                          |  | _                                | RI                     | A />          |  |  |  |
| 18. Transporter 2 Acknowledgement of   | Receipt of Materials       |                    |                              |  | Mary Control                     | L                      | 216           |  |  |  |
| Printed Name   | *                          | Signature          |                              | 2 : 3 14 - 1 7 3   |                                  | Month [                | Day Year      |  |  |  |
|  |                            |                    |                              |  |                                  |                        |               |  |  |  |
| 19. Certificate of Final Treatment/Dispo   | sal                        | 10000              |                              |  |                                  |                        |               |  |  |  |
| I certify, on behalf of the above listed tre   |                            | he hest of multi-  | wolodgo +bt                  |  | User Marie Control               | 1.1                    |               |  |  |  |
| applicable laws, regulations, permits and  | licenses on the dates lis  | sted above.        | wiedge, the above-c          | escribed waste w   | as managed in c                  | ompliance wi           | th all        |  |  |  |
| 20. Facility Owner or Operator: Certifica  | ation of receipt of non-ha | azardous material  | s covered by this ma         | nifost   |                                  |                        |               |  |  |  |
| Printed Name   | F. 9                       | Signature          | Topicied by this ma          | imest.   |                                  | 1.0                    |               |  |  |  |
|  |                            | - Bridge           | (0)                          |  |                                  | Month D                | ay Year       |  |  |  |
| White-TREATMENT, STORAGE, DISPOSA  | L FACILITY COPY            | B1 B1 B1           |                              | 200  |                                  | 11)                    | 10            |  |  |  |
|  |                            | Blue- GENERATO     | OR #2 COPY                   |  | llow- GENERATO                   |                        |               |  |  |  |



Original Ticket# 1253441

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739466

Destination

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/15/2018 11:52:09 Out 05/15/2018 11:52:09

Scale Inbound 1

Operator rb

Gross Tare

59380 1b 21800 lb 37580 16

Net Tons

18.79

Comments

Vehicle# BN24

Gen EPA ID NR

0001037

Container

Driver V

Billing #

Check#

| Dro         | duct   | t Tay   | m.i.  | 1614 PM E IA                       |  |     |  |        |
|-------------|--|---|-------|------------------------------------|--|-----|--|--------|
|             | PA CATE D  | LD%   | Qty   | UOM                                | Rate   | Tax | Amount   | Origin |
| 700 000 000 | THE TANK MADE STORN WHISE BODY SHOP AND ADDRESS OF THE MADE SHOW AND | takes report years where have vessel release which desire where traces where desire |       | ni lore one seen sole real par way | Name Annual Contr. Printer Street Street Street Street Street Street Street St |     |  |        |
| 1           | COAL ASH & C   | OAL CO 100  | 18.79 | Tons                               |  |     | n curps receipt agrees by the second spines proper section (\$25%). Spines, venical games. | PORTW  |



Total Tax Intal Flokat



|        | 1. Generator's US EPA  | A ID No.   | 4                |  | 1                         |                      |  |                         |  |  |  |
|--------|--|--|------------------|--|---------------------------|----------------------|--|-------------------------|--|--|--|
|        | NON-HAZARDOUS MANIFEST   |  | Manifest Doc I   | No.  | 2. Page 1                 | of                   |  |                         |  |  |  |
|        | N /  | A  |                  |  |                           |                      | 111  | )                       |  |  |  |
|        | 3. Generator's Mailing Address: Gene   | erator's Site Address (#   | different than m | ailing).   | A Manif                   | est Number           | 1 1  | _                       |  |  |  |
|        |  | ORGIA POWER PLA  |                  | annig),  |                           |                      | 6739466  |                         |  |  |  |
|        |  |  | INT KINALT       |  | M                         | /MNA                 | 0733400  |                         |  |  |  |
| 400    |  | CROSSGATE RD.  |                  |  | NEG T                     | B. State G           | Generator's ID   |                         |  |  |  |
| 1      | ATLANTA, GA 30308-3374 POF   | RT WENTWORTH, (  | GA 31407         |  | VE THE                    |                      | enerator 3 IB  |                         |  |  |  |
| 1      | 4. Generator's Phone 404-506-1365  |  |                  |  | 4-                        |                      |  |                         |  |  |  |
|        | 5. Transporter 1 Company Name  | 6. US EPA  | ID Number        |  |                           |                      |  | CONTROL OF THE PARTY OF |  |  |  |
|        | 122 1 1  |  | ib itallibei     |  | C C1-1-7                  |                      |  |                         |  |  |  |
|        | MISICILITATION   |  |                  |  | C. State Transporter's ID |                      |  |                         |  |  |  |
|        | 7. Transporter 2 Company Name  | 8. US FPA  | ID N             |  | D. Transporter's Phone    |                      |  |                         |  |  |  |
|        |  | o. US EPA  | ID Number        |  |                           |                      |  |                         |  |  |  |
|        |  |  |                  |  |                           | ransporter's ID      |  |                         |  |  |  |
|        | 9. Designated Facility Name and Site Address   | 40   |                  |  | F. Transp                 | orter's Phone        | AND THE PERSON OF THE PERSON O |                         |  |  |  |
|        | SUPERIOR LANDFILL  | 10. US EPA   | ID Number        |  |                           |                      |  |                         |  |  |  |
|        | The state of the s |  |                  |  | G. State F                | acility ID           |  |                         |  |  |  |
|        | 3001 LITTLE NECK ROAD  |  |                  |  | H State F                 | acility Phone        | 912-927-6  | 112                     |  |  |  |
|        | Savannah, GA 31419   |  |                  |  | 11. State 1               | actifity Friorie     | 312-327-0  | 113                     |  |  |  |
| J. S   |  |  |                  |  |                           |                      |  |                         |  |  |  |
|        | 11. Description of Waste Materials   |  | 12. Con          | tainers  | 13. Total                 | 10 (1-)              |  |                         |  |  |  |
| G      |  |  | No.              | Туре   | Quantity                  | 14. Unit<br>Wt./Vol. | l. Misc. Com   | ments                   |  |  |  |
| E      | a. COAL ASH& COAL CONTAMINATED WASTE   |  |                  | 1  |                           |                      |  |                         |  |  |  |
| N      |  |  | BUJU             | 11/  | 17                        | 4                    |  |                         |  |  |  |
| E<br>R | WM Profile # 375200GAKRA   |  | 12.1014          | 171  | 1-6                       |                      |  |                         |  |  |  |
| A      | b.   |  |                  | THE PARTY  |                           |                      |  |                         |  |  |  |
| T      |  |  |                  |  |                           |                      |  |                         |  |  |  |
| 0      |  |  |                  |  |                           | 1 - VI               |  |                         |  |  |  |
| R      | WM Profile #   |  |                  |  |                           |                      |  |                         |  |  |  |
|        | C.   | N REVIEW   |                  |  |                           |                      |  |                         |  |  |  |
|        |  |  |                  |  |                           |                      |  |                         |  |  |  |
|        | WM Profile #   |  | 40               |  |                           |                      | Militar State Company  |                         |  |  |  |
|        | d.   |  |                  |  |                           |                      |  |                         |  |  |  |
|        |  |  |                  |  |                           |                      |  |                         |  |  |  |
|        |  |  | 4                |  | <b>₩</b>                  | 1600                 |  |                         |  |  |  |
|        | WM Profile #   |  | 000000000000     | The state of the s |                           |                      |  | 2012                    |  |  |  |
|        | J. Additional Descriptions for Materials Listed Above  |  | K. Disposa       | Location   | )                         |                      |  |                         |  |  |  |
|        |  |  |                  |  |                           |                      |  |                         |  |  |  |
|        |  |  | Cell / 7         | 201  | 20                        | Level 7 7 1          |  |                         |  |  |  |
| -      | The state of the s |  | Grid )           | 20   | 696                       | 23116                | 320  | J-1+                    |  |  |  |
| 8      | 15. Special Handling Instructions and Additional Information   |  | 1                |  |                           |                      |  |                         |  |  |  |
|        |  |  |                  |  |                           |                      |  |                         |  |  |  |
|        |  |  |                  |  |                           |                      |  |                         |  |  |  |
|        | Purchase Order # GPC10760293   |  |                  |  | The state                 |                      |  |                         |  |  |  |
| 1      | Vertical Control of the Control of t | EMERGENCY CO   | NTACT / PHO      | NE NO.:  |                           |                      |  |                         |  |  |  |
| -31    | 16. GENERATOR'S CERTIFICATE:   |  |                  |  |                           | \$F (\$25) -1        |  |                         |  |  |  |
|        | I hereby certify that the above-described materials are not haz  | ardous wastes as defin   | ed by CFR Pai    | rt 261 or ar   | v annlicable              | state law hav        | o boon fully   |                         |  |  |  |
|        | accurately described, classified and packaged and are in prope   | r condition for transpo  | rtation accord   | ling to ann  | licable regul             | ations               | e been runy and  |                         |  |  |  |
| -      | Printed Name   | Signature "On beha   | lf of"           | 9pp  |                           | delons.              | Month Day  | T v                     |  |  |  |
|        | Btilipourch  | RR   | A .              |  |                           | 7 YEL                | Month Day  | Year                    |  |  |  |
| Т      | 17. Transporter 1 Acknowledgement of Receipt of Materials  | 1.1  |                  |  |                           |                      | 011  | 1/6                     |  |  |  |
| R      | Printed Name   | 16: 1  | 1 1              |  |                           |                      |  |                         |  |  |  |
| IN     | 1 A - Lin Lou (  | Signature  | 1.               |  |                           |                      | Month Day  | Year                    |  |  |  |
| S P    | LICENTE W CID  | 1 (ON)   | MA               |  |                           |                      | 5/5  | 1/8                     |  |  |  |
| 0/     | 18. Transporter 2 Acknowledgement of Receipt of Materials  | ,  |                  |  |                           |                      | _  |                         |  |  |  |
| T      | Printed Name   | Signature  |                  |  |                           |                      | Month Day  | Year                    |  |  |  |
| R      |  | A CONTRACTOR OF THE CONTRACTOR |                  |  |                           | - 77                 | 10-  | . cur                   |  |  |  |
|        |  |  |                  |  |                           |                      |  |                         |  |  |  |
| -      | 19. Certificate of Final Treatment/Disposal  |  |                  |  | P. C.                     |                      | TO STATE OF THE ST | 7.77                    |  |  |  |
| A      | I certify, on behalf of the above listed treatment facility, that to   | the best of my knowle  | edge, the abo    | ve-describe  | ed waste wa               | is managed in c      | compliance with  | all                     |  |  |  |
|        | applicable laws, regulations, permits and licenses on the dates  | listed above.  |                  |  |                           |                      | phance with  | 411                     |  |  |  |
|        | 20. Facility Owner or Operator: Certification of receipt of non-   |  |                  |  |                           |                      |  |                         |  |  |  |
| 1      | Printed Name 2   | Signature  | C. CO by tills   | marinest.  |                           | Maril 12 a 1/17      |  |                         |  |  |  |
| 1      |  | Signature  | 2)               |  |                           | 1                    | Month Day Year   |                         |  |  |  |
|        | White TDEATAGEST CEORGE SIGNAL   |  |                  |  | CITL                      |                      | 21)  | 10                      |  |  |  |
|        | White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   | Blue- GENERATOR  | #2 COPY          |  | Vall                      | OW- GENERATO         | D #1 CODY  |                         |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253444

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/15/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6739467

Destination PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/15/2018 11:55:42 Out 05/15/2018 11:55:42

Scale Inbound 1

rb

Operator

Vehicle# 38

Billing # WWW.37

Gen EPA ID NR

Container

Driver

Check#

Gross Tare Net

Tons

63920 1b 27960 lb 35960 1b 17.98

Comments

Product LD% Oty HOU Rate Tax Amount Origin PORTW

COAL ASH & COAL CO 100

17.98 Tons

Both los

Total Tax Tobat floket



| -                   | WASTE INAINAGENIEW   |                            |   |   |                  |                           |                                 |                |             |       |  |
|---------------------|--|----------------------------|---|---|------------------|---------------------------|---------------------------------|----------------|-------------|-------|--|
|                     | NON-HAZARDOUS MANIFEST 1. G  | enerator's US EPA<br>N / A |   | nifest Doc N                                      | No.              | 2. Page 1                 | of                              | 11             | 17          |       |  |
|                     | 3. Generator's Mailing Address: GEORGIA POWER  | GEC                        | erator's Site Address (If dir<br>ORGIA POWER PLAN |   | ailing):         |                           | st Number                       | 67394          | 467         |       |  |
|                     | 241 RALPH MCGILL BLVD NE, BIN#3 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-13           | POR                        | CROSSGATE RD.<br>RT WENTWORTH, GA                 | 31407   |                  |                           | B. State (                      | Generator's II | D           | 1000  |  |
|                     | 5-Transporter 1 Company Name   |                            | 6. US EPA ID                                      | Number  |                  | C. State Transporter's ID |                                 |                |             |       |  |
|                     | 7. Transporter 2 Company Name  | 409                        | 8. US EPA ID                                      | Number  |                  |                           | orter's Phone                   |                |             |       |  |
|                     |  |                            |   | E. State Transporter's ID  F. Transporter's Phone |                  |                           |                                 |                |             |       |  |
|                     | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL                                   | ess                        | 10. US EPA II                                     | D Number  |                  | G. State Facility ID      |                                 |                |             |       |  |
|                     | 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |                            |   |   |                  | H. State F                | acility Phone                   | 912-92         | 27-6113     |       |  |
| G                   | 11. Description of Waste Materials   |                            |   | 12. Cor<br>No.                                    | ntainers<br>Type | 13. Total<br>Quantity     | 14. Unit<br>Wt./Vol.            | I. Mis         | c. Comments |       |  |
| E<br>N<br>E         | a. COAL ASH& COAL CONTAMINAT   |                            | 7   | 138   | DI               | 18                        | William III all Milliam Billiam |                |             |       |  |
| R<br>A              | b. WM Profile # 37   | 75200GAKRA                 |   | 11-1  |                  |                           |                                 |                |             |       |  |
| T<br>O              |  |                            |   |   |                  |                           |                                 |                |             |       |  |
| R                   | c. WM Pro  | ofile#                     |   |   |                  |                           |                                 |                |             |       |  |
|                     |  |                            |   |   |                  |                           |                                 |                |             |       |  |
|                     | d. WM Pro  | ofile#                     |   |   |                  |                           |                                 |                |             |       |  |
|                     |  |                            |   | 1   |                  |                           |                                 |                |             |       |  |
|                     | WM Pro   |                            |   | K Di  |                  |                           |                                 |                |             |       |  |
|                     | J. Additional Descriptions for Materials Lis   | sted Above                 |   | Cell Grid   | al Location      | 126                       | 3/1                             | kevel 2        | Chs         | 4     |  |
| THE PERSON NAMED IN | 15. Special Handling Instructions and Additi   | ional Information          |   | Werker<br>The second                              |                  |                           |                                 |                |             | -     |  |
|                     | Purchase Order # GPC10760293   |                            | EMERGENCY CON                                     | ITACT / PHO                                       | ONE NO.:         |                           |                                 |                |             | 75    |  |
|                     | 16. GENERATOR'S CERTIFICATE:   | 1                          |   |   |                  | THE .                     |                                 |                | 7 14        |       |  |
|                     | I hereby certify that the above-described maccurately described, classified and package          |                            |   |   |                  |                           |                                 | ive been fully | y and       |       |  |
|                     | Printed Name   | and are in prop            | Signature "On behalf                              |   | rung to app      | oncable regu              | iations.                        | Month          | Day Ye      | ar    |  |
|                     | B+1/120vich  |                            | RY  |   | ,                |                           | W                               | 151            | 19/1        |       |  |
| T<br>R<br>A         | 17. Transporter 1 Acknowledgement of Rec   | ceipt of Materials         | Signature   | //  | /                | A STATE OF                |                                 | Month          | Day Ye      | ar    |  |
| N<br>S              | 1 /5/5/ 1-89   | er 5                       | Soll  | 7/1/4   |                  |                           |                                 | 5              | 15/1        |       |  |
| OR                  | 18. Transporter 2 Acknowledgement of Rec   | ceipt of Materials         | Ciaratina   | /   |                  |                           |                                 | Month          |             |       |  |
| T<br>E<br>R         | Printed Name   |                            | Signature   |   |                  |                           |                                 | Worth          | Day Ye.     | dl .  |  |
| F                   | 19. Certificate of Final Treatment/Disposal  |                            |   | u 26 6  | a see            |                           |                                 |                | 21 -0       |       |  |
| A<br>C              | I certify, on behalf of the above listed treatr<br>applicable laws, regulations, permits and lic |                            |   | uge, the ab                                       | ove-describ      | bed waste w               | as managed II                   | compliance     | with all    |       |  |
| L                   | 20. Facility Owner or Operator: Certification  |                            | n-hazardous materials co                          | vered by th                                       | is manifest      |                           |                                 |                | , , , ,     |       |  |
| Y                   | Printed Name   |                            | Signature /                                       | 3)  |                  |                           |                                 | Month          | Day Vé      | ar    |  |
|                     | White-TREATMENT, STORAGE, DISPOSAL F.  | ACILITY COPY               | Blue- GENERATOR #                                 | #2 COPY   | 17-161           | Ye                        | llow- GENERA                    | TOR #1 COPY    |             | - O'I |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253449

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6739468

Time

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

05/15/2018 12:10:19

Out 05/15/2018 12:10:19

Scale Inbound 1

Operator rb rb

Gross

Tare

61300 lb 25340 15

Net Tons

35960 1b 17.98

Comments

LEEKS

0001037

Vehicle# L10

Gen EPA ID NR

Container

Billing #

Driver

Check#

Product LD% Qty UOM Rate Tax Amount Origin COAL ASH & COAL CO 100 17.98 Tons PORTW

Total Tax fotal fleket



|                       | NON-HAZARDOUS MANIFEST  1. Generator's US EPA  N / /   |   | nifest Doc N | No.                  | 2. Page 1             | of   | 11:0-                  | )          |     |
|-----------------------|--|---|--------------|----------------------|-----------------------|--|------------------------|------------|-----|
|                       | GEORGIA POWER GEO<br>241 RALPH MCGILL BLVD NE, BIN#10221 155   | orator's Site Address (If dir<br>PRGIA POWER PLAN<br>CROSSGATE RD.<br>T WENTWORTH, GA | ΓKRAFT       | ailing):             |                       | st Number  MNA  B. State G   | 67394<br>enerator's IE |            |     |
|                       | 7. Transporter 2 Company Name  | 6. US EPA ID  8. US EPA ID  |              |                      | D. Transpo            | ransporter's ID<br>orter's Phone<br>ransporter's ID<br>orter's Phone |                        |            |     |
|                       | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10. US EPA II   | O Number     |                      | G. State F            | allasijuni.  | 912-927-6113           |            |     |
| G                     | 11. Description of Waste Materials   |   | 12, Cor      | ntainers<br>Type     | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.   | I. Misc                | . Comments |     |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAMINATED WASTE   | Z   | 10           | DT                   | 14                    | Wt./Vol.   |                        |            |     |
| R<br>A<br>T<br>O<br>R | b.  WM Profile # 375200GAKRA  b.  WM Profile #   |   |              |                      |                       |  |                        |            |     |
|                       | WM Profile #   |   |              | Course of the second |                       |  |                        | in adlura. |     |
|                       | WM Profile # J. Additional Descriptions for Materials Listed Above   |   | K. Dispos    | al Location          | 120                   | 140  | Level 2                | CELS       | 7   |
|                       | 15. Special Handling Instructions and Additional Information   |   | 1            |                      | 7                     |  |                        |            |     |
| 1.0                   | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not ha accurately described, classified and packaged and are in proper Printed Name   |   | d by CFR P   | art 261 or a         |                       |  | ve been fully          | and Yes    | ar  |
| LJV                   | BTILIPOVICE  | BR  |              |                      |                       |  | 51                     | 5 R        |     |
| T R A N S P O B       | 17. Transporter 1 Acknowledgement of Receipt of Materials Printed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  | Signature   | Tra.         | mp                   | er                    |  | Month B                | Day Yea    | ar  |
| R<br>T<br>E<br>R      | Printed Name   | Signature   |              |                      |                       | + -  | Month                  | Day Yea    | ar  |
| F A C I L I T         | 19. Certificate of Final Treatment/Disposal     I certify, on behalf of the above listed treatment facility, that applicable laws, regulations, permits and licenses on the date     20. Facility Owner or Operator: Certification of receipt of not | s listed above,<br>n-hazardous materials co   |              |                      |                       | as managed in  |                        |            | ar. |
| Y                     | Printed Name   | Signature   |              |                      |                       |  | Month                  | Day Yes    | 7   |
|                       | White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY  | Blue- GENERATOR #   | 2 COPY       |                      | Ye                    | llow- GENERAT  | FOR #1 COPY            | - 1        |     |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253455

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

fieles Date WS/15/2018

Payment Type Greatit Greatest

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739469

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/15/2018 12:19:00 In Out 05/15/2018 12:19:00

Scale

Inbound 1

Operator

Unhictor Lib

Gen EPA ID NR

Billing # 0001037

Driver

Check#

rb rb

Gross Tare

55720 16 25340 lb 30380 lb

15.19

Net Tons

Vistman

Comments

| Pro | duct     |  | LD% | Qty | LION | Rate   | Tax  | Amount  | Origin |
|-----|----------|--|-----|-----|------|--|--|---|--------|
| 1   | COAL ASH |  |     |     | Tons | e pero man sano men entre com sero sua successor a | the love has been provided the same and pro- | e entre large many were some som along store tallen salve nom | PORTW  |

Telena Tron Total Ticket



|             | NON-HAZARDOUS MANIFEST   | enerator's US EP/    |   | Manifest Doc              | No.                  | 2. Page 1        | of                        | 11.5%                     |   |  |
|-------------|--|----------------------|---|---------------------------|----------------------|------------------|---------------------------|---------------------------|---|--|
|             | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#1 ATLANTA, GA 30308-3374 | 0221 GE0             | erator's Site Address (<br>DRGIA POWER PLA<br>CROSSGATE RD. | NT KRAFT                  | nailing):            | 200 (000)        | est Number /MNA  B. State | 6739469<br>Generator's ID |   |  |
|             | 4. Generator's Phone 404-506-13  | 65                   | RT WENTWORTH,   | JA 31407                  |                      |                  |                           |                           |   |  |
|             | 5. Transporter 1 Company Name  7. Transporter 2 Company Name   | ding                 |   | ID Number                 |                      |                  | Transporter's I           |                           |   |  |
|             |  |                      |   |                           |                      |                  | ransporter's I            |                           |   |  |
|             | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL                                       | SS                   | 10. US EP   | A ID Number               | F. Transp G. State F | nsporter's Phone |                           |                           |   |  |
|             | 3001 LITTLE NECK ROAD  |                      | Telegraphic Action  |                           |                      |                  | acility Phone             | 912-927-6113              |   |  |
|             | Savannah, GA 31419   |                      |   |                           |                      |                  | TITLE                     |                           |   |  |
| G           | 11. Description of Waste Materials   | 11.11                |   | The second second         | ntainers             | 13. Total        | 14. Unit                  |                           |   |  |
| E           | a. COAL ASH& COAL CONTAMINATE  | D WASTE              |   | No.                       | Туре                 | Quantity         | Wt./Vol.                  | 1. Wisc. Comments         |   |  |
| N<br>E      |  |                      |   | 2-07                      | DI                   | 18               |                           |                           |   |  |
| R<br>A      | WM Profile # 37  | 5200GAKRA            |   |                           |                      |                  |                           |                           |   |  |
| TOR         | WM Prof  | ile#                 |   |                           |                      |                  |                           |                           |   |  |
|             | C.   | :I. #                |   |                           |                      |                  |                           |                           |   |  |
| 1           | d. WM Prof   | iie #                |   |                           |                      |                  |                           |                           |   |  |
|             |  |                      |   |                           |                      | 1                | 100                       |                           |   |  |
| -           | WM Prof  |                      |   |                           |                      |                  |                           |                           |   |  |
|             | J. Additional Descriptions for Materials List  | ed Above             |   | K. Dispos                 | al Location          | 10               |                           | 16                        |   |  |
|             |  |                      |   | Cell                      | 1                    | 360 V            | 19                        | Level                     |   |  |
| -           | 15. Special Handling Instructions and Additio  | nal Information      |   | Grid                      | ( .                  | 271/             | 77                        |                           |   |  |
|             |  |                      |   |                           |                      | 23 114           |                           |                           |   |  |
|             | Purchase Order # GPC10760293   |                      | EMERGENCY CO  | NTACT / PHO               | ONE NO.:             |                  |                           |                           |   |  |
|             | 16. GENERATOR'S CERTIFICATE:   |                      |   |                           |                      |                  |                           |                           |   |  |
|             | I hereby certify that the above-described mat<br>accurately described, classified and packaged       | erials are not ha    | zardous wastes as defi                                      | ned by CFR Pa             | art 261 or a         | ny applicable    | e state law, ha           | ve been fully and         |   |  |
| 100         | Printed Name   | and are in prope     | Signature "On beha  | ortation accor<br>alf of" | ding to app          | olicable regu    | ations.                   | Month Day Year            |   |  |
|             | R+1/1povict  |                      | BR  |                           |                      |                  |                           | B/S/                      |   |  |
| T<br>R      | 17. Transporter 1 Acknowledgement of Recei   | pt of Materials      | Locifican A   | 1 1                       | 1                    |                  |                           | - 1 - 10                  |   |  |
| N<br>S      | 1 34,100 1/2   | 1                    | Signature   | 1,16                      | all                  |                  |                           | Month Day Year            |   |  |
| P<br>O<br>R | 18. Transporter 2 Acknowledgement of Recei   | pt of Materials      | /   | 11                        |                      | and the same     |                           | 1911311                   |   |  |
| T<br>E<br>R | Printed Name   |                      | Signature   |                           |                      |                  |                           | Month Day Year            |   |  |
|             | 19. Certificate of Final Treatment/Disposal  |                      |   |                           | 7 1 7                |                  |                           |                           |   |  |
| A C         | I certify, on behalf of the above listed treatme   | nt facility, that to | the best of my know   | edge, the abo             | ove-describ          | ed waste wa      | as managed in             | compliance with all       |   |  |
|             | applicable laws, regulations, permits and licer<br>20. Facility Owner or Operator: Certification     |                      |   | overed by thi             | is-manifoct          |                  |                           |                           |   |  |
| r           | Printed Name   | 1                    | Signature   | ( )                       | )                    |                  |                           | Month Day Year            |   |  |
| 1           |  | 19                   |   | 4                         | 3                    |                  |                           | 1/5/18                    | ブ |  |
|             | White-TREATMENT, STORAGE, DISPOSAL FAC   | ILITY COPY           | Blue- GENERATOR   | #2 COPY                   | 6                    | Vel              | low- GENERAT              | OR #1 CORY                | _ |  |

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Original Ticket# 1253485

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/15/2018 Vehicle# 34

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6739470

Destination

PO

In

Profile Generator

Comments

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/15/2018 13:24:58 Out 05/15/2018 13:24:58

Scale Inbound 1

Operator rb

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

rb

Volume

Gross 54200 16 Tare 25280 16 Net 28920 16 Tons

14.46

Product LD% Qty HOL Rate Tax Amount Origin COAL ASH & COAL CO 100 14.46 Tons SAVANNAH

> Total Tax fotal ficket



|  |   | 1. Generator's US E    | PA ID No.  | anifest Doc  | No           | 2 Dage 1                  |                                |   |  |  |  |
|--|---|------------------------|--|--------------|--------------|---------------------------|--------------------------------|---|--|--|--|
| -  | NON-HAZARDOUS MANIFEST                      |                        | / A  | dilliese boc | NO.          | 2. Page 1                 | 1.01                           | 1011                                    |  |  |  |
|  | 3. Generator's Mailing Address:             |                        | CONTROL CONTRO | 3/1/1/1      | e selle.     |                           |                                | 12.42                                   |  |  |  |
|  | GEORGIA POWER                               |                        | enerator's Site Address (If  |              | nailing):    | A. Manif                  | est Number                     | 6720470                                 |  |  |  |
|  | 241 RALPH MCGILL BLVD NE, E                 | UNI#10221              | EORGIA POWER PLAN  | II KRAFT     |              | V                         | VMNA                           | 6739470                                 |  |  |  |
|  | ATLANTA, GA 30308-3374                      |                        | 55 CROSSGATE RD.   |              |              | 100                       | B. State (                     | Generator's ID                          |  |  |  |
|  |   |                        | ORT WENTWORTH, G   | A 31407      |              |                           |                                |   |  |  |  |
|  | 5. Transporter 1 Company Name               | 06-1365                | T.   |              |              |                           | - Service - Light and American |   |  |  |  |
|  | / Company Name                              | 1                      | 6. US EPA I  | D Number     |              |                           |                                |   |  |  |  |
|  | CUSTAL FI                                   | radina                 |  |              |              | C. State Transporter's ID |                                |   |  |  |  |
|  | 7. Transporter 2 Company Name               |                        | 8. US EPA I  | D Number     |              | D. Transporter's Phone    |                                |   |  |  |  |
|  |   |                        |  |              |              | E. State Transporter's ID |                                |   |  |  |  |
|  | 9. Designated Facility Name and Site        | 0.11                   |  | Charrens I P |              | F. Transp                 | orter's Phone                  |   |  |  |  |
|  | SUPERIOR LANDFILL                           | Address                | 10. US EPA   | ID Number    |              | 2490                      |                                |   |  |  |  |
|  | 3001 LITTLE NECK ROAD                       |                        |  |              |              | G. State I                | acility ID                     |   |  |  |  |
| b  | Savannah, GA 31419                          |                        | V-12-12-12-12-12-12-12-12-12-12-12-12-12-  |              |              | H. State F                | acility Phone                  | 912-927-6113                            |  |  |  |
|  | 30V01111011, GA 31413                       |                        |  |              |              |                           |                                |   |  |  |  |
|  | 11. Description of Waste Materials          |                        |  | 12, Co       | ntainers     | 13. Total                 | 14. Unit                       |   |  |  |  |
| G<br>E   |   |                        |  | No.          | Type         | Quantity                  | Wt./Vol.                       | I. Misc. Comments                       |  |  |  |
| N  | a. COAL ASH& COAL CONTAMI                   | NATED WASTE            | -D   | hall         | 1 -          | 15                        |                                |   |  |  |  |
| E  |   |                        | D  | 1139         |              | 10                        |                                |   |  |  |  |
| R  | b. WM Profile #                             | 375200GAKRA            |  |              |              |                           |                                |   |  |  |  |
| A<br>T   |   |                        |  |              |              |                           |                                |   |  |  |  |
| o  |   |                        |  |              |              |                           |                                |   |  |  |  |
| R  |   | VI Profile #           |  |              |              |                           |                                |   |  |  |  |
|  | С.  |                        |  |              |              |                           |                                |   |  |  |  |
|  | 10/0  | M Profile #            |  |              |              |                           | Elizabeth de la company        | 200000000000000000000000000000000000000 |  |  |  |
|  | d.  | Williams               |  |              |              |                           |                                |   |  |  |  |
|  |   |                        |  |              |              |                           |                                |   |  |  |  |
|  | W   | M Profile #            |  |              |              |                           |                                |   |  |  |  |
|  | J. Additional Descriptions for Materia      |                        |  | K. Disposa   | l Location   |                           |                                |   |  |  |  |
|  |   |                        |  |              |              | 17.11h                    |                                |   |  |  |  |
|  |   |                        |  | Cell         | 1            | 1)0                       |                                | Level                                   |  |  |  |
| +  | 15. Special Handling Instructions and A     | dditional Information  | V  | Grid         | 17           | - 87                      | +36                            |   |  |  |  |
| 4  | 25. Special Harianing instructions and A    | dulional informaçio    |  |              | - (          | 100                       | 0)                             |   |  |  |  |
|  |   |                        |  |              | No. of       |                           |                                |   |  |  |  |
|  | Purchase Order # GPC10760293                |                        | EMERGENCY CON  | ITACT / PHC  | ONE NO :     |                           |                                |   |  |  |  |
|  | 16. GENERATOR'S CERTIFICATE:                |                        |  |              |              |                           |                                |   |  |  |  |
|  | I hereby certify that the above-describe    | ed materials are not h | nazardous wastes as define   | ed by CER Da | art 261 or a | ov applicable             | a stata lavu hav               | - L É II                                |  |  |  |
|  | accurately described, classified and pac    | kaged and are in pro   | per condition for transpor   | tation accor | ding to app  | licable regul             | e state law, flat<br>lations.  | ve been fully and                       |  |  |  |
|  | Printed Name                                |                        | Signature "On behal  |              |              |                           |                                | Month Day Year                          |  |  |  |
|  | DAMPOUICH                                   |                        | 5  |              |              |                           |                                | 5/5/8                                   |  |  |  |
| R  | 17. Transporter 1 Acknowledgement o         | f Receipt of Materials |  |              |              |                           |                                | 0.010                                   |  |  |  |
| A<br>N   | Printed Name                                | worth                  | Signature  | 1111         | 7            |                           |                                | Month Day Year                          |  |  |  |
| S<br>P   | 18. Transporter 2 Acknowledgement of        | f Dospint of Materials | 1 1000   | - W          | 00.          | 7/                        |                                | 9112114                                 |  |  |  |
| R  | Printed Name                                | r Neceipt of Waterials |  |              | - 1          |                           |                                |   |  |  |  |
| E  | 3,000,000                                   |                        | Signature  |              |              |                           |                                | Month Day Year                          |  |  |  |
| "  |   |                        |  |              |              | - 11                      |                                |   |  |  |  |
| -  | 19. Certificate of Final Treatment/Dispo    |                        |  |              |              | 40                        |                                |   |  |  |  |
| A<br>C   | I certify, on behalf of the above listed tr | eatment facility, that | t to the best of my knowle   | dge, the abo | ove-describe | ed waste wa               | as managed in                  | compliance with all                     |  |  |  |
|  | applicable laws, regulations, permits an    |                        |  |              |              |                           |                                |   |  |  |  |
| 20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this man Printed Name |   |                        |  |              |              | 3.67                      |                                | 7 E11                                   |  |  |  |
| 4  | Timiled Ivallie                             | 410,                   | Signature  | 1            |              |                           |                                | Month Day Year                          |  |  |  |
|  | White- TREATMENT, STORAGE, DISPOS           | AL EACHTYCON           | Dive CENTERATES  | 2 0000       |              |                           |                                |   |  |  |  |
|  | THE TREATMENT, STORAGE, DISPOS              | AL FAGILITY GOPY       | Blue- GENERATOR #  | 2 COPY       |              | Yel                       | low- GENERAT                   | OR #1 COPY                              |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253487

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N

Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739471

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Generator

Time

In 05/15/2018 13:28:02

Out 05/15/2018 13:28:02

Scale

Inbound 1

rb

rb

Operator

Vehicle# BN24

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare

55640 1b 21800 15

Net Tons 33840 16 16.92

Comments

### WASTE MANAGEMENT

| Pro | duct       | 1.0     | LD%                                   | Qty   | MOU  | Rate | Tax   | Amount | Origin |
|-----|------------|---------|---------------------------------------|---|------|------|---|--------|--------|
|     |            | -       | er ac'es com mon total trans more es- | a cause active paper exists conjunctions below below to |      |      | and which desire the series are the series which were been been to be |        |        |
| 1   | COAL ASH & | COAL CO | 100                                   | 16.92   | Tons |      |   |        | PORTW  |



Total Tax fotal flokot



| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone  7. Transporter 1 Company Name  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  10. US EPA ID Number  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  6. Generator's (idifferent than mailing): GEORGIA POWER PLANT KRAFT 155 CROSSGATE RD. PORT WENTWORTH, GA 31407  B. State Generator's ID C. State Transporter's ID E. State Transporter's ID F. Transporter's Phone  10. US EPA ID Number  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  D. WINDER OF The Main Mailing (didifferent than mailing): Generator's (idifferent than mailing): GEORGIA POWER PLANT KRAFT 155 CROSSGATE RD. PORT WENTWORTH, GA 31407  B. Manifest Number  C. State Facility Number  E. State Transporter's ID F. Transporter's ID F. Transporter's Phone  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  D. Misc. Comments  12. Containers No. Type Quantity Wt. /vol.  14. Unit Wt. /vol.  15. Misc. Comments No. Type Quantity Wt. /vol.  15. Misc. Comments No. Type Usuantity Wt. /vol.  16. WINNA  17. Transporter's ID F. Transpo | NON-HAZARDOUS MANIFEST   | 1. Generator's U                      | IS EPA ID No.  | Manifest Doc No.             | 2. Page 1                         | . of   | Y          |  |       |  |
|--|--|---------------------------------------|--|------------------------------|-----------------------------------|--|------------|--|-------|--|
| GEORGIA POWER PLANT KRAFT  241 RALPH MCGIL BLVD NE, BINJ10221  ATLANTA, GA 30308-3374  4. Generator's Phone d04-506-1365  5-fransporter a Company Name   |  | 1                                     | N / A  |                              |                                   |  | 1          | 15                                     | 5     |  |
| 241 RALIPH MCGILL BLYD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365 5. Transporter E Company Name 6. US EPA ID Number 7. Transporter E Company Name 8. US EPA ID Number 6. State Transporter's ID 7. Transporter Shone Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD 36Vannah, GA 31419 61. Description of Waste Materials 6. US EPA ID Number 7. Transporter's Phone Address SUPERIOR LANDFILL 6. State Transporter's ID 7. Transporter's Phone Address SUPERIOR LANDFILL 6. State Transporter's ID 7. Transporter's Phone Address SUPERIOR LANDFILL 7. Transporter's Phone Address SUPERIOR LANDFILL 8. US EPA ID Number 8. US EPA ID Number 8. State Transporter's ID 8. Transporter's Phone Address SUPERIOR LANDFILL 9. Lister Sacilty Phone 912-927-6113 9. Lister Sacilty Phone 9 |  |                                       | Generator's Site Address   | (If different than mailing): | A. Manif                          | est Number   | TIC        | ٧.٧_                                   | 201   |  |
| A LARATH, AGA 30308-3374  4. Generator's Phone 404-506-1365  5. Arassporter's Company Name 6. US PPAID Number 6. C. State Transporter's ID 7. Transporter's Phone 8. US PPAID Number 8. US PPAID Number 9. D. Transporter's Phone  |  |                                       | GEORGIA POWER PI   | ANT KRAFT                    | W                                 | /MNA   | 6739471    |  |       |  |
| # Continues of Policy Phone  |  | , BIN#10221                           | and the second of the second o |                              |                                   |  | Seperator' | c ID                                   |       |  |
| 5. Fransporter 1 Company Name  7. Transporter 2 Company Name  8. US EPA ID Number  E. State Transporter's ID D. Transporter's  |  |                                       | PORT WENTWORTH   | , GA 31407                   |                                   | D. State C   | ichci ator | 310                                    |       |  |
| Transporter 2 Company Name  8. US EPAID Number  9. Designated Facility Name and Site Address SUPERIOR LANDFILL SOUL HITLE RECK ROAD Savannah, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  12. Contamination  WM Profile #  13. Additional Descriptions for Materials Listed Above  WM Profile #  14. Additional Descriptions for Materials Listed Above  WM Profile #  15. Special Handling Instructions and Additional Information  WM Profile #  16. GENERATOR'S CERTIFICATE:  Thereby certify that the above described materials are not hardeous wastes as defined by CFR Part 26.1 or any applicable state law, have been fully and accounted by described, disastified and parkaged and are in proper condition for transportation according to applicable state law, have been fully and accounted by described, disastified and parkaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Signature  Mount  Nove:  Nove |  | 506-1365                              |  |                              |                                   |  |            |  |       |  |
| 7. Transporter 2 Company Name  8. US EPAID Number  9. Designated Facility Name and Site Address SUPFRIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials  12. Coranna  | 5. Fransporter 1 Company Name  | 1                                     | 6. US EF   | A ID Number                  |                                   |  |            |  |       |  |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  G. State Facility Phone 912-927-6113  H. Sucception of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile #  G. WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  Cell Grid  Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO: 16. GENRATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, disastified and packaged and are in proper condition for transportation according to applicable state law, have been fully and accurately described, disastified and packaged and are in proper condition for transportation according to applicable state law, have been fully and accurately described, disastified and packaged and are in proper condition for transportation according to applicable state law, have been fully and accurately described, disastified and packaged and are in proper condition for transportation according to applicable state law, have been fully and accurately described, disastified and packaged and see in proper condition for transportation according to applicable state law, have been fully and accurately described, disastified allowed by the proper seed to the proper see | 1,5007016  | radias                                | ,  |                              | Carrie Control Control Control    | THE RESERVE WHEN THE PARTY OF T |            |  |       |  |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials  12. Consumers  13. Total Materials  14. State Facility Phone  15. Special Facility On Materials  16. WM Profile #  17. Additional Descriptions for Materials Listed Above  18. Additional Descriptions for Materials Listed Above  19. Special Hundling Instructions and Additional Information  WM Profile #  19. Special Hundling Instructions and Additional Information  WM Profile #  19. Special Hundling Instructions and Additional Information  WM Profile #  19. Transporter 1 Additional Description of Receipt of Materials  Purchase Order # GPC10760293  EMERGENCY CONTACT/PHONE NO:  19. Transporter 1 Additional Descriptions of Receipt of Materials  Printed Name  Signature  Signature  Mount Day Year  Nooth Day Year  Nooth Day Year  Nooth Day Year  Nooth Day Year  Printed Name  Signature  Nooth Opy Year  Printed Name  Signature  Signature  Nooth Opy Year  Nooth Opy | 7. Transporter 2 Company Name  | 1001140                               | 8. US FF   | Δ ID Number                  | D. Transp                         | oorter's Phone   |            | ************************************** |       |  |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials 2. Containers 3. Little Facility ID 4. State Facility ID 6. Shate Facility ID 7. State Facility ID 7. State Facility ID 8. Little Facility ID 8. L |  |                                       |  | Trib italiaci                | E. State 1                        | ransporter's ID  |            |  |       |  |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD SAVANNAH, GA 31419  11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  C.  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell Grid Grid Level  Grid Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO:  16. GENERATOR'S CERRIFICATE: Hereby certify but the above-described materials are not instruction for transportation according to applicable state law, have been fully and accurately described, cassified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Signature  Signature  Novak Day Very Very Printed Name  Signature  Novak Day Very Very Novak Day Very Very Printed Name  Signature  Signature  Novak Day Very Very Novak Day Very Day Day Day Day Day Day Day Day Day Da   |  |                                       |  |                              |                                   |  |            |  |       |  |
| 3001 LITTLE NECK ROAD Savannah, GA 31419  II. Description of Waste Materials  II. Description of Waste Materials  III. Description of Waste Materials Listed Materials  III. Description of Waste Materials Listed Materials  III. Descriptions for Materials Listed Materials  III. Additional Descriptions for Materials Listed Above  III. Additional Descriptions for Materials Listed Above  III. Additional Descriptions for Materials Listed Above  III. Description of Waste Materials  III. Transporter Acknowledgement of Receipt of Materials  III. Transporter Acknowledgement of Recei |  | te Address                            | 10. US E   | PA ID Number                 |                                   |  |            |  |       |  |
| Savannah, GA 31419  II. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  Signature  Month Day Year  Month Day Year  Month Day Year  I. Transporter I Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  Month Day Year  Month Day Year  I. Certificate of Final Treatment/Disposal  I. Certificate of Final Treatme | The state of the s |                                       |  |                              | G. State I                        | acility ID   | TICLE I    |  | 1     |  |
| G 11. Description of Waste Materials  E a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile # 375200GAKRA  b.  WM Profile #  J. Additional Descriptions for Materials Listed Above  L. Disposal Location  Cell Grid Level  Grid Level  Furchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and occurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Signature  Signature  Nowth Day Year  19. Certificate of Final Treatment/Disposal  19. Certificate of Final Treatment/Disposal  10. Facility Owner or Operator: Certification of receipt of non hazardous materials covered by this manifest.  Printed Name  Signature  Nowth Day Year  Month Day Year  Month Day Year  Month Day Year  Signature  Now Month Day Year  Month Day Year  Signature  Signature  Now Month Day Year  Signature  Signature  Now Month Day Year  Signature  Now Month Day Year  Signature  Now Month Day Year  Signature  Signature  Now Month Day Year  Signature  Now Month Day Year  Signature  Month Job Month Job Month  Signature  Signature  Month Job Month  Month  Signature  Month  Month  Month  Signature  Month  Month  Month  Signature  Month  Month  Signature  Month  Month |  |                                       |  |                              | H. State I                        | acility Phone  | 912-       | 927-611                                | .3    |  |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell Grid  Grid  Level  15. Special Handling Instructions and Additional Information  WM Profile #  J. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell Grid  Grid  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Signature  Moith Day Year  Moith Day Year  19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable law, regulations, permits and icenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Month Day Year  Signature  Month Day Year  Month Day Year  Signature  Month Day | Savaiman, GA 31419   |                                       |  |                              |                                   |  |            |  |       |  |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell Grid  Grid  Level  15. Special Handling Instructions and Additional Information  WM Profile #  J. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell Grid  Grid  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Signature  Moith Day Year  Moith Day Year  19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable law, regulations, permits and icenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Month Day Year  Signature  Month Day Year  Month Day Year  Signature  Month Day | 11 Description of Waste Metallal   |                                       |  | 12. Containers               | 13 Total                          | 14 Unit  |            | 1000                                   |       |  |
| WM Profile # 375200GAKRA  b.  WM Profile #  d.  WM Profile #  1. Additional Descriptions for Materials Listed Above  WM Profile #  1. Additional Descriptions for Materials Listed Above  Early Contact / Phone No.:  16. GENERATOR'S CERTIFICATE:  Hereby certify that the above described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature  Printed Name  Signature  Month Day Vear  19. Certificate of Final Treatment/Disposal  20. Facility Owner or Operator: Certification of receipt of non hazardous materials covered by this manifest.  Month Day Vear  Month Day Vear  Printed Name   |  | According to the second               | K 5 3-11 1 11 11   |                              |                                   |  | I. N       | Aisc. Comme                            | nts   |  |
| WM Profile #  C.  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  EMERGENCY CONTACT / PHONE NO:  16. GENERATOR'S CERRIFICATE:  Hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature To behalf of Phone Mooth Day Year  JR. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Mooth Day Year  Mooth Day Year  JR. Certificate of Final Treatment/Disposal  Lecrtify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Oby Vest  Month Oby Vest  Month Oby Vest  Month Oby Vest   | a. COAL ASH& COAL CONTAIN  | MINATED WASTE                         |  |                              | VIT                               |  |            | 71                                     |       |  |
| MM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Control Cell Cell Control Cell Cell Control Cell Cell Cell Cell Cell Cell Cell Ce  | E  |                                       | Ballets  | H0340                        |                                   |  |            |  |       |  |
| C.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Grid  Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of " Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal  Lecrtify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  Month Day Year  Month Day Year  Signature  Month Day Year   | Marian and the second | e# 3/5200GAK                          | RA   |                              |                                   |  | 4916       |  |       |  |
| WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Grid Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO:  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature On behalf of Phone No:  18. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature Nome Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Moonth Oby Work   | T .  |                                       |  |                              |                                   |  |            |  |       |  |
| d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  Edit Grid Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  Hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature On behalf of Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  19. Certificate of Final Treatment/Disposal  Lecrtify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Month Day Year  Month Day Year  Signature Month Day Year   | o  |                                       |  |                              |                                   |  |            |  |       |  |
| MM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature On behalf of Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  19. Certificate of Final Treatment/Disposal Lecrtify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator. Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Month Opy Year  | IV.  | WM Profile #                          |  |                              |                                   |  |            |  |       |  |
| MM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell   Level    Grid   Level    15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293   EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:   I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name   Signature "On behalf of"   Month   Day   Year    17. Transporter 1 Acknowledgement of Receipt of Materials    Printed Name   Signature   Month   Day   Year    19. Certificate of Final Treatment/Disposal    1 Certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name   Signature   Month   Day   Year    Signature   Month |  |                                       |  |                              |                                   |  |            |  |       |  |
| WM Profile #  J. Additional Descriptions for Materials Listed Above    Cell   Grid   Level   |  | WM Profile #                          |  |                              |                                   |  |            |  |       |  |
| Special Handling Instructions and Additional Information   Cell   Grid   Level   |  |                                       |  |                              |                                   | J-11-11-11-11-11   |            |  |       |  |
| Special Handling Instructions and Additional Information   Cell   Grid   Level   |  |                                       |  |                              |                                   |  |            |  |       |  |
| Special Handling Instructions and Additional Information   Cell   Grid   Level   |  | WM Profile #                          |  |                              |                                   |  |            |  |       |  |
| Cell   Grid   Level  | / S SECTION S  | Contraction and a separate service of |  | K. Disposal Locati           | on .                              |  |            |  |       |  |
| 15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature "On behalf of" Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Month Day Year  |  |                                       |  | 47                           | 17.                               | 17/11  |            | 65                                     |       |  |
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| applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  |  |                                       |  |                              | Tev I state                       |  |            |  |       |  |
| 20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Month Day Year   | I certify, on behalf of the above liste  | d treatment facility,                 | that to the best of my kno   | wledge, the above-des        | cribed waste w                    | as managed in  | compliand  | e with all                             |       |  |
| Printed Name Signature Month Day Year  |  |                                       |  |                              |                                   |  |            | AH                                     | -4(%- |  |
| 7/7/0  |  | tification of receipt o               |  | s covered by this manif      | est.                              | 1 1 1 1  | 6          | 15                                     | -/    |  |
| White TREATMENT CTORACE DISPOSAL FACULTY CODY  | Printed Name   |                                       | Signature  | 1                            |                                   |  | Month      | /Day                                   | Year  |  |
|  | White TREATMENT STORAGE DIST   | OCAL FACILITY OC                      | DI CONTRACTOR  | 20 112 0001                  |                                   | 202000000000000000000000000000000000000  | 1          | 1 1                                    | U     |  |

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Original Ticket# 1253489

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N

Ticket Date 05/15/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6739472

Destination

PO

In

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/15/2018 13:32:09 Out 05/15/2018 13:32:09

Scale Inbound 1

Operator rb

Vehicle# 38

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net

Tons

58640 16 27960 lb 30680 1b 15.34

Comments

WASTE MANAGEMENT

Product LD% Qty HOM Rate Tax Amount Origin 1 COAL ASH & COAL CO 100 15.34 Tons PORTW

Total Tax Total Ticket



|                       | NON-HAZARDOUS MANIFEST  1. Gene  | rator's US EPA  |   | nifest Doc I   | No.   | 2. Page 1  | of                          | 10                  | /  |      |  |
|-----------------------|--|-----------------|---|--|---|--|-----------------------------|---------------------|--|------|--|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#102  | GEC             | erator's Site Address (If di<br>DRGIA POWER PLAN<br>CROSSGATE RD. |  | ailing):  |  | est Number  MNA  B. State 6 | 6739<br>Generator's |  |      |  |
|                       | ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365   |                 | RT WENTWORTH, GA  | 31407  |   |  |                             |                     |  |      |  |
|                       | 5 Transporter 1 Company Name   | 1100            | 6. US EPA ID  | Number   | 10  | C. State Transporter's ID D. Transporter's Phone   |                             |                     |  |      |  |
|                       | 7. Transporter 2 Company Name  |                 | 8. US EPA ID  | Number   |   | E. State Transporter's ID F. Transporter's Phone   |                             |                     |  |      |  |
|                       | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD   |                 | 10. US EPA I  | D Number   |   | G. State Facility ID  H. State Facility Phone 912-927-6113   |                             |                     |  |      |  |
|                       | Savannah, GA 31419   |                 |   |  |   |  |                             |                     |  |      |  |
| G                     | 11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED   | MACTE           |   | No.  | Type  | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.        | I. M                | lisc. Commen   | ts   |  |
| N<br>E                | WM Profile # 3752  |                 | P   | 138  | DI  | 18   |                             |                     | The state of the s |      |  |
| R<br>A<br>T           | b.   | LOUGAKKA        |   |  |   |  |                             |                     |  |      |  |
| O<br>R                | WM Profile   | #               |   |  |   |  |                             |                     |  |      |  |
|                       | WM Profile   | #               |   |  |   |  |                             |                     |  |      |  |
|                       | d.   |                 |   |  |   |  |                             |                     |  |      |  |
|                       | WM Profile J. Additional Descriptions for Materials Listed   |                 |   | K Dispos   | al Location   |  |                             |                     |  |      |  |
|                       | - The state of the | Above           |   | Cell<br>Grid   | A COCATION  | 320  | 170                         | Level               | 60   |      |  |
|                       | 15. Special Handling Instructions and Additional   | l Information   | п.  |  |   |  |                             |                     |  |      |  |
|                       | Purchase Order # GPC10760293   |                 | EMERGENCY CON   | TACT / PHO   | ONE NO.:  |  |                             |                     |  |      |  |
|                       | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described mater accurately described, classified and packaged a  | ials are not ha | izardous wastes as define   | d by CFR Pa  | art 261 or a  | any applicabl  | e state law, ha             | ve been fu          | lly and  |      |  |
|                       | Printed Name B + 11120011ch  |                 | Signature "On behalf  | The same of the sa | ang to ap   | pileable rega  | idelons.                    | Month 5             | Day  | Year |  |
| TR                    | 17. Transporter 1 Acknowledgement of Receipt   | t of Materials  |   | 1/ //  | 2   |  |                             | T                   |  |      |  |
| A<br>N<br>S<br>P      | Printed Name  18. Transporter 2 Acknowledgement of Receipt   | t of Materials  | Signature   | 2/61   | 1   |  |                             | Month 5             | Day  | Year |  |
| O<br>R<br>T<br>E<br>R | Printed Name   |                 | Signature   |  | *   |  |                             | Month               | Day  | Year |  |
| F<br>A<br>C           | 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatmen applicable laws, regulations, permits and license.   | es on the date  | s listed above.   |  |   | THE RESERVE OF THE PERSON OF T | as managed in               | complianc           | e with all   |      |  |
| L<br>T<br>Y           | 20. Facility Owner or Operator: Certification of Printed Name  | receipt of no   | n-hazardous materials co<br>Signature                             | vered by th  | is manifest   |  |                             | Month               | Day  | Vear |  |
|                       | White-TREATMENT, STORAGE, DISPOSAL FACIL   | ITY COPY        | Blue- GENERATOR #   | 2 COPY   | Miles of the Control | Ye   | llow- GENERA                | TOR #1 COL          | ργ   |      |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253502

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6799473

Destination

PC

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale

Time

In 05/15/2018 13:52:38 Out 05/15/2018 13:52:38

Inbound 1

Operator rb

Vehicle# L10

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net

58980 16 25340 lb 33640 1b

16.82 Tons

Comments

Origin Product LD% Qty UOM Rate Tax Amount 1 COAL ASH & COAL CO 100 16.82 Tons PORTW

Total Tax Tobal fleket



|                       | NON-HAZARDOUS MANIFEST   | I. Generator's US EP,                      |  | nifest Doc            | No.              | 2. Page 1                               | of   |                     | AI             | )            |
|-----------------------|--|--|--|-----------------------|------------------|---|--|---------------------|----------------|--------------|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN ATLANTA, GA 30308-3374 4/Generator's Phone 404-506   | GE0<br>N#10221 155<br>POI                  | erator's Site Address (If d<br>DRGIA POWER PLAN<br>5 CROSSGATE RD.<br>RT WENTWORTH, GA   | T KRAFT               | railing):        | 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | est Number /MNA  B. State (                          | 6739<br>Generator's | 9473<br>s ID   |              |
|                       | 4, Generator's Phone 404-506  5. Transporter 1 Company Name  7. Transporter 2 Company Name   | 1365<br>Jding                              | 6. US EPA IC   | *                     |                  | D. Transp                               | ransporter's ID<br>porter's Phone<br>ransporter's ID |                     |                |              |
|                       | 9. Designated Facility Name and Site Ad<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | ldress                                     | 10. US EPA I   | D Number              |                  | G. State F                              | Facility ID  | 912-9               | 927-6113       |              |
| G                     | 11. Description of Waste Materials   | 100  |  | 12. Co<br>No.         | ntainers<br>Type | 13. Total<br>Quantity                   | 14. Unit   | I. M                | lisc. Comments | s            |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAMINA  |  | L  | 18                    | DT               | 18                                      | Wt./Vol.   |                     |                |              |
| R<br>A<br>T<br>O<br>R | b.   | 375200GAKRA Profile #                      |  |                       |                  |   |  |                     |                |              |
|                       | d.<br>WM   | Profile #                                  |  |                       |                  | /                                       |  |                     |                |              |
|                       | J. Additional Descriptions for Materials   | Listed Above                               |  | K. Dispos  Cell  Grid | al Location      | 1320                                    | 24   | Level               | 61             |              |
|                       | 15. Special Handling Instructions and Ad   | ditional Information                       |  | N. N.                 | C                | NH                                      | 0  |                     |                |              |
|                       | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described accurately described, classified and packet Printed Name  | materials are not ha                       | example of transport of the second state of the second sec | d by CFR P            | art 261 or a     | ny applicabl<br>plicable regu           | e state law, ha<br>lations.                          | ve been ful         | lly and        | Year         |
| T<br>R<br>A           | 17. Transporter 1 Acknowledgement of F Printed Name  | Receipt of Materials                       | Signature  | 1                     |                  |   |  | Month               | Day            | / ()<br>Year |
| S P O R T E R         | 18. Transporter 2 Acknowledgement of F<br>Printed Name   | Receipt of Materials                       | Signature  | Cles.                 | ULLE             | 1                                       |  | Month               | Day            | Year         |
| F A C I L I T Y       | 19. Certificate of Final Treatment/Dispos<br>I certify, on behalf of the above listed trea<br>applicable laws, regulations, permits and<br>20. Facility Owner or Operator: Certificate<br>Printed Name | atment facility, that licenses on the date | s listed above.  |                       |                  |   | as managed in  | complianc           | e with all     | /Year/       |
|                       | White-TREATMENT, STORAGE, DISPOSAL   | FACILITY COPY                              | Blue- GENERATOR #  | COPY                  |                  | Val                                     | low- GENERAT   | OP #1 COP           | NV.            |              |

Pink- FACILITY USE ONLY



Original T Ticket# 1253505

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket#

Hauling Ticket# Route

State Waste Code

Manifest 6739474

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In Ø5/15/2018 13:58:16

Out 05/15/2018 13:58:16

Scale

Inbound 1

Operator rb

Vehicle# L10

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare

54980 1b 25340 1b

Net Tons 29640 lb 14.82

Comments

Product LD% Qty MOU Rate Так Amount Origin 1 COAL ASH & COAL CO 100 14.82 Tons PORTW

Total Tax Tobal fleket



|                       | WASTE WANAGEMENT  | 1. Generator's US I                          | PA ID No.   | Mar  | nifest Doc N | No.              | 2. Page 1             | of  |                     |              |          |
|-----------------------|---|--|---|--|--------------|------------------|-----------------------|---|---------------------|--------------|----------|
|                       | NON-HAZARDOUS MANIFEST  |  | / A   |  |              |                  |                       |   | 12                  | 5            | 1/6/19   |
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, I ATLANTA, GA 30308-3374 4. Generator's Phone 404-50  | G<br>  G<br>  BIN#10221   1                  | enerator's Site A<br>EORGIA POW<br>55 CROSSGAT<br>ORT WENTW | /ER PLANT<br>TE RD.                          | KRAFT        | ailing):         |                       | st Number  MNA  B. State G                          | 6739                |              |          |
|                       | 5. Transporter 1 Company Name 7. Transporter 2 Company Name   | rading                                       | 6.  | US EPA ID                                    |              |                  | D. Transp             | ransporter's ID<br>orter's Phone<br>ransporter's ID |                     |              |          |
|                       | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | Address                                      | 10.   | US EPA II                                    | ) Number     |                  | G. State F            | acility ID  | 912-9               | 27-6113      |          |
| G                     | 11. Description of Waste Materials  |  |   |  | 12. Co       | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.                                | I. Mi               | isc. Comment | S        |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAM  | INATED WASTE                                 | A   | J.   | 87           | DT               | 170                   |   |                     |              |          |
| R<br>A<br>T<br>O<br>R | b.  | /M Profile #                                 |   |  |              |                  |                       |   |                     |              |          |
|                       |   | /M Profile #                                 |   |  |              | process          |                       |   |                     |              |          |
|                       | d.  W J. Additional Descriptions for Mater  | /M Profile #<br>rials Listed Above           |   |  | K. Dispo:    | sal Locati       | on                    | 26  |                     | 61           |          |
|                       | 15. Special Handling Instructions and   | l Additional Informat                        | ion   |  | Cell<br>Grid | 1                | NSTON                 | 30  | Level               |              |          |
|                       | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descriaccurately described, classified and p  | bed materials are no                         | ot hazardous was  | RGENCY CON<br>stes as define<br>for transpor | ed by CFR I  | Part 261 o       | or any applicab       | le state law, ha                                    | ave been fu         | lly and      |          |
| т                     | Printed Name  B + 110001Ck  17. Transporter 1 Acknowledgement   | of Receipt of Mater                          | BI  | re "On behal                                 | f of"        | 10               |                       |   | Month               | Day<br>15    | Year / / |
| R<br>A<br>N<br>S<br>P | Printed Name  18. Transporter 2 Acknowledgement   | tes  | Signatu   | re/\/  | lee          | X                |                       | 7,5   | Month 5             | Day /        | Year / 8 |
| O<br>R<br>T<br>E<br>R | Printed Name  |  | Signatu   | re   |              |                  |                       |   | Month               | Day          | Year     |
| F<br>A<br>C<br>I<br>L | Certificate of Final Treatment/Di     I certify, on behalf of the above listed applicable laws, regulations, permits     Constitution of the above listed applicable laws, regulations, permits | treatment facility, t<br>and licenses on the | dates listed abov<br>f non-hazardous                        | ve.<br>s materials co                        |              |                  | A Maria S             | was managed i                                       |                     | ľ            |          |
| Y                     | Printed Name  White- TREATMENT, STORAGE, DISP   | OSAL FACILITY COPY                           | Signatu<br>Blue- 0  | GENERATOR                                    | #2 COPY      |                  | Y                     | ellow- GENERA                                       | Month<br>ATOR #1 CO | PY           | Year     |

Pink- FACILITY USE ONLY



Original T to Robb # 12(5.45)2.3

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/15/2018 Vehicle# 34

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Rouke

State Waste Code Manifest 6739475

Destination

PO

Profile Generator

Comments

Product

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/15/2018 14:56:07 Out 05/15/2018 14:56:07

Scale Inbound 1

Qty

Operator LBEJARAN LBEJARAN

Ditting # 00001037

Gen EPA ID NR

Container

Driver

Check#

UOM Rate Tax

Amount

Gross

Tare

Net

Tons

Origin

58100 16

25280 lb

32820 lb 16.41

1 COAL ASH & COAL CO 100

16.41 Tons

PORTW



# WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| -                |  |   |                 |                   |  |                                       |                       |
|------------------|--|---|-----------------|-------------------|--|---------------------------------------|-----------------------|
| *                | NON-HAZARDOUS MANIFEST  1. Generator's US I  | EPA ID No. Mar<br>/ A                                 | nifest Doc      | No.               | 2, Page 1  | of                                    | 2:25                  |
|                  | GEORGIA POWER G  | enerator's Site Address (If dif<br>EORGIA POWER PLANT |                 | nailing):         |  | est Number                            | 6739475               |
|                  | ATLANTA, GA 30308-3374 P   | 55 CROSSGATE RD.<br>ORT WENTWORTH, GA                 | 31407           |                   |  | B. State G                            | Generator's ID        |
| 1                | 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name   | 6. US EPA ID  | Number          |                   |  |                                       |                       |
|                  | ('Dastal Gratino   |   |                 |                   | The property of the second   | ransporter's ID<br>orter's Phone      | )                     |
|                  | 7. Transporter 2 Company Name  | 8. US EPA ID  | Number          |                   | The second secon | ransporter's ID<br>orter's Phone      |                       |
|                  | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL   | 10. US EPA II   | ) Number        | 4-17              | G. State F   | acility ID                            |                       |
|                  | 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |   |                 |                   | H. State F   | acility Phone                         | 912-927-6113          |
|                  | Savaillali, GA 31419   |   |                 |                   |  |                                       |                       |
| G                | 11. Description of Waste Materials   | •   | 12. Co<br>No.   | ontainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.                  | I. Misc. Comments     |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAMINATED WASTE   | R   | 34              | DT                | 18   | , , , , , , , , , , , , , , , , , , , |                       |
| R                | WM Profile # 375200GAKR  | A   |                 |                   |  |                                       |                       |
| A                | b.   |   |                 | A STATE OF        | 1  |                                       |                       |
| 0                | WM Profile #   |   |                 |                   |  |                                       |                       |
| R                | C  | 15-15-15-   |                 |                   |  |                                       |                       |
|                  |  |   | Barra Deduction |                   | U  |                                       |                       |
|                  | d. WM Profile #  |   |                 |                   |  |                                       |                       |
|                  |  |   |                 |                   |  |                                       |                       |
|                  | WM Profile #   |   |                 |                   |  |                                       |                       |
|                  | J. Additional Descriptions for Materials Listed Above  |   | K. Dispo        | sal Location      | 00   | 174                                   | 11                    |
|                  |  |   | Cell            | 11                | 130  |                                       | Level 4               |
|                  | 1F Consid Handling Instructions and Additional Information   |   | Grid            | 110               | . M.   | 36                                    |                       |
| Ĭ                | 15. Special Handling Instructions and Additional Informati   | On  |                 |                   | 70,00  |                                       |                       |
| 1                | Purchase Order # GPC10760293   | EMERGENCY CON   | TACT / PH       | ONE NO.:          |  |                                       |                       |
|                  | 16. GENERATOR'S CERTIFICATE:   |   |                 |                   |  |                                       |                       |
|                  | I hereby certify that the above-described materials are no accurately described, classified and packaged and are in p        | roper condition for transport                         | ation acco      |                   |  |                                       | ve been fully and     |
| 1                | Printed Name   | Signature "On behalf                                  | ot"             |                   |  |                                       | Month Day Year        |
| T                | 17. Transporter 1 Acknowledgement of Receipt of Materia  | als   | -               |                   |  |                                       | 1 - 4n-110            |
| R<br>A<br>N<br>S | Printed Name VELLE OF I TOURS  | Signature   |                 | -                 |  | >                                     | Month Day Year        |
| P<br>O<br>R      | 18. Transporter 2 Acknowledgement of Receipt of Materi   |   |                 | 6.4               |  |                                       |                       |
| T<br>E           | Printed Name   | Signature   |                 |                   |  |                                       | Month Day Year        |
| R                | 19. Certificate of Final Treatment/Disposal  |   |                 |                   |  |                                       |                       |
| F<br>A<br>C      | I certify, on behalf of the above listed treatment facility, the applicable laws, regulations, permits and licenses on the d |   | dge, the a      | bove-descri       | bed waste w  | vas managed ir                        | n compliance with all |
| 1                | 20. Facility Owner or Operator: Certification of receipt of  |   | vered by t      | his manifest      | i,   |                                       |                       |
| T<br>Y           | Printed Name   | Signature   | 1               |                   |  |                                       | Month Day Year        |
|                  | White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY PINK- FACILITY USE ONLY  | Blue- GENERATOR #                                     |                 |                   | Ye   | ellow- GENERA                         | TOR #1 COPY           |



Original Ticket# 1253527

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N

Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739476

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/15/2018 15:05:46 Out 05/15/2018 15:05:46

Scale Inbound 1

RB

RB

Operator

Vehicle# BN24

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross 56060 1b Tare 21800 lb Net 34260 16 Tons

17.13

Product

Comments

LD%

Qty

MOU

Rate

Tax

Amount

Origin

CDAL ASH & COAL CO 100

17.13 Tons

PORTW

Total Tax Fobal Floket



# WATER NON-HAZARDOUS MANIFEST

|        | WASTE MANAGEMENT   | TOA ID NIS   | -if N-   | T 2 D=== 1        |                           |                          |  |  |  |  |
|--------|--|--|--|-------------------|---------------------------|--------------------------|--|--|--|--|
|        | NON-HAZARDOUS MANIFEST  1. Generator's US E  | / A  | anifest Doc No.  | 2. Page 1         | or                        | 2'29                     |  |  |  |  |
|        | DECEMBER OF THE PROPERTY OF TH | enerator's Site Address (If d<br>EORGIA POWER PLAN   |  |                   | est Number                | 6739476                  |  |  |  |  |
| gi)    | 241 RALPH MCGILL BLVD NE, BIN#10221 15   | 55 CROSSGATE RD.   |  |                   |                           | l<br>Generator's ID      |  |  |  |  |
| 33     |  | ORT WENTWORTH, G   | A 31407  | 11 11 117         | b. State C                | enerator STD             |  |  |  |  |
| 4      | 4. Generator's Phone 404-506-1365  |  |  |                   |                           |                          |  |  |  |  |
| ı      | 5. Transporter 1 Company Name  | 6. US EPA II   | ) Number   |                   | Sansanian III             | Plantin serve properties |  |  |  |  |
|        | $(1 \times 1 \times$   |  |  | C. State T        | ransporter's IC           |                          |  |  |  |  |
|        | C/99461 6560, 110  |  |  | D. Transp         | orter's Phone             |                          |  |  |  |  |
|        | 7. Transporter 2 Company Name  | 8. US EPA II   | Number   |                   |                           |                          |  |  |  |  |
|        |  |  |  |                   | E. State Transporter's ID |                          |  |  |  |  |
| 100    | 9. Designated Facility Name and Site Address   | 10. US EPA   | ID Number  | F. Transp         | orter's Phone             |                          |  |  |  |  |
|        | SUPERIOR LANDFILL  | 20.  | io rumber  | G State F         | G. State Facility ID      |                          |  |  |  |  |
| i q    | 3001 LITTLE NECK ROAD  |  |  |                   |                           | 912-927-6113             |  |  |  |  |
|        | Savannah, GA 31419   |  |  | H. State F        | acility Phone             | 912-927-0113             |  |  |  |  |
|        | Savarman, GA 51415   |  |  |                   |                           |                          |  |  |  |  |
|        | 11. Description of Waste Materials   | THE OTHER PROPERTY OF THE PROP | 12. Containers   | 13. Total         | 14. Unit                  | I. Misc. Comments        |  |  |  |  |
| G<br>E |  |  | No. Type   | Quantity          | Wt./Vol.                  |                          |  |  |  |  |
| N      | a. COAL ASH& COAL CONTAMINATED WASTE   |  | annu-  | N                 | No.                       | A DE LEGIS               |  |  |  |  |
| Е      | WM Profile # 375200GAKR  | ^  | 100  | 1                 |                           |                          |  |  |  |  |
| R      | b. Will Profile # 373200GAKN   | A  |  |                   |                           |                          |  |  |  |  |
| T      |  |  | The state of the s |                   |                           |                          |  |  |  |  |
| 0      | Service Control of the Control of th |  |  |                   |                           |                          |  |  |  |  |
| R      | WM Profile #   |  |  |                   |                           |                          |  |  |  |  |
|        |  |  |  |                   |                           |                          |  |  |  |  |
|        | WM Profile #   |  |  |                   |                           |                          |  |  |  |  |
|        | d.   |  |  |                   |                           |                          |  |  |  |  |
|        |  |  |  |                   | 17.1                      |                          |  |  |  |  |
|        | WM Profile #   |  |  |                   |                           |                          |  |  |  |  |
|        | J. Additional Descriptions for Materials Listed Above  |  | K. Disposal Locat  | ion               |                           |                          |  |  |  |  |
|        |  |  | 1 1 1 2  |                   |                           |                          |  |  |  |  |
|        |  |  | Cell / 3   | 1012              | 962                       | Level 8                  |  |  |  |  |
|        | 15. Special Handling Instructions and Additional Informati   | ion  | Grid y = y   |                   | 1 )                       |                          |  |  |  |  |
|        | 13. Special Harming Histractions and Additional Histraction  |  |  |                   |                           |                          |  |  |  |  |
|        |  |  |  |                   |                           |                          |  |  |  |  |
| 4      | Purchase Order # GPC10760293   | EMERGENCY CO   | NTACT / PHONE NC   | ). <b>:</b>       |                           |                          |  |  |  |  |
|        | 16. GENERATOR'S CERTIFICATE:   |  |  |                   |                           |                          |  |  |  |  |
|        | I hereby certify that the above-described materials are no   | t hazardous wastes as defir  | ned by CFR Part 261  | or any applicab   | le state law, ha          | ave been fully and       |  |  |  |  |
|        | accurately described, classified and packaged and are in p   | roper condition for transpo  | rtation according to   |                   |                           |                          |  |  |  |  |
|        | Printed Name   | Signature "On beha   | ilf of"  |                   |                           | Month Day Year           |  |  |  |  |
|        | BAILIPOVICE  | Brufe  | ***********  |                   |                           | 10 110 10                |  |  |  |  |
| T<br>R | 17. Transporter 1 Acknowledgement of Receipt of Materi   | Signature  |  |                   |                           | Month Day Year           |  |  |  |  |
| A<br>N | Printed Name   | Signature  |  |                   |                           | S 10 /X                  |  |  |  |  |
| S<br>P | 18. Transporter 2 Acknowledgement of Receipt of Materi   | ials A White   |  |                   |                           | 1010                     |  |  |  |  |
| O<br>R | Printed Name   | Signature  |  |                   |                           | Month Day Year           |  |  |  |  |
| T<br>E | Trinca Name  |  |  |                   |                           |                          |  |  |  |  |
| R      |  |  |  |                   |                           |                          |  |  |  |  |
| F      | 19. Certificate of Final Treatment/Disposal  |  |  |                   |                           | a compliance with all    |  |  |  |  |
| A      | I certify, on behalf of the above listed treatment facility, the applicable laws, regulations, permits and licenses on the company of the com |  | ledge, the above-de  | scribed waste \   | was managed i             | n compliance with all    |  |  |  |  |
| L      | 20. Facility Owner or Operator: Certification of receipt of  |  | overed by this man   | ifest.            |                           |                          |  |  |  |  |
| I      |  | Signature  | overed by this man   | A William Control |                           | Month Day Year           |  |  |  |  |
| Y      | Printed Name   | (7/7)  |  |                   |                           | 5/5/9                    |  |  |  |  |
|        | White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   | Blue- GENERATOR  | TOR #1 COPY  |                   |                           |                          |  |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253526

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/15/2018 Vehicle# 38

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6739477

Destination

PO

Generator

Comments

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/15/2018 15:03:18 In Out 05/15/2018 15:03:18

Scale Inbound 1

Operator RB RB

Container

Driver

Check#

Тан

Rate

Billing # 0001037

Gen EPA ID NR

Product LD% Qty COAL ASH & COAL CO 100

16.14 Tons

UOM

Tare 27960 16 Net 32280 16 Tons 16.14

Amount Origin

PORTW

60240 1b

Total Tax Pobal ficket

Gross



|                       | NON-HAZARDOUS MANIFEST  1. Generat   |             |  | No.           | 2. Page 1 of     |  |   |                         |                   |
|-----------------------|--|-------------|--|---------------|------------------|--|---|-------------------------|-------------------|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365   | GE0         | A<br>erator's Site Address (If did<br>DRGIA POWER PLANT<br>CROSSGATE RD.<br>RT WENTWORTH, GA | ΓKRAFT        | ailing):         |  | st Number  MNA  B. State G                          | 673947<br>enerator's ID | 5 [               |
|                       | 5. Transporter 1 Company Name  7. Transporter 2 Company Name   | ng          | 6. US EPA ID  8. US EPA ID   | 12.10%        |                  | D. Transpo   | ransporter's ID<br>orter's Phone<br>ransporter's ID |                         |                   |
|                       | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  |             | 10. US EPA II  | D Number      |                  | G. State F   | acility ID  | 912-927                 | <b>'-6113</b>     |
| G                     | 11. Description of Waste Materials   |             |  | 12. Co<br>No. | ntainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.                                | 1. Misc.                | Comments          |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAMINATED W   | ASTE        | R  | n38           | DT               | 17   |   |                         |                   |
| R<br>A<br>T<br>O<br>R | b.  WM Profile # 375200  WM Profile #  | OGAKRA      |  |               |                  |  |   |                         |                   |
|                       | WM Profile #   |             |  |               |                  |  |   |                         |                   |
|                       | WM Profile #  J. Additional Descriptions for Materials Listed Al   | bove        |  | K. Dispos     | al Location      | 129  | 400   | Level                   | 21-65             |
| 9                     | 15. Special Handling Instructions and Additional II  | nformation  |  |               | 70               |  |   |                         |                   |
| 100                   | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described material accurately described, classified and packaged and Printed Name   |             |  | ed by CFR P   | art 261 or a     |  |   | ve been fully           | and Day Year      |
| T R A N S P O R T E R | 17. Transporter 1 Acknowledgement of Receipt of Printed Name  18. Transporter 2 Acknowledgement of Receipt of Printed Name   | <i>(</i>    | Signature  |               | 1                |  |   | Month Month             | Day Year Day Year |
| F A C I L I T Y       | 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment for applicable laws, regulations, permits and licenses 20. Facility Owner or Operator; Certification of respirated Name  White-TREATMENT, STORAGE, DISPOSAL FACILIT | on the date | es listed above  | overed by t   |                  | Physical Control of the Control of t | as managed in                                       | Month                   | with all          |

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Original Ticket# 1253537

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Vehicle# L10

> Container Driver

Check#

Billing B WWW.37

Gen EPA ID NR

Manual Ticket#

Hauling Ticket#

Roube

State Waste Code

Manifest 6739478

Destination

Profile

375200BAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

Ticket Date 05/15/2018

Payment Type Credit Account

05/15/2018 15:37:04 Out 05/15/2018 15:37:04

Scale Inbound 1

Operator

RB RB

Gross Tare

Net

Tons

57860 16 25340 lb 32520 15 16.26

Comments

Product LD% Qty HOM Rate Tax Amount Origin PORTW

1 COAL ASH & COAL CO 100 16.26 Tons

Total Tax folial Ticket



| WASTE MANAGEMENT 1 Gen  | erator's US EPA   | ID No. May   | No.           | 1 2 0 1          |  |                       |                    |             |  |
|---|-------------------|--|---------------|------------------|--|-----------------------|--------------------|-------------|--|
| NON-HAZARDOUS MANIFEST  | N / .             | A  | nifest Doc    |                  | 2. Page 1  | of                    | 2:57               | 1           |  |
| 3. Generator's Mailing Address: GEORGIA POWER   |                   | erator's Site Address (If dif<br>DRGIA POWER PLANT |               | ailing):         |  | est Number            | 6739478            |             |  |
| 241 RALPH MCGILL BLVD NE, BIN#10  | 221 155           | CROSSGATE RD.                                      |               |                  |  |                       | Generator's ID     |             |  |
| ATLANTA, GA 30308-3374  | POR               | RT WENTWORTH, GA                                   | 31407         |                  | 141  | D. State              | Generator 310      |             |  |
| 4. Generator's Phone 404-506-136  | 5                 |  |               |                  | -5.1LE.  |                       |                    |             |  |
| 5. Transporter 1 Company Name   | 11                | 6. US EPA ID                                       | Number        |                  |  |                       |                    | 1025        |  |
| ('mstallara   | diNA              |  |               |                  | C. State Transporter's ID D. Transporter's Phone |                       |                    |             |  |
| 7. Transporter 2 Company Name   |                   | 8. US EPA ID                                       | Number        |                  | D. Transp  | orter 3 r none        |                    |             |  |
|   | 0                 |  |               |                  | E. State Transporter's ID                        |                       |                    |             |  |
| 9. Designated Facility Name and Site Address  |                   | 10. US EPA II                                      | ) Number      |                  | F. Transporter's Phone                           |                       |                    |             |  |
| SUPERIOR LANDFILL   |                   | IO. OSEFAIL  | Number        |                  | G. State F                                       | acility ID            |                    |             |  |
| 3001 LITTLE NECK ROAD   |                   |  |               |                  | H. State Facility Phone 912-927-6113             |                       |                    |             |  |
| Savannah, GA 31419  |                   | armine a single free                               |               |                  | Ti. State i                                      | acility i florie      | 312 327-0113       |             |  |
|   |                   |  |               |                  |  |                       |                    |             |  |
| G 11. Description of Waste Materials  |                   |  | 12. Co<br>No. | ntainers<br>Type | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol.  | I. Misc. Comments  |             |  |
| a. COAL ASH& COAL CONTAMINATE   | WASTE             | 0  | 1             | 1                | KT   |                       |                    | 9           |  |
| N<br>E  |                   | I-   | 10            | DI               | 18   |                       | ,                  | The same of |  |
| WM Profile # 375  | 200GAKRA          |  | a planat      |                  |  |                       |                    |             |  |
| Δ <b>b.</b>   |                   |  |               |                  |  |                       |                    |             |  |
| 0   |                   |  |               |                  |  |                       |                    |             |  |
| R C. WM Profil  | le#               |  |               |                  | Ultur as   |                       |                    |             |  |
|   |                   |  |               |                  |  |                       |                    |             |  |
| WM Profil   | le#               |  |               |                  |  | Name and the          |                    |             |  |
| d.  |                   |  |               |                  |  |                       |                    |             |  |
|   |                   |  |               |                  |  |                       |                    |             |  |
| WM Profil   | DT-VATA           |  |               |                  |  |                       |                    |             |  |
| J. Additional Descriptions for Materials Liste  | d Above           |  | K. Dispos     | al Location      | 02 126   |                       |                    |             |  |
|   |                   |  | Cell          | IN               | 3001   | 19                    | Level              |             |  |
|   |                   |  | Grid          | 1                | 171  | 36                    |                    | TES.        |  |
| 15. Special Handling Instructions and Addition  | nal Information   |  |               |                  |  |                       |                    |             |  |
|   |                   |  |               |                  |  |                       |                    |             |  |
| Purchase Order # GPC10760293  |                   | EMERGENCY CON                                      | TACT / PH     | ONE NO.:         | 7  |                       |                    |             |  |
| 16. GENERATOR'S CERTIFICATE:  |                   |  |               |                  |  |                       |                    | 7.4         |  |
| I hereby certify that the above-described mate  | erials are not ha | nzardous wastes as define                          | d by CFR P    | art 261 or a     | ny applicabl                                     | e state law, h        | ave been fully and |             |  |
| accurately described, classified and packaged   | and are in prop   |  |               | rding to app     | olicable regu                                    | lations.              |                    |             |  |
| Printed Name  |                   | Signature "On behalf                               | OI            |                  |  |                       | Month Day          | Year        |  |
| 17. Transporter 1 Acknowledgement of Recei  | pt of Materials   |  | /             |                  |  |                       | 001                | -6          |  |
| Printed Name  | 11                | Signature  | 11            |                  |  |                       | Month Day          | Year        |  |
| JII. Milliper   | 1                 | 1/11-4   | Ha            | mile             | er   |                       | 15/5               | 1           |  |
| 18. Transporter 2 Acknowledgement of Recei  | pt of Materials   |  |               | /                |  | 8                     | - '- '             | 2           |  |
| r Printed Name  |                   | Signature  |               |                  |  |                       | Month Day          | Year        |  |
| R   |                   |  |               |                  |  |                       |                    |             |  |
| 19. Certificate of Final Treatment/Disposal   | 2 724             |  |               |                  |  |                       |                    |             |  |
| I certify, on behalf of the above listed treatme<br>applicable laws, regulations, permits and licen |                   | dge, the at  | ove-describ   | ed waste w       | as managed i                                     | n compliance with all |                    |             |  |
| 20. Facility Owner or Operator: Certification   |                   | vered by th  | nis manifest  |                  |  |                       | 14                 |             |  |
| Printed Name  | Signature         |  |               |                  |  | (Year)                |                    |             |  |
| H   |                   | ) 11/0   |               |                  |  |                       |                    |             |  |
| White-TREATMENT, STORAGE, DISPOSAL FAC  | CILITY COPY       | Blue- GENERATOR #                                  | 2 COPY        |                  | Ye   | llow- GENERA          | ATOR #1 COPY       | Sign.       |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253541

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier

Ticket Date 05/15/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Manifest 6739479

Destination

In

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

05/15/2018 15:49:24 Out 05/15/2018 15:49:24 Scale

Inbound 1

Operator

RB RB

Gross Tare Net

54880 lb 25240 lb 29640 15

14.82

Comments

Product

L.D%

Qty

HOM

Rate

Vehicle# L07

Gen EPA ID NR

Container

Billing #

Driver

Check#

Tax

0001037

Amount

Tons

Origin

1

COAL ASH & COAL CO 100

14.82 Toos PORTW





|        | NON HAZARDOUG ******  | 1. Generator's US EP      | A ID No.             | Manifest Doc   | No.          | 2. Page  | 1 of  |               | OF VILL     |        |
|--------|---|---------------------------|----------------------|--|--------------|--|---|---------------|-------------|--------|
| V.     | NON-HAZARDOUS MANIFEST  | N/                        | Α                    |  |              | 2.1460   | 101   | 2             | A'X         | 1      |
|        | 3. Generator's Mailing Address:   | 18. Jan                   |                      |  |              |  |   | -             | ). U_       | 3      |
| 7      | GEORGIA POWER   | GE                        | erator's Site Addres | SS (If different than m  | ailing):     | A. Manii   | est Number                                    | 6720          | 1470        | Nº Be  |
|        | 241 RALPH MCGILL BLVD NE,   |                           | CROSSGATE RE         |  |              | V  | VMNA  | 6739          | 4/9         |        |
| X      | ATLANTA, GA 30308-3374  |                           | RT WENTWORTH         |  |              |  | B. State (                                    | Generator's   | ID          | WAR    |
|        |   | 06-1365                   | IVI VVLIVI VVOKII    | 1, GA 31407  |              |  |   |               |             |        |
|        | 5 Transporter 1 Company Name  | 30 1303                   | 6. US F              | DAIDAL   | lite and     |  | Marie San |               |             |        |
|        | 1/20110   |                           | 0. 03 E              | PA ID Number   |              | 0.00   |   |               |             |        |
|        | CONTAI G  | CONINCI                   |                      |  |              | The same of the sa | Fransporter's IE<br>porter's Phone            | )             |             | 2      |
|        | 7. Transporter 2 Company Name   |                           | 8. USE               | PA ID Number   | 19.00        | D. Halls   | orter's Priorie                               |               | line and an |        |
|        |   |                           |                      |  |              | E. State   | ransporter's ID                               | )             |             |        |
|        | 9. Designated Facility Name and Site  | Adduses                   |                      |  | 8 4/3        |  | orter's Phone                                 | T- 1          | 100         |        |
|        | SUPERIOR LANDFILL   | Address                   | 10. US               | EPA ID Number  |              |  |   |               |             |        |
|        | 3001 LITTLE NECK ROAD   |                           |                      |  |              | G. State   | acility ID                                    |               |             |        |
|        | Savannah, GA 31419  |                           |                      |  |              | H. State   | acility Phone                                 | 912-92        | 27-611      | 3      |
|        | 344111  |                           |                      |  |              |  |   |               |             |        |
| G      | 11. Description of Waste Materials  |                           |                      | 12. Con  | tainers      | 13. Total  |   |               |             |        |
| E      |   |                           |                      | No.  | Туре         | Quantity   | 14. Unit<br>Wt./Vol.                          | I. Mis        | sc. Comme   | nts    |
| N      | a. COAL ASH& COAL CONTAMI   | NATED WASTE               |                      | 12 1   | N            | 15   |   |               | VE P        |        |
| E      |   |                           |                      | 1-01   | 1)1          | 10   | in element sua                                |               |             |        |
| R      | b. WM Profile #   | # 375200GAKRA             | 12 11 1              |  |              |  |   |               |             |        |
| A<br>T |   |                           |                      |  |              |  |   |               |             |        |
| 0      |   |                           |                      |  |              |  |   |               |             |        |
| R      | c. Wi   | M Profile #               |                      |  |              |  |   |               |             |        |
|        |   |                           |                      |  |              |  | A TEST  |               |             |        |
| H      | W   | M Profile #               |                      |  |              |  |   |               |             | 4      |
|        | d.  | 's                        |                      |  |              |  |   |               |             |        |
|        |   |                           |                      |  |              | * 12   | -   |               |             |        |
|        | 18/6  | M Profile #               |                      |  |              |  |   | an .          | 4.5         |        |
|        | J. Additional Descriptions for Materia  |                           |                      | K. Disposa   |              |  |   |               |             |        |
|        |   |                           |                      | K, Disposa   | LOCATION     | 11   | 111   |               | -14         |        |
|        |   |                           |                      | Cell   | 11           | 7/0  | 10  | Level         | 100         | 7      |
| +      | 1E Consider the Line Line   |                           |                      | Grid   | - 1          |  |   |               | 1           | /      |
|        | 15. Special Handling Instructions and A   | Additional Information    |                      |  | 1            | n.   | 12  |               |             |        |
|        |   |                           |                      |  |              | 014  |   |               |             |        |
| t      | Purchase Order # GPC10760293  |                           |                      |  | 3            | N 44 - N -   | -Milk his                                     | 8 - 1         | -1          |        |
| 1      | 16. GENERATOR'S CERTIFICATE:  |                           | EMERGENCY            | CONTACT / PHO  | NE NO.:      |  |   |               |             |        |
|        |   |                           | 10 0000 00 00        |  |              |  |   |               |             |        |
|        | I hereby certify that the above-describe accurately described, classified and pac | kaged and are in proper   | zardous wastes as de | efined by CFR Par  | rt 261 or ai | ny applicable  | state law, hav                                | e been fully  | and         |        |
|        | Printed Name  |                           | Signature "On be     | half of"   | ang to app   | licable regul  | ations.                                       | NA COLL       |             |        |
| 1      | Btilipovich   |                           | RR                   |  |              |  |   | Month         | Day         | Year / |
| r L    | 17. Transporter 1 Acknowledgement o   | f Receipt of Materials    |                      | The state of the s | 1            |  |   | 1             |             | 10     |
| A      | Printed Name  | 2/1                       | Signature            | 17   | 1            | 1  |   | Month         | Day         | Year   |
| -      | X 01.00   | and                       | 1                    | 1,00   | V            | )  |   | < 1           | (-          | 17     |
| 2      | 18. Transporter 2 Acknowledgement of  | f Receipt of Materials    | /                    |  | ,            |  |   | ) 1           | )           | 1      |
|        | Printed Name  |                           | Signature            |  | 17           |  | 191-10  | Month         | Day         | Year   |
|        |   |                           |                      |  |              |  | E . 1112                                      |               |             |        |
|        | 19. Certificate of Final Treatment/Dispo  |                           |                      |  | 7/2          | 7 70.  |   |               |             |        |
|        | I certify, on behalf of the above listed tr                                       | eatment facility, that to | the best of my kno   | wledge, the abov   | ve-describe  | ed waste wa  | s managed in c                                | ompliance     | with all    |        |
|        | applicable laws, regulations, perillits all                                       | unicenses on the dates    | listed above.        |  |              |  | anagea in c                                   | o.iipiiance ( | with all    |        |
|        | 20. Facility Owner or Operator: Certific  | ation of receipt of non   | -hazardous material  | s covered by this  | manifest.    |  | /   | 1/1           | ,           | 14     |
|        | Printed Name  | 413                       | Signature            | 1  |              |  | No.   | Month         | Day         | Year   |
|        | W//   |                           |                      |  |              |  |   |               |             |        |
|        | White-TREATMENT, STORAGE, DISPOSA   |                           | Blue- GENERATO       | OR #2 COPY   |              | Yell   | ow- GENERATO                                  | R #1 COPY     |             |        |
|        | Pink- FACILITY USE ONL  | Y                         | Gold- TRANSPOR       | TER #1 COPY  |              |  |   |               |             |        |



Original Ticket# 1253605

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739480

Destination PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/16/2018 07:51:04 Out 05/16/2018 08:01:59

Scale Inbound 1 Outbound

Operator rb

Gross 62820 1b Tare 25980 lb Net Tons

Volume

36840 16 18.42

Comments

Vehicle# 36

Billing #

Gen EPA ID NR

0001037

Container

Driver

Check#

Tax Qty UOM Amount Origin Product LD% Rate PORTW COAL ASH & COAL CO 100 18.42 Tons

The



| -           | WASTE MANAGEMENT  |                          |   |                 |                |              |                                  |             |              |            |
|-------------|---|--------------------------|---|-----------------|----------------|--------------|----------------------------------|-------------|--------------|------------|
|             | NON-HAZARDOUS MANIFEST  | 1. Generator's US EP N / | 7. 1  | nifest Doc N    | lo.            | 2. Page 1    | of                               | 7:          | 10           |            |
|             | 3. Generator's Mailing Address:<br>GEORGIA POWER                                    | GE                       | nerator's Site Address (If di<br>ORGIA POWER PLAN |                 | iling):        | 1,00         | st Number                        | 6739        | 9480         |            |
|             | 241 RALPH MCGILL BLVD NE, E   | BIN#10221 15             | 5 CROSSGATE RD.                                   |                 |                |              | B. State C                       | ienerator's | ID           |            |
|             | ATLANTA, GA 30308-3374  | PO                       | RT WENTWORTH, GA                                  | 31407           |                |              |                                  |             | -51 SI (1 )  |            |
|             |   | 06-1365                  |   |                 |                | 6            |                                  |             |              |            |
|             | 5. Transporter 1 Company Name   |                          | 6. US EPA ID                                      | Number          |                |              |                                  |             |              |            |
|             | 1705/1/20   | adina                    | *   |                 |                | 9            | ransporter's ID<br>orter's Phone | )           |              |            |
|             | 7. Transporter 2 Company Name   |                          | 8. US EPA ID                                      | Number          |                | D. Hallsp    | orter's Priorie                  | 3.0         |              |            |
|             |   |                          |   |                 |                | E. State T   | ransporter's ID                  |             |              |            |
|             |   |                          |   |                 |                | F. Transp    | orter's Phone                    |             |              |            |
|             | 9. Designated Facility Name and Site  | Address                  | 10. US EPA I                                      | D Number        |                |              | unisumulaiF s                    |             |              |            |
|             | SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  |                          |   |                 |                | G. State F   |                                  |             |              |            |
|             | Savannah, GA 31419  |                          | 100   |                 |                | H. State F   | acility Phone                    | 912-9       | 927-611      | 3          |
|             | Savaillali, GA 51419  |                          |   |                 |                |              |                                  |             |              |            |
|             | 11. Description of Waste Materials  |                          |   | 12. Cor         | tainers        | 13. Total    | 14. Unit                         | 1.0         | Aisc. Commer | nte        |
| G<br>E      |   | INIATED MAACTE           |   | No.             | Type           | Quantity     | Wt./Vol.                         |             | nisc. comme  | 103        |
| N           | a. COAL ASH& COAL CONTAM  | INATED WASTE             | D   | n3(-            | MI             | N            |                                  | 127/        |              |            |
| Ε           | MM Profile  | # 375200GAKRA            | _D  | 1-10            | 17/            |              |                                  |             |              |            |
| R<br>A      | b.  | # 373200GARRA            |   | to the second   |                |              |                                  |             |              |            |
| T           |   |                          |   | 1               |                | 1.0          |                                  |             |              |            |
| 0           | w   | M Profile #              |   | PER PROPERTY OF |                |              |                                  |             |              | 6,580.5556 |
| R           | c.  | m rionical               |   |                 | MATERIA SILITA |              |                                  |             |              |            |
|             |   |                          |   | (AA)            |                |              |                                  | 4           |              |            |
|             |   | M Profile #              |   |                 |                |              |                                  | wang pangan |              |            |
|             | d.  |                          |   | W. T            |                |              |                                  |             |              |            |
|             |   |                          |   |                 |                |              |                                  |             |              |            |
|             |   | M Profile #              |   |                 |                |              |                                  |             |              |            |
| N           | J. Additional Descriptions for Mater  | ials Listed Above        |   | K. Dispos       | al Location    |              |                                  |             |              |            |
|             |   |                          |   | Cell            | 770            | 120.         | WYII                             | Level -     | 1-1          | -          |
|             | 1   |                          |   | Grid/ V         | 500            | 1290         | RII                              | 156         | E            | 13 17      |
|             | 15. Special Handling Instructions and   | Additional Informatio    | n   |                 |                | 1            |                                  |             |              |            |
| 6           | All and the second second   |                          |   |                 |                |              |                                  |             |              |            |
|             | D. I  | 2                        | EMEDICENCY CO.                                    | NTACT / DUI     | DNE NO         |              |                                  |             |              |            |
| 77          | Purchase Order # GPC1076029   | 3                        | EMERGENCY COI                                     | VIACI / PHO     | ONE NO.:       |              |                                  |             |              |            |
|             | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-describ               | and materials are not l  | nazardous wastes as defin                         | ad by CER D     | art 261 or     | any annlicah | o stato law ha                   | ve heen fi  | ılly and     |            |
|             | accurately described, classified and pa   |                          |   |                 |                |              |                                  | ive been it | illy ariu    |            |
|             | Printed Name  |                          | Signature "On beha                                | lf of"          |                | 1.34         |                                  | Month       | Day          | Year       |
|             | Btilipould  |                          | DF  | -               |                |              |                                  | 10          | 116          | 18         |
| T<br>R      | 17. Transporter 1 Acknowledgement   | of Receipt of Material   | ^   | 14-             |                | the state of |                                  | T           | 1            | 1          |
| A<br>N<br>S | Printed Name  |                          | Signature   | 077             | 1              |              |                                  | Month       | Day          | Year /     |
| S<br>P<br>O | 18. Transporter 2 Acknowledgement   | of Receipt of Material   | · I well  | Tru             | - Lun          |              |                                  |             | 10           | 10         |
| R           | Printed Name  | or necespe of material   | Signature   |                 | 1              |              |                                  | Month       | Day          | Year       |
| T<br>E<br>R |   |                          |   |                 |                |              |                                  |             | A- Line      | 100        |
|             | 10 Cortificate of Final Treatment /Di-  | nosal                    |   |                 |                |              |                                  | 4           | Later and    |            |
| F           | 19. Certificate of Final Treatment/Dis     I certify, on behalf of the above listed |                          | at to the hest of my knowle                       | edge the ab     | ove-descri     | hed waste v  | as managed in                    | n complian  | ce with al   |            |
| A<br>C<br>I | applicable laws, regulations, permits   |                          |   | - 45c, the dr   | ucadii         | ou waste v   | alleged II                       | Pilidi      |              |            |
| L           | 20. Facility Owner or Operator: Certi   |                          |   | overed by th    | nis manifes    | t.           |                                  |             | H. C.        |            |
| T           | Printed Name  | )                        | Signature // g                                    | 1               | 000            |              |                                  | Month       | Day          | Year       |
|             | 100   | )                        | (19)  |                 |                |              |                                  | 0           | 10           | 10         |
| 1-1         | White- TREATMENT, STORAGE, DISPO  | SAL FACILITY COPY        | Blue- GENERATOR                                   | #2 COPY         | -50            | Ye           | llow- GENERA                     | TOR #1 CC   | PY           | 4          |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253609

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739481

Destination

PO

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/16/2018 08:00:39

Out 05/16/2018 08:00:39

Scale

Inbound 1

Operator rb

Vehicle# L10

Container Driver Check#

Billing # 0001037 Gen EPA ID NR

Volume

Gross Tare Net

Tons

60260 15 25340 16 34920 lb 17.46

Comments

Amount Origin Tax Rate LD% Qty UOM Product PORTW 1 COAL ASH & COAL CO 100 17.46 Tons



# WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

|                            | NON-HAZARDOUS MANIFEST  1. Generator's   | US EPA     |   | ifest Doc    | No.                       | 2. Page 1             | of   | 7                      | 16          |          |  |
|----------------------------|--|------------|---|--------------|---------------------------|-----------------------|--|------------------------|-------------|----------|--|
|                            | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365                 | GEO<br>155 | rator's Site Address (If diff<br>RGIA POWER PLANT<br>CROSSGATE RD.<br>T WENTWORTH, GA | KRAFT        | nailing):                 |                       | st Number  MNA  B. State G   | 67394<br>Generator's I |             |          |  |
|                            | 5. Transporter 1 Company Name  7. Transporter 2 Company Name   | 9          | 6. US EPA ID  8. US EPA ID  |              |                           | D. Transp  E. State T | ransporter's IC<br>orter's Phone<br>ransporter's IC<br>orter's Phone |                        |             |          |  |
|                            | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  |            | 10. US EPA IC   | Number       |                           | G. State F            |  | 912-92                 | 27-6113     |          |  |
| G                          | 11. Description of Waste Materials   | 77         | E   | 12. C<br>No. | ontainers<br>Type         | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.   | I. Mis                 | c. Comments |          |  |
| E<br>N<br>E                | a. COAL ASH& COAL CONTAMINATED WAS   | *          | 7   | D            | DT                        | 18                    |  |                        |             |          |  |
| R<br>A<br>T<br>O           | b. WM Profile # 375200G/   | AKKA       |   |              |                           |                       |  |                        |             |          |  |
| R                          | c. WM Profile #  |            |   |              |                           |                       |  |                        |             |          |  |
|                            | d. WM Profile #  |            |   |              |                           |                       |  |                        |             |          |  |
|                            | J. Additional Descriptions for Materials Listed Abov   | e          |   | K. Dispo     | Sal Location              | 296                   | DHE  | (evel)                 | 15          | a        |  |
|                            | 15. Special Handling Instructions and Additional Infor   | mation     |   |              | 1610.                     |                       |  |                        |             |          |  |
|                            | Purchase Order # GPC10760293   |            | EMERGENCY CON   | TACT / PI    | HONE NO.:                 |                       |  | 107                    |             |          |  |
|                            | GENERATOR'S CERTIFICATE:     I hereby certify that the above-described materials ar accurately described, classified and packaged and are                  | e not h    | azardous wastes as define   | d by CFR     | Part 261 or cording to an | any applicab          | le state law, h  | ave been ful           | ly and      |          |  |
|                            | Printed Name B + 1 povich  |            | Signature "On behalf  | of"          |                           |                       |  | Month 6                | Day /       | Year / X |  |
| T<br>R<br>A<br>N           | 17. Transporter 1 Acknowledgement of Receipt of M Printed Name   | aterials   | Signature   | Ma.          | mple                      | -                     |  | Month                  | Day /       | Year     |  |
| P<br>O<br>R<br>T<br>E<br>R | /18. Transporter 2 Acknowledgement of Receipt of M Printed Name  | aterials   | Signature   |              |                           |                       |  | Month                  | Day         | Year     |  |
| F<br>A<br>C                | Certificate of Final Treatment/Disposal     I certify, on behalf of the above listed treatment facil applicable laws, regulations, permits and licenses on | the date   | es listed above.  |              |                           |                       | was managed i  | in complianc           | e with all  |          |  |
| LIT                        | 20. Facility Owner or Operator: Certification of recei   |            |   | vered by     | this manifes              | t.                    |  | Month                  | Day         | Year/    |  |
| Y                          | White-TREATMENT, STORAGE, DISPOSAL FACILITY C  | OPY        | Blue- GENERATOR   | ‡2 COPY      |                           | Y                     | ellow- GENER/  | ATOR #1 CO             | 16<br>Y     | 10       |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253610

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS
Ticket Data 05/16/2018 Vehicle# L07

Ticket Date 05/16/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739482

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/16/2018 08:02:47 Out 05/16/2018 08:02:47 Scale Inbound 1 Operator rb rb Gross 56220 lb Tare 25240 lb Net 30980 lb Tons 15.49

Comments

WASTE MANAGEMENT

Container Driver

Billing # 0001037

Gen EPA ID NR

Check#

| Pro               | duct   |     |    |      |    | LD% | Qty    | LIOM | Rate   | Tax | Amount   | Origin   |
|-------------------|--|-----|----|------|----|-----|--------|------|--|-----|--|--|
| West 10'45 \$1100 | - Secure Printer States States Strate, armed, an |     |    |      |    | -   | -      |      | the man with most think their years man come table other |     | ng manga tanggi, pinang panga nanggi tanggi upang panang panan panan panan untuk sebag | e parago attitus dellar listata simon paran paran salam baran baran matan dalla dallar |
| 1                 | COAL   | ASH | 33 | COAL | CO | 100 | 15, 49 | Tons |  |     |  | PORTW  |

Total Tax Total Ticket

Leghs



|                  | NON-HAZARDOUS MANIFEST  1. Generat   | or's US EPA   |   | nifest Doc N | lo.          | 2. Page 1 c  | of                             | 7. 7                      |
|------------------|--|---------------|---|--------------|--------------|--|--------------------------------|---------------------------|
|                  | NOT THE ALL DOGS MAINTEST  | N / /         | A   | Bull.        | 134          |  |                                | 1.20                      |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, BIN#10222<br>ATLANTA, GA 30308-3374  | GEO<br>1 155  | erator's Site Address (If dif<br>DRGIA POWER PLANT<br>CROSSGATE RD.<br>RT WENTWORTH, GA | KRAFT        | iling):      | A. Manifes   | MNA                            | 6739482<br>Generator's ID |
| ā                | 4. Generator's Phone 404-506-1365  |               |   |              |              |  |                                |                           |
|                  | 5-Transporter 1 Company Name 7-Transporter 2 Company Name  | ing           | 6. US EPA ID  8. US EPA ID  |              |              |  | ansporter's I<br>orter's Phone |                           |
|                  |  |               |   |              |              |  | ansporter's I                  |                           |
| Ĥ                | 9. Designated Facility Name and Site Address   |               | 10. US EPA II   | ) Number     |              | F. Transpo   | rter's Phone                   |                           |
| 1                | SUPERIOR LANDFILL  |               | IO. OSEIAI  | raumber      |              | G. State Fa  | acility ID                     |                           |
| u                | 3001 LITTLE NECK ROAD  |               | V T   |              |              |  | acility Phone                  | 912-927-6113              |
| ď                | Savannah, GA 31419   |               |   |              | 1001         |  |                                |                           |
|                  |  |               |   |              |              |  |                                |                           |
| G                | 11. Description of Waste Materials   |               |   | No.          | Type         | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.           | I. Misc. Comments         |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAMINATED W   | /ASTE         | I   | 207          | DI           | 18   |                                |                           |
| R                | WM Profile # 37520   | 0GAKRA        | •   |              |              |  |                                |                           |
| A<br>T           | b.   |               |   |              | The state of |  |                                |                           |
| 0                |  |               |   |              |              |  |                                |                           |
| R                | WM Profile #   |               |   |              |              | No. of the last of |                                |                           |
|                  |  |               |   |              |              |  | No.                            |                           |
|                  | WM Profile #   |               | The second second   |              | olumnich.    |  |                                | Produktiva zamonika zami  |
|                  | d.   |               |   |              |              |  |                                |                           |
|                  |  |               |   | (            |              |  |                                |                           |
|                  | WM Profile #   |               |   | V Di         |              |  |                                |                           |
|                  | J. Additional Descriptions for Materials Listed A  | Nove          |   | K. Dispos    | al Location  |  |                                |                           |
|                  |  |               |   | Cell         | 137          | 120  | 111                            | Level / / > f             |
|                  |  |               |   | Grid /       | 100          | 1290   | -011                           | 6 SCEUST                  |
|                  | 15. Special Handling Instructions and Additional   | Information   | 1   |              |              |  |                                |                           |
|                  |  |               |   |              |              |  |                                |                           |
|                  | Purchase Order # GPC10760293   |               | EMERGENCY COI   | NTACT / PH   | ONE NO.:     |  |                                |                           |
|                  | 16. GENERATOR'S CERTIFICATE:   | THE SE        |   |              |              |  |                                |                           |
|                  | I hereby certify that the above-described materia  | als are not h | azardous wastes as defin  | ed by CFR P  | art 261 or   | any applicabl  | e state law, l                 | nave been fully and       |
|                  | accurately described, classified and packaged and  | d are in prop | per condition for transpo<br>Signature "On beha   |              | ording to ap | plicable regu  | lations.                       | Month Day Year            |
|                  | Printed Name  B Fill Poul Ch   |               | Signature On bena   | 101          |              |  |                                | R 16/18                   |
| T                | 17. Transporter 1 Acknowledgement of Receipt   | of Materials  |   | A            | _            |  |                                | J 14                      |
| R<br>A<br>N<br>S | Printed Name   Printe |               | Signature   | 6            | 2            |  |                                | Month Day Year            |
| P<br>0           | 18. Transporter 2 Acknowledgement of Receipt   | of Materials  |   |              |              | )  |                                |                           |
| R<br>T<br>E<br>R | Printed Name   |               | Signature   |              |              |  |                                | Month Day Year            |
|                  | 19. Certificate of Final Treatment/Disposal  |               |   |              | Val          |  |                                |                           |
| F<br>A<br>C      | I certify, on behalf of the above listed treatment applicable laws, regulations, permits and license   | s on the dat  | tes listed above.   |              |              |  | vas managed                    | in compliance with all    |
| L                | 20. Facility Owner or Operator: Certification of   | receipt of n  | 1 2 345 75  | overed by t  | his manifes  | st.  |                                | Month Church V            |
| T                | Printed Name   |               | Signaturé   |              |              |  |                                | Month Day/ Year           |
|                  | White-TREATMENT STORAGE DISPOSAL FACILI  | TV CORV       | Blue- GENERATOR   | #2 CODY      |              | Ye   | ellow- GENER                   | RATOR #1 COPY             |

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Original Ticket# 1253623

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N

Ticket Date 05/16/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739483

Destination PO

Generator

Qty

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/16/2018 08:21:07 Out 05/16/2018 08:21:07

Scale Inbound 1

Operator rb rb

MOU

Vehicle# 38

Billing # 0001037

Gen EPA ID NR

Rate

Container

Driver

Check#

Gross Tare . Net

63490 16 27960 lb 35520 lb

Tons

Amount

Tax

17.76

Comments

Product

1 COAL ASH & COAL CO 100

17.76 Tons

PORTW

Origin



| WASTE MANAGEMENT  |  |  |   |              |   | , 1              |                        |  |  |
|---|--|--|---|--------------|---|------------------|------------------------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA                                    |  | ifest Doc N                                       | 0.           | 2. Page 1 o                                       | i.               | 7:25                   |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER  | GEC  | erator's Site Address (If diffi<br>ORGIA POWER PLANT |   | ling):       | A. Manifes  | MNA              | 6739483                |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374   | POF  | CROSSGATE RD.<br>RT WENTWORTH, GA                    | 31407   |              |   | B. State G       | enerator's ID          |  |  |
| 4. Generator's Phone 404-5  5. Transporter 1 Company Name   | 606-1365   | 6. US EPA ID   | Number  |              | C. State Transporter's ID D. Transporter's Phone  |                  |                        |  |  |
| 7. Transporter 2 Company Name   | Trading  | 8. US EPA ID   | Number  |              | E. State Transporter's ID  F. Transporter's Phone |                  |                        |  |  |
| 9. Designated Facility Name and Sit SUPERIOR LANDFILL   | e Address  | 10. US EPA II  | ) Number  |              | G. State Facility ID                              |                  |                        |  |  |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419   |  |  |   |              | H. State Fa                                       | acility Phone    | 912-927-6113           |  |  |
| 11. Description of Waste Materials  |  |  | 12. Containers 13 No. Type Qu                     |              |   |                  | I. Misc. Comments      |  |  |
| a. COAL ASH& COAL CONTAIN   | MINATED WASTE  e# 375200GAKRA                            | B  | 138   | DI.          | IX  |                  |                        |  |  |
| b.  | e# 3/3200GARRA   |  |   |              |   |                  |                        |  |  |
| C.  | WM Profile #   |  |   |              |   |                  |                        |  |  |
|   | WM Profile #   |  |   |              |   |                  |                        |  |  |
| d.  |  |  |   |              |   |                  |                        |  |  |
| J. Additional Descriptions for Mat  | WM Profile #<br>cerials Listed Above                     |  | Cell  | sal Location | 34  | 129              | Level 6                |  |  |
| 15. Special Handling Instructions a   | nd Additional Informatio                                 | n  | Grid  | U            | 8/6   | 36               |                        |  |  |
| Purchase Order # GPC10760   | 293  | EMERGENCY CO   | NTACT / PH  | ONE NO.:     |   | William I        |                        |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des  | cribed materials are not                                 | hazardous wastes as defin                            | ed by CFR I                                       | Part 261 or  | any applicab                                      | ole state law, h | ave been fully and     |  |  |
| accurately described, classified and Printed Name   | a packaged and are in pro                                | Signature "On beha                                   | If of"  | ording to d  | ppinedule reg                                     |                  | Month Day Year         |  |  |
| 17. Transporter 1 Acknowledgement Printed Name  | 99115  | Signature  | On A  |              | ~   |                  | Month Day Yea          |  |  |
| Printed Name  | ent of Receipt of Materia                                | Signature  |   |              |   |                  | Month Day Yea          |  |  |
| 19. Certificate of Final Treatment,  I certify, on behalf of the above lis applicable laws, regulations, perm | ted treatment facility, th<br>its and licenses on the da | ates listed above.                                   |   |              |   | was managed      | in compliance with all |  |  |
| 20. Facility Owner or Operator: C   | ertification of receipt of                               | non-hazardous materials o<br>Signature               | covered by  | this manife  | est.  |                  | Month Day Yes          |  |  |
| White TREATMENT STORAGE D   | SPOSAL FACILITY COPY                                     | Blue- GENERATOR                                      | Blue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY |              |   |                  |                        |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253656

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Ticket Date 05/16/2018 Vehicle# 5307
Payment Type Credit Account Container Manual Ticket# Driver Hauling Ticket# Check# Route Billing # 0001037

State Waste Code Gen EPA ID NR
Manifest 6739484

Destination

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time Scale Operator Gross 57520 1b 05/16/2018 09:18:51 Inbound 1 lbejaran Tare 24080 15 Out 05/16/2018 09:18:51 1 be jaran Net 33440 1b Tons 16.72 Comments

WASTE MANAGEMENT

Product LD% Qty UOM Rate Tax Amount Origin

1 COAL ASH & COAL CO 100 16.72 Tons PORTW

Total Tax Total Ticket

Sperley



| WASTE MARAGEMENT   | 1. Generator's US EPA                                    | ID No. Ma  | nifest Doc N  | No.               | 2. Page 1 d  | of                   |  |  |  |  |  |
|--|--|--|---------------|-------------------|--|----------------------|--|--|--|--|--|
| NON-HAZARDOUS MANIFEST   | N / /  |  |               |                   |  |                      | 8.35   |  |  |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEO  | erator's Site Address (If di<br>ORGIA POWER PLAN |               | ailing):          | A. Manifes   | MNA                  | 6739484  |  |  |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5  |  | CROSSGATE RD.                                    | A 31407       |                   | B. State Generator's ID  |                      |  |  |  |  |  |
| 5. Transporter 1 Company Name  | 000-1303   | 6. US EPA IE                                     | Number        |                   |  |                      |  |  |  |  |  |
| Moralell   | Indian   |  |               |                   | C. State Transporter's ID  |                      |  |  |  |  |  |
| 7. Transporter 2 Company Name  | THOMAS   | 8. US EPA II                                     | Number        | -                 | D. Transpo   | orter's Phone        |  |  |  |  |  |
|  |  |  |               |                   | The state of the s | ansporter's ID       | )  |  |  |  |  |
| 9. Designated Facility Name and Sit  | e Address  | 10. US EPA                                       | D Number      |                   | r. Hallspo   | orter's Phone        |  |  |  |  |  |
| SUPERIOR LANDFILL  |  |  |               |                   | G. State F   | acility ID           |  |  |  |  |  |
| 3001 LITTLE NECK ROAD  |  | P-74 (19 (2004) (19 (2004)                       |               |                   | H. State F   | acility Phone        | 912-927-6113   |  |  |  |  |
| Savannah, GA 31419   |  |  |               |                   |  |                      |  |  |  |  |  |
| G 11. Description of Waste Materials   |  | F13100000000000000000000000000000000000          | 12. Co<br>No. | ontainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol. | I. Misc. Comments  |  |  |  |  |
| a. COAL ASH& COAL CONTAN   | MINATED WASTE  |  |               | 1                 | 15   |                      |  |  |  |  |  |
| N<br>E   |  | -  | 307           | D                 | 110  |                      |  |  |  |  |  |
| R WM Profil  | e# 375200GAKRA   |  |               |                   |  |                      | App GU AU SHUBS CANAL OU A DROUB<br>A  |  |  |  |  |
| A b.<br>T  |  |  |               |                   |  |                      |  |  |  |  |  |
| O<br>R   | WM Profile #   |  |               |                   |  |                      |  |  |  |  |  |
| " c.   |  |  |               |                   |  |                      |  |  |  |  |  |
|  | WM Profile #   |  |               |                   |  |                      |  |  |  |  |  |
| d.   |  |  |               |                   |  |                      |  |  |  |  |  |
|  |  |  |               |                   |  |                      | Paramata (Paramata) de la companya (Paramata |  |  |  |  |
| J. Additional Descriptions for Mat   | WM Profile #<br>erials Listed Above                      |  | K. Dispo      | sal Location      | <u> </u>   |                      |  |  |  |  |  |
| J. Additional Descriptions for Mac   | Chais Listea / Liste                                     |  |               |                   |  | 111/1/               | Ideal . C.f  |  |  |  |  |
|  |  |  | Cell<br>Grid  | 520               | 129  | N811                 | (FeA) SE(7)  |  |  |  |  |
| 15. Special Handling Instructions at   | nd Additional Information                                | 1  | 1             |                   | ŧ.   |                      |  |  |  |  |  |
|  |  |  |               |                   |  |                      |  |  |  |  |  |
| Purchase Order # GPC107602   | 293  | EMERGENCY CO                                     | NTACT / PH    | HONE NO.:         |  | A U.S.               |  |  |  |  |  |
| 16. GENERATOR'S CERTIFICATE:   | 255  |  |               |                   |  |                      |  |  |  |  |  |
| I hereby certify that the above-desc   | cribed materials are not h                               | nazardous wastes as defi                         | ned by CFR    | Part 261 or       | any applicab   | le state law, h      | nave been fully and  |  |  |  |  |
| accurately described, classified and   | packaged and are in pro                                  | Signature "On beh                                | alf of"       | ording to a       | oplicable regi   | ulations.            | Month Day Year   |  |  |  |  |
| A STATE OF THE STA |  |  |               |                   |  |                      | 5 16 18  |  |  |  |  |
| 17. Transporter 1 Acknowledgeme  | nt of Receipt of Materials                               | Signature  |               |                   |  |                      | Month Day Year   |  |  |  |  |
| Printed Name  N S Filipouich   |  | Bellevie   |               |                   |  |                      | 5/6/1  |  |  |  |  |
| P 0 18. Transporter 2 Acknowledgeme  | ent of Receipt of Materials                              |  |               |                   |  |                      | Month Day Year   |  |  |  |  |
| Printed Name   | lem  | Signature  | N             | 1                 | - 1  |                      | WORTH Bay Itali  |  |  |  |  |
| 19. Certificate of Final Treatment/  | Disposal   | \<br>  | ilodaa th     | ahove dosa        | ibed waste   | was managed          | in compliance with all   |  |  |  |  |
| I certify, on behalf of the above list applicable laws, regulations, permi   | ed treatment facility, tha<br>its and licenses on the da | it to the best of my know<br>tes listed above.   | neage, the    | above-desc        | ibeu wasie   | was manageu          | complicated with all   |  |  |  |  |
| 20. Facility Owner or Operator: O  | ertification of receipt of n                             | on-hazardous materials                           | covered by    | this manife       | st.  |                      | Two tree for   |  |  |  |  |
| Printed Name   |  | Signature / /                                    | 3)            |                   |  |                      | Month Day Year   |  |  |  |  |
| White TREATMENT STORAGE DI   | SDOSAL FACILITY COPY                                     | Blue- GENERATO                                   | R #2 COPY     |                   | Y  | 'ellow- GENER        | ATOR #1 COPY   |  |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253659

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/16/2018 Vehicle# 36

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739485 Destination

PO Profile

Comments

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/16/2018 09:26:30 Out 05/16/2018 09:26:30

10 In 30

Scale Operator Inbound 1 lbejaran lbejaran

Gross Tare

Net

61720 lb 25980 lb 35740 lb 17.87

Tons

Billing # 0001037

Gen EPA ID NR

WASTE MANAGEMENT

Container

Driver

Check#

Product LD% Oty UOM Rate Tax Amount Origin

COAL ASH & COAL CO 100

17.87 Tons

PORTW

C Piller



| WASTE MANAGEMENT   |                        |  |                |                   | A CANADA MAS          |                      |             |              |  |
|--|------------------------|--|----------------|-------------------|-----------------------|----------------------|-------------|--------------|--|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US      | EPA ID No. Mar<br>/ A                                    | ifest Doc N    | 0.                | 2. Page 1             | of                   | 8:48        |              |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   |                        | ienerator's Site Address (If diff<br>GEORGIA POWER PLANT |                | iling):           |                       | st Number            | 6739485     |              |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | F                      | .55 CROSSGATE RD.<br>PORT WENTWORTH, GA                  | 31407          |                   |                       | B. State G           | enerator's  | D            |  |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name   | 506-1365               | 6. US EPA ID   | Number         |                   |                       |                      |             |              |  |
| 1100=(10   | ~ /                    |  | -              |                   | C. State T            | ransporter's ID      |             |              |  |
| CUNG 171   | gaina                  |  |                |                   | D. Transp             | orter's Phone        |             |              |  |
| 7. Transporter 2 Company Name  |                        | 8. US EPA ID   | Number         |                   | E. State T            | ransporter's ID      |             |              |  |
|  | 9                      |  |                |                   | F. Transpo            | orter's Phone        |             |              |  |
| 9. Designated Facility Name and Sit  | e Address              | 10. US EPA II  | Number         |                   |                       |                      |             |              |  |
| SUPERIOR LANDFILL  |                        | 1 1 3 3 3 3 3  |                |                   | G. State F            |                      | 042.0       | 27.6442      |  |
| 3001 LITTLE NECK ROAD  |                        |  |                | H-SSESSEE HILLIAN | H. State F            | acility Phone        | 912-9       | 27-6113      |  |
| Savannah, GA 31419   |                        |  |                |                   |                       |                      |             |              |  |
| 11. Description of Waste Materials   |                        | ( ************************************                   | 12. Cor<br>No. | ntainers          | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol. | 1. M        | sc. Comments |  |
| a. COAL ASH& COAL CONTAN   | JINATED WASTE          |  | NO.            | Type              | Quantity              | 170,700.             | TV          |              |  |
|  |                        | R  | 736            | 01                | 16                    |                      |             |              |  |
| WM Profile   | # 375200GAK            | RA   |                | The state of      |                       |                      |             |              |  |
| b.   |                        |  |                |                   |                       |                      |             |              |  |
|  |                        |  | 12             |                   |                       |                      |             |              |  |
|  | WM Profile #           |  |                |                   |                       |                      |             |              |  |
| C.   |                        |  | 17.9-1         |                   |                       |                      |             |              |  |
|  | WM Profile #           |  |                |                   |                       |                      |             |              |  |
| d.   |                        |  |                |                   | - 1                   |                      |             |              |  |
|  |                        |  |                |                   |                       |                      |             |              |  |
|  | WM Profile #           |  | K Disease      | al Location       | 12 20 1               |                      |             |              |  |
| J. Additional Descriptions for Mate  | eriais Listed Above    |  | k. Dispos      | ai Location       | 172                   | 1179                 |             | 61           |  |
|  |                        |  | Cell           | 1                 | 100                   | 2)                   | Level       | 0            |  |
|  | 1 4 1 12.1             |  | Grid           | -1                | 11                    | 670                  |             |              |  |
| 15. Special Handling Instructions ar   | id Additional Informa  | ition  |                | - (               | / - 0                 |                      |             |              |  |
|  |                        |  |                |                   |                       |                      |             |              |  |
| Purchase Order # GPC107602   | .93                    | EMERGENCY CO   | NTACT / PH     | ONE NO.:          |                       |                      |             |              |  |
| 16. GENERATOR'S CERTIFICATE:   |                        |  |                |                   |                       |                      |             |              |  |
| I hereby certify that the above-desc   | ribed materials are n  | ot hazardous wastes as defin                             | ed by CFR F    | art 261 or        | any applicab          | le state law, h      | ave been fu | lly and      |  |
| accurately described, classified and<br>Printed Name   | packaged and are in    | Signature "On behal                                      | f of"          | numg to ap        | plicable regi         | ulations.            | Month       | Day Year     |  |
| BFILIPOURCE  | 1 - 14 / 1             | BR   |                |                   |                       | 9-15                 | 5           | 1618         |  |
| 17. Transporter 1 Acknowledgeme  | nt of Receipt of Mate  | rials  |                |                   | 1.60                  |                      |             |              |  |
| Printed Name   |                        | Signature )  | 1              | 1.                |                       |                      | Month       | Day Year     |  |
| Transporter 2 Acknowledgemen   |                        | viale / Carl   | The            | un                | -                     |                      | 10          | 10 10        |  |
| Printed Name   | in or Receipt or Mate  | Signature  |                |                   |                       |                      | Month       | Day Year     |  |
| A CONTRACTOR OF THE CONTRACTOR |                        | -  |                |                   |                       |                      |             |              |  |
| 19. Certificate of Final Treatment/I   | Disnosal               |  |                |                   | 200                   | - V                  |             |              |  |
| 19. Certificate of Final Treatment/16  I certify, on behalf of the above list  | 213posai               |  |                | A contract        | ihad wasto a          | was managed i        | in complian | ce with all  |  |
|  | ed treatment facility. | that to the best of my knowl                             | edge, the a    | bove-descr        | ined waste            | was managed i        |             |              |  |
| applicable laws, regulations, permit   | ts and licenses on the | dates listed above.                                      |                |                   |                       | was managed i        |             |              |  |
| applicable laws, regulations, permit 20. Facility Owner or Operator: Ce  | ts and licenses on the | dates listed above.<br>of non-hazardous materials c      |                |                   |                       | was managed i        |             |              |  |
| applicable laws, regulations, permit   | ts and licenses on the | dates listed above.                                      |                |                   |                       | was managed i        | Month       | Day Year     |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253666

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739486

Destination PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/16/2018 09:42:14 Inbound 1 Out 05/16/2018 09:42:14

Scale

Operator lbejaran 1bejaran

Vehicle# L10

Gen EPA ID NR

Billing # 0001037

Container Driver

Check#

Gross Tare Net

58940 lb 25340 lb 33600 lb

Tons

16.80

Comments

Origin Amount UOM Rate Tax LD% Qty Product PORTW 16.80 Tons COAL ASH & COAL CO 100



|             | WASTE MANAGEMENT  | MINISTRUM.   |               |              | 2 01 -                | £ .                             |                          |      |  |
|-------------|---|--|---------------|--------------|-----------------------|---------------------------------|--------------------------|------|--|
|             | NON-HAZARDOUS MANIFEST  1. Generator's US EPA  N / /                  | 4  | fest Doc N    |              | 2. Page 1 o           |                                 | 9:04                     |      |  |
| 100         |   | rator's Site Address (If diffe<br>RGIA POWER PLANT |               | iling):      | A. Manifes            | t Number<br><b>MNA</b>          | 6739486                  |      |  |
|             | 241 RALPH MCGILL BLVD NE, BIN#10221 155<br>ATLANTA, GA 30308-3374 POR | CROSSGATE RD.<br>T WENTWORTH, GA                   | 31407         |              |                       | B. State G                      | enerator's ID            |      |  |
|             | 4. Generator's Phone 404-506-1365                                     | 6. US EPA ID I                                     | lumbor        |              |                       |                                 |                          |      |  |
|             | 5. Transporter 1 Company Name   | 6. US EPA ID I                                     | vumber        |              | C. State Tr           | ansporter's ID                  |                          |      |  |
| 1           | rastal brading  |  |               |              | D. Transpo            | orter's Phone                   |                          |      |  |
| 1           | 7. Transporter 2 Company Name   | 8. US EPA ID                                       | Number        |              |                       | 1 1 1 1 1                       |                          |      |  |
| 1           |   |  |               |              |                       | ansporter's IC<br>orter's Phone |                          |      |  |
| -           | 9. Designated Facility Name and Site Address                          | 10. US EPA ID                                      | Number        |              | T. Hullspe            |                                 |                          |      |  |
|             | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL        | 100  |               |              | G. State F            | acility ID                      |                          |      |  |
|             | 3001 LITTLE NECK ROAD   |  |               |              | H. State F            | acility Phone                   | 912-927-6113             | 11   |  |
|             | Savannah, GA 31419  |  |               |              |                       |                                 |                          |      |  |
|             | Savarman, Great 125   |  |               |              |                       |                                 |                          |      |  |
| G           | 11. Description of Waste Materials                                    |  | 12. Co<br>No. | Type         | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.            | I. Misc. Comments        | 11   |  |
| EN          | a. COAL ASH& COAL CONTAMINATED WASTE                                  | 4  | 710           | M            | 18                    |                                 |                          |      |  |
| E           | WM Profile # 375200GAKRA  | 4  | 1             | 11           |                       |                                 |                          |      |  |
| R           | b.  |  |               |              |                       |                                 |                          |      |  |
| T           |   |  | 1.4           |              |                       |                                 |                          |      |  |
| 0           | WM Profile #  |  |               |              |                       |                                 |                          |      |  |
| R           | c.  |  |               |              |                       |                                 |                          |      |  |
|             |   |  |               |              |                       |                                 |                          |      |  |
|             | WM Profile #  |  |               |              |                       |                                 |                          |      |  |
| 4           | d.  |  |               |              |                       |                                 |                          |      |  |
|             |   |  |               |              |                       |                                 |                          |      |  |
|             | WM Profile # J. Additional Descriptions for Materials Listed Above    |  | K. Dispo      | sal Location | า                     |                                 |                          |      |  |
|             | J. Additional Descriptions for Materials Listed Above                 |  |               |              |                       |                                 |                          | ^    |  |
|             |   |  | Cell /        | 370          | 1291                  | W2/1                            | Level 2 6 G              | -9   |  |
|             |   |  | Grid          | 16           | 0                     | -01                             |                          |      |  |
|             | 15. Special Handling Instructions and Additional Information          | n  |               |              |                       |                                 |                          |      |  |
|             |   |  |               |              |                       |                                 |                          |      |  |
|             | Purchase Order # GPC10760293  | EMERGENCY CO                                       | NTACT / PI    | HONE NO.:    |                       |                                 |                          |      |  |
|             | AS CENTERATORIS CERTIFICATE:  |  |               |              |                       |                                 |                          |      |  |
|             | I wis about a should described materials are not                      | hazardous wastes as defir                          | ed by CFR     | Part 261 or  | any applical          | ole state law,                  | have been fully and      |      |  |
|             | accurately described, classified and packaged and are in pro-         | oper condition for transpo                         | itation acc   | ording to a  | pplicable reg         | ulations.                       | Month Day                | Year |  |
|             | Printed Name  | Signature "On beha                                 | If of         |              |                       |                                 | 5 10                     | 18   |  |
|             | 17. Transporter 1 Acknowledgement of Receipt of Materia               | ls   |               |              |                       |                                 | ~ 1 4                    |      |  |
| T<br>R      |   | Signature  | 11/           |              |                       |                                 | Month Day                | Year |  |
| A<br>N      | Printed Name  | V 111.1  | Meli          | MUL          | A                     | 17                              | 1.51/01                  | 10   |  |
| S<br>P      | 18. Transporter 2 Acknowledgement of Receipt of Materia               | lls /  |               |              |                       | See 18                          |                          | 1,2  |  |
| R           | Printed Name  | Signature  |               |              |                       |                                 | Month Day                | Year |  |
| T<br>E<br>R |   | W. H. C. C.  |               |              |                       |                                 |                          |      |  |
| -           | 19. Certificate of Final Treatment/Disposal                           |  |               | 7            | 5.                    |                                 |                          |      |  |
| F           | I cortify on hehalf of the above listed treatment facility, th        | at to the best of my know                          | ledge, the    | above-desc   | cribed waste          | was manage                      | d in compliance with all |      |  |
| C           | applicable laws regulations, permits and licenses on the d            | ates listed above.                                 |               | 4            |                       |                                 |                          |      |  |
| 1           | 20. Facility Owner or Operator: Certification of receipt of           | non-hazardous materials                            | overed by     | this manife  | est.                  | STATE OF STATE                  | Month Day                | Year |  |
| 7           | Printed Name  | Signature /  |               |              |                       |                                 | 5/6                      | 18   |  |
|             | 101)  | Blue- GENERATO                                     | #2 CODY       |              |                       | Yellow- GENE                    | RATOR #1 COPY            |      |  |
| П           | White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY                      | RIUE- GENERATO                                     | 1 HZ CUPT     |              |                       |                                 |                          |      |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253669

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739487

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/16/2018 09:47:02 Out 05/16/2018 09:47:02

Scale

Inbound 1

Operator

Vehicle# L07

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

lbejaran 1be jaran

Gross Tare

59040 lb 25240 16

Net Tons 33800 lb 16.90

Comments

| Pro                  | duct   | LD% | Qty   | UOM  | Rate | Tax | Amount | Origin |
|----------------------|--|-----|-------|------|------|-----|--------|--------|
| States Secure season | THE THE CASE SAME WHEN THE THE THE WAS LIVED THE THE THE AND THE THE THE THE THE THE |     |       |      |      |     |        | -      |
| 1                    | COAL ASH & COAL C  | 100 | 16.90 | Tons |      |     |        | PORTW  |



|   |  | -!foot Doc No   | 2. Page 1 o  |  |  | 100               |            |
|---|--|---|--|--|--|-------------------|------------|
| NON-HAZARDOUS MANIFEST  1. Generator  | N / A  | nifest Doc No.  |  |  | 9:0  | 8                 |            |
| 3. Generator's Mailing Address:   | Generator's Site Address (If di  |   | A. Manifes   |  | 673948   | 7                 |            |
| GEORGIA POWER   | GEORGIA POWER PLAN   | T KRAFT   | WN   | ΛNA  |  |                   |            |
| 241 RALPH MCGILL BLVD NE, BIN#10221   | 155 CROSSGATE RD.  |   |  | B. State G   | enerator's ID  |                   |            |
| ATLANTA, GA 30308-3374  | PORT WENTWORTH, GA   | 31407   |  |  |  |                   |            |
| 4. Generator's Phone 404-506-1365   |  |   | Annual Control of the |  |  |                   |            |
| Transporter 1 Company Name  | 6. US EPA II   | Number  | C Chita Ta   |  |  |                   |            |
| hart-1/red's  |  |   |  | ensporter's ID<br>rter's Phone   |  |                   |            |
| Wyal grand  | 8. US EPA II   | ) Number  | D. Hallspe   | reer 3 t Hone  |  |                   |            |
| 7. Transporter 2 Company Name   | a. OSEIAI  |   | E. State Tr  | ansporter's ID   | )  | L Park            | 1.01       |
|   |  |   | F. Transpo   | rter's Phone   |  | Was a second      | NEW YEAR   |
| 9. Designated Facility Name and Site Address  | 10. US EPA   | ID Number   |  |  |  |                   |            |
| SUPERIOR LANDFILL   |  |   | G. State Fa  |  | 042.027  |                   |            |
| 3001 LITTLE NECK ROAD   |  |   | H. State Fa  | cility Phone   | 912-927  | -b113             |            |
| Savannah, GA 31419  |  |   |  |  |  |                   |            |
|   |  | 12. Containers  | 13, Total  | 14. Unit   |  |                   |            |
| 11. Description of Waste Materials  |  | No. Type  | Quantity   | Wt./Vol.   | I. MISC.   | Comments          |            |
| a. COAL ASH& COAL CONTAMINATED W  | ASTE   | D NA  | 1  |  |  |                   |            |
| a. COAL ASHA COAL CONTAMINATES VI   |  | 4-0101  | 10   | Control of the contro | a de monte de la constitución de | essent into       | TARROWS IN |
| WM Profile # 375200   | OGAKRA   |   |  |  |  |                   |            |
| b.  |  |   |  |  |  |                   |            |
|   |  |   |  |  |  |                   |            |
| WM Profile #  |  |   |  |  |  |                   |            |
| C.  |  |   |  |  |  |                   |            |
|   |  |   |  | and the second s |  |                   | SACS LINES |
| WM Profile #  |  |   |  |  |  |                   |            |
| d.  |  |   |  |  |  |                   |            |
|   |  |   |  |  |  |                   |            |
| WM Profile #  |  |   |  |  |  |                   | Till Till  |
| J. Additional Descriptions for Materials Listed A   | bove   | K. Disposal Locati  | on   |  |  | 9 19 3            |            |
| J. Additional Descriptions for Materials Listed A   |  | Cell 1/3  | 010  | 01 111   | Lével S  | 266               | (1         |
| Additional Descriptions for Materials Listed P  |  |   |  | I a proper f   | 1 40   | 0                 | - 1        |
| 3. Additional Descriptions for Materials Ested P  |  | Grid V  | 010  | 1001   |  | -                 |            |
|   | Information  | 11/5  | 010  | 1001   |  |                   |            |
| Additional Descriptions for Materials Listed A     Special Handling Instructions and Additional   | Information  | 11/5  | 010  | 1001   |  |                   |            |
|   | Information  | 11/5  | 010  | 100  |  |                   |            |
| 15. Special Handling Instructions and Additional  |  | Grid  |  | (00)   |  |                   |            |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293   | EMERGENCY C  | Grid ONTACT / PHONE NO  |  |  |  |                   |            |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE:   | EMERGENCY C  | ONTACT / PHONE NO   | or any applical  | ole state law,   | have been full   | y and             |            |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE:   | EMERGENCY C<br>als are not hazardous wastes as de<br>d are in proper condition for trans   | ONTACT / PHONE NO   | or any applical  | ole state law, ulations.   |  | 2000              | Voa        |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and   | EMERGENCY Coals are not hazardous wastes as deduced are in proper condition for trans  | ONTACT / PHONE NO   | or any applical  | ole state law,<br>ulations.  | have been full   | y and             | Year       |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  | EMERGENCY Coals are not hazardous wastes as de dare in proper condition for trans  | ONTACT / PHONE NO   | or any applical  | ole state law,<br>ulations.  |  | 2000              | Year       |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  | EMERGENCY Coals are not hazardous wastes as de d are in proper condition for transplanture. On be  | ONTACT / PHONE NO   | or any applical  | ole state law,<br>ulations.  | Month B  | 2000              | 18         |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  | EMERGENCY Coals are not hazardous wastes as de dare in proper condition for trans  | ONTACT / PHONE NO   | or any applical  | ole state law,<br>ulations.  |  | Day (             | 18         |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt Printed Name   | EMERGENCY Consists are not hazardous wastes as de dare in proper condition for transplants Signature "On be of Materials   | ONTACT / PHONE NO   | or any applical  | ole state law,<br>ulations.  | Month B  | Day (             | 18         |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt  | eMERGENCY Consists are not hazardous wastes as de dare in proper condition for transplants. Signature "On be of Materials  of Materials  | ONTACT / PHONE NO   | or any applical  | ole state law,<br>ulations.  | Month B  | Day (             | Year       |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt Printed Name   | EMERGENCY Consists are not hazardous wastes as de dare in proper condition for transplants Signature "On be of Materials   | ONTACT / PHONE NO   | or any applical  | ole state law,<br>ulations.  | Month Month  | Day Day           | Year       |
| 15. Special Handling Instructions and Additional Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt Printed Name  18. Transporter 2 Acknowledgement of Receipt   | eMERGENCY Consists are not hazardous wastes as de dare in proper condition for transplants. Signature "On be of Materials  of Materials  | ONTACT / PHONE NO   | or any applical  | ole state law,<br>ulations.  | Month Month  | Day Day           | Yea /      |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt Printed Name  18. Transporter 2 Acknowledgement of Receipt Printed Name   | EMERGENCY Coals are not hazardous wastes as de d are in proper condition for trans   Signature "On be of Materials     Signature     Of Materials     Signature     Of Materials     Signature   | ONTACT / PHONE NO fined by CFR Part 261 portation according to half of" | or any applical  |  | Month Month Month  | Day Day Day       | Yea        |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt Printed Name  18. Transporter 2 Acknowledgement of Receipt Printed Name  19. Certificate of Final Treatment/Disposal Leartify, on helpalf of the above listed treatment   | EMERGENCY Coals are not hazardous wastes as de d are in proper condition for transpose Signature "On be of Materials Signature Signature tracility, that to the best of my known of the state of the sta | ONTACT / PHONE NO fined by CFR Part 261 portation according to half of" | or any applical  |  | Month Month Month  | Day Day Day       | Yea        |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt Printed Name  18. Transporter 2 Acknowledgement of Receipt Printed Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment profiseble laws, regulations, permits and license   | EMERGENCY Coals are not hazardous wastes as de d are in proper condition for transparent of Materials  Signature  of Materials  Signature  t facility, that to the best of my knows on the dates listed above.   | ONTACT / PHONE NO fined by CFR Part 261 portation according to half of" | or any applical<br>applicable reg  |  | Month Month Month  | Day Day Day       | Year       |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt Printed Name  18. Transporter 2 Acknowledgement of Receipt Printed Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment provisionals laws regulations permits and licenses. | EMERGENCY Considerable and the state of Materials  of Materials  Signature  of Materials  Signature  of Materials  Signature  of Materials  Signature  of Materials  Fracility, that to the best of my knows on the dates listed above.  | ONTACT / PHONE NO fined by CFR Part 261 portation according to half of" | or any applical<br>applicable reg  |  | Month  Month  d in compliance  | Day Day e with al | Year       |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materia accurately described, classified and packaged and Printed Name  17. Transporter 1 Acknowledgement of Receipt Printed Name  18. Transporter 2 Acknowledgement of Receipt Printed Name  19. Certificate of Final Treatment/Disposal  | EMERGENCY Coals are not hazardous wastes as de d are in proper condition for transparent of Materials  Signature  of Materials  Signature  t facility, that to the best of my knows on the dates listed above.   | ONTACT / PHONE NO fined by CFR Part 261 portation according to half of" | or any applical<br>applicable reg  |  | Month Month Month  | Day Day Day       | Year       |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253675

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# 38

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code > Manifest 6739488

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/16/2018 09:56:12

Out 05/16/2018 09:56:12

Scale Inbound 1

Operator lbejaran 1be jaran

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Gross Tare Net Tons

63140 1b 27960 15 35180 1b 17,59

Comments

Product LD% Qty HOM Rate Tax Amount Origin

COAL ASH & COAL CO 100

17.59 Tons

PORTW



| WASTE MANAGEMENT   |                            |   | *           |              | Fig. 19  | . 1                              |                      |  | -1                                      |
|--|----------------------------|---|-------------|--------------|--|----------------------------------|----------------------|--|---|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA      | Α   | fest Doc N  |              | 2. Page 1 c  |                                  | 9:21                 |  |   |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                         |                            | erator's Site Address (If diffe<br>DRGIA POWER PLANT    |             | iling):      | A. Manifes   | st Number  MNA                   | 67394                | 88   |   |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                      | POI                        | CROSSGATE RD.<br>RT WENTWORTH, GA                       | 31407       |              |  | B. State G                       | enerator's ID        |  |   |
| 4. Generator's Phone 404-5  5. Transporter 1 Company Name                | 506-1365                   | 6. US EPA ID I  | Number      |              |  |                                  | 100                  |  |   |
| S. Transporter I Company Name  | 'whim                      | 0.  |             |              | The Control of the Co | ransporter's ID<br>orter's Phone | )                    |  |   |
| 7. Transporter 2 Company Name  | HATTIN                     | 8. US EPA ID  | Number      |              |  |                                  |                      |  |   |
| 4. Italisporter 2 company name   |                            |   |             |              | The second second  | ransporter's ID<br>orter's Phone |                      |  |   |
| 9. Designated Facility Name and Sit                                      | e Address                  | 10. US EPA ID   | Number      |              | r. Hallspo   | orter's Priorie                  |                      |  |   |
| SUPERIOR LANDFILL  |                            |   |             |              | G. State F   | acility ID                       |                      |  |   |
| 3001 LITTLE NECK ROAD  |                            |   |             |              | H. State F   | acility Phone                    | 912-92               | 7-6113   |   |
| Savannah, GA 31419   |                            |   |             |              |  |                                  |                      |  |   |
|  |                            |   | 12. Coi     | ntainers     | 13. Total  | 14. Unit                         | I. Misc              | . Comments   |   |
| 11. Description of Waste Materials                                       |                            |   | No.         | Туре         | Quantity   | Wt./Vol.                         |                      |  |   |
| a. COAL ASH& COAL CONTAI   | MINATED WASTE              | Bn  | 38          | NT           | 17   |                                  | NION CALLED BUSINESS | O SECURITION AND ADDRESS OF THE PERSON NAMED IN COLUMN 1 AND THE P | 230000000000000000000000000000000000000 |
| WM Profi   | e# 375200GAKRA             |   |             |              |  |                                  |                      |  |   |
| b.   |                            |   |             |              |  |                                  |                      |  |   |
|  | WM Profile #               |   |             |              |  |                                  |                      |  |   |
| C.   | WIVI Profile #             |   |             |              |  |                                  |                      |  |   |
|  |                            |   |             |              |  |                                  |                      |  |   |
|  | WM Profile #               |   |             |              |  |                                  |                      |  |   |
| d.   |                            |   |             |              |  |                                  |                      |  |   |
|  | WM Profile #               |   |             |              | . The state of   |                                  |                      | 1015   |   |
| J. Additional Descriptions for Ma  |                            |   | K. Dispo    | sal Location | 10   | 0                                |                      | 1  | 1                                       |
|  |                            |   | Cell        |              | 15/01  | 17                               | Level                | 10   |   |
|  |                            |   | Grid        |              | 00/  | 31                               |                      | - 3 1  |   |
| 15. Special Handling Instructions a                                      | nd Additional Informatio   | on  |             |              | 116  | 55-                              |                      |  |   |
|  |                            |   | 4 5 5       |              |  |                                  | AND THE              |  |   |
| Purchase Order # GPC10760  | 293                        | EMERGENCY CO  | NTACT / PH  | HONE NO.:    |  |                                  |                      |  | 1                                       |
| 16. GENERATOR'S CERTIFICATE:   |                            |   | II orn      | 0 1 201      |  | ala stata law. h                 | ave been full        | v and  |   |
| I hereby certify that the above-des accurately described, classified and | cribed materials are not   | hazardous wastes as defin<br>oper condition for transpo | tation acc  | ording to a  | pplicable reg  | ulations.                        | lave been run        | y una  |   |
| Printed Name   | a packaged and are in pr   | Signature "On beha                                      | f of"       |              |  |                                  | Month                | Day  | Year                                    |
| BFILIDOUICH  |                            | 125   | out-        | 4            |  |                                  | 151                  | 10   | 10                                      |
| 17. Transporter 1 Acknowledgeme  | ent of Receipt of Materia  | als   | 11          | 1            |  |                                  | Month                | Day  | Year                                    |
| Printed Name   | 14015                      | Signature   | LY/R        | 1            |  |                                  | 5                    | 16   | 10                                      |
| 18. Transporter 2 Acknowledgem   | ent of Receipt of Materia  | als   | 101         |              |  |                                  |                      | . 4  |   |
| Printed Name   |                            | Signature   | FW          |              |  |                                  | Month                | Day  | Year                                    |
|  |                            |   |             |              |  |                                  |                      |  |   |
| 19. Certificate of Final Treatment                                       | /Disposal                  |   |             |              |  | ĭ                                |                      | المطانسي   |   |
| I certify, on behalf of the above lis                                    | ted treatment facility, th | nat to the best of my knowl                             | edge, the a | above-desc   | ribed waste  | was managed                      | in complianc         | e with all   |   |
| applicable laws, regulations, perm<br>20. Facility Owner or Operator: O  | ertification of receipt of | non-hazardous materials o                               | overed by   | this manife  | est.   |                                  |                      |  |   |
| Printed Name   | A 5                        | Signature   | Va          | P. Carlo     |  |                                  | Month                | Day  | Year                                    |
|  | AN                         | _   | 11/         | _            |  |                                  |                      | 18   | 16                                      |
| White TREATMENT STORAGE D  | ISPOSAL FACILITY COPY      | Blue- GENERATOR   | #2 COPY     | -            |  | Yellow- GENEF                    | RATOR #1 CO          | γ  |   |

Pink- FACILITY USE ONLY



Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Vehicle# 5307

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6739489

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/16/2018 10:56:07 Out 05/16/2018 10:56:07

Scale Inbound 1

Operator rb rb

Container Driver

Billing # 0001037

Gen EPA ID NR

Check#

Gross Tare Net Tons

Volume

60680 1b 24080 lb 36600 16 18.30

Comments

Product

LD% Qty E UOM Rate Tax

Amount

Origin

1 COAL ASH & COAL CO 100 18.30 Tons

PORTW



| WASTE MANAGEMENT   |                                       |  |  |                  | 120                   | c                    |               |              |      |
|--|---------------------------------------|--|--|------------------|-----------------------|----------------------|---------------|--------------|------|
| NON-HAZARDOUS MANIFEST   |                                       | / A  | ifest Doc N  |                  | 2. Page 1 o           |                      | 10            | 5.18         |      |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   |                                       |  | erator's Site Address (If different than mailing): ORGIA POWER PLANT KRAFT |                  |                       |                      | 6739489       |              |      |
| 241 RALPH MCGILL BLVD NE<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404                             | ,                                     | 155 CROSSGATE RD.<br>PORT WENTWORTH, GA              | 31407  |                  |                       | B. State G           | enerator's II | )            |      |
| 5. Transporter 1 Company Name  | m 1 0 0                               | 6. US EPA ID   | Number   |                  |                       | ansporter's ID       |               |              |      |
| 7. Transporter 2 Company Name  | ading.                                | 8. US EPA ID   | D. Transporter's Phone  E. State Transporter's ID  F. Transporter's Phone  |                  |                       |                      |               |              |      |
| 9. Designated Facility Name and S<br>SUPERIOR LANDFILL   | ite Address                           | 10. US EPA II  | O Number   |                  | G. State F            |                      | 012.00        | 7. (112      |      |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |                                       |  |  |                  | H. State F            | acility Phone        | 912-92        | 27-6113      |      |
| 11. Description of Waste Materia   | ls                                    |  | 12. Co<br>No.  | Type             | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol. | I. Mis        | sc. Comments |      |
| a. COAL ASH& COAL CONTA  |                                       |  | 307  | 团市               | 18                    |                      |               |              |      |
| WM Pro   | file # 375200GAK                      | RA   |  |                  |                       |                      |               |              |      |
|  | WM Profile #                          |  |  |                  |                       |                      |               |              |      |
| C.   |                                       |  |  |                  |                       |                      |               |              |      |
|  | WM Profile #                          |  |  |                  |                       |                      |               |              |      |
| d.   |                                       |  |  |                  |                       |                      |               |              |      |
| J. Additional Descriptions for M   | WM Profile #<br>aterials Listed Above |  | K. Dispo   | l<br>sal Locatio | n /)                  |                      |               | 15           | _    |
|  |                                       |  | Cell<br>Grid   |                  | 520                   | 179                  | Level         | 6            |      |
| 15. Special Handling Instructions  | and Additional Inform                 | nation   |  | U                | X16                   | , 5 C                |               |              |      |
| Purchase Order # GPC1076   | 0293                                  | EMERGENCY CO   | NTACT / PH   | HONE NO.:        |                       |                      |               |              |      |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-de  | occribad materials are                | not hazardous wastes as defi                         | ned by CFR   | Part 261 or      | any applicat          | ole state law, h     | nave been fu  | lly and      |      |
| accurately described, classified a<br>Printed Name   | nd packaged and are i                 | n proper condition for transpo<br>Signature "On beha | rtation acc  | ording to a      | pplicable reg         | ulations.            | Month         | Day          | Year |
| T 17. Transporter 1 Acknowledger   | ment of Receipt of Mar                | terials Signature                                    |  | , ,              | 1                     |                      | Month         | Day          | Year |
| Printed Name  18. Transporter 2 Acknowledger   | ment of Receipt of Mar                | T T T  | 1  |                  | T                     |                      | 5             | 16           | 18   |
| Printed Name   |                                       | Signature  |  |                  |                       |                      | Month         | Day          | Year |
| 19. Certificate of Final Treatmer  F A I certify, on behalf of the above applicable laws, regulations, per | isted treatment facilit               | y, that to the best of my know                       | ledge, the   | above-desc       | cribed waste          | was managed          | l in complian | ce with all  |      |
| 20. Facility Owner or Operator:  | Certification of receip               | t of non-hazardous materials                         | covered by   | this manife      | est.                  |                      | (             | 16           | 10   |
| Printed Name   | (X)                                   | Signature  | -  |                  |                       |                      | Month         | Day          | Year |
| White TREATMENT STORAGE  | DISPOSAL FACILITY CO                  | PY Blue- GENERATO                                    | R #2 COPY  |                  |                       | Yellow- GENEI        | RATOR #1 CO   | PY           | 1404 |

Pink- FACILITY USE ONLY



Original Ticket# 1253707

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier | B AND N Ticket Date 05/16/2018 Payment Type Credit Account Manual Ticket#

Hauling Ticket# Route

State Waste Code Manifest 6739490

Destination

Profile Generator Vehicle# 36 Container Driver Check# Billing # 0001037 Gen EPA ID NR

Rate Tax

Volume

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/16/2018 11:03:33 Inbound 1 Out 05/16/2018 11:03:33

Scale

LD% Dty

O Riller

Operator 1be jaran lbejaran

Gross 65260 lb 25980 1b Tare 39280 lb Net 19.64 Tons

Comments

Product

Origin Amount

PORTW

COAL ASH & COAL CO 100

19.64 Tons

UOM



|                           | RDOUS MANIFEST  | 1. Generator's US EP. N /      |                          | No. Manifest Doc No.   |  |                |         | 2. Page 1 c           | of                          | 10:26   |              |      |  |  |
|---------------------------|---|--------------------------------|--------------------------|--|--|----------------|---------|-----------------------|-----------------------------|---|--------------|------|--|--|
| GEORGIA PO<br>241 RALPH N | MCGILL BLVD NE,<br>A 30308-3374   | GE0<br>BIN#10221 155           | ORGIA POWER<br>CROSSGATE | ator's Site Address (If different than mailing):<br>RGIA POWER PLANT KRAFT<br>CROSSGATE RD.<br>I WENTWORTH, GA 31407 |  |                |         |                       | t Number  WNA  B. State G   | 6739<br>Generator's   |              |      |  |  |
| 5. Transporter            | 5. Transporter 1 Company Name  7. Transporter 2 Company Name  |                                |                          |  | 6. US EPA ID Number  8. US EPA ID Number |                |         |                       |                             | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID F. Transporter's Phone |              |      |  |  |
| SUPERIOR L<br>3001 LITTLE | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419 |                                |                          | US EPA IC  | Number                                   |                |         | G. State Fa           | acility ID<br>acility Phone | 912-9   | 3            |      |  |  |
|                           | of Waste Materials  | AINATED WASTE                  |                          |  | 12. Con<br>No.                           | tainers<br>Typ | ie      | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.        | 1. N  | lisc. Commen | ts   |  |  |
| a. COAL ASP               |   | # 375200GAKRA                  |                          | B  | 736                                      | D              |         | 18                    |                             |   |              |      |  |  |
| b.<br>T<br>O<br>R         |   | WM Profile #                   |                          |  |  |                |         |                       |                             |   |              | 10.4 |  |  |
| C.                        |   | WM Profile #                   |                          |  |  |                |         |                       |                             |   |              |      |  |  |
| d.                        |   | WM Profile #                   |                          |  |  |                |         | and decided           |                             |   |              |      |  |  |
| J. Additional             | Descriptions for Mate   | erials Listed Above            |                          |  | K. Dispos  Cell  Grid                    | al Loca        | 1/V     | 310                   | 124                         | Level   | 65           |      |  |  |
| 15. Special Ha            | ndling Instructions an  | d Additional Informatio        | n                        |  |  |                | ^       | 816                   |                             |   |              |      |  |  |
|                           | OR'S CERTIFICATE:   | 293<br>ribed materials are not |                          |  | ITACT / PHO                              |                |         | ıy applicab           | le state law, h             | ave been f  | ally and     | 18 V |  |  |
| accurately des            | cribed, classified and  | packaged and are in pro        | Signature "              | r transpor   | tation acco                              | rding 1        | to appl | icable regu           | ılations.                   | Month 5   | Day /        | Year |  |  |
| Printed Na                | me PiHma  | nt of Receipt of Materia       | Signature                | 01   | Pette                                    |                |         |                       |                             | Month 5   | Day 16       | Year |  |  |
| Printed Na                |   | in or necespe or wateria       | Signature                |  |  | W              |         |                       | 1 12                        | Month   | Day          | Year |  |  |
| I certify, on be          | rs, regulations, permit   | ed treatment facility, the     | ates listed above.       | Jan .  |  |                |         |                       | vas managed                 | in complia  | nce with a   | ľ    |  |  |
| Printed Na                | me 🔾  | rtification of receipt of      | Signature                |  | 1  | nis ma         | nitest. |                       | ellow- GENER                | Month   | Day          | Year |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253710

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/16/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6739491

Time

Out 05/16/2018 11:13:23

Destination PO

Profile Generator Driver Check# Billing #

Operator

lbejaran

lbejaran

Vehicle# L10 Container 0001037

Gen EPA ID NR

63540 lb Gross 25340 1b Tare 38200 lb Net 19.10 Tons

Comments

Qty. LD% Product

In 05/16/2018 11:13:23 Inbound 1

MOU

Rate

Amount

Origin

1 COAL ASH & COAL CO 100

19.10 Tons

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale

PORTW



| WASTE MANAGEMENT   | 1. Generator's US EPA         | A ID No. Man   | ifest Doc N    | 0                 | 2. Page 1 c               | of I                             |   |
|--|-------------------------------|--|----------------|-------------------|---------------------------|----------------------------------|---|
| NON-HAZARDOUS MANIFEST   | N /                           |  | ilest boc N    | 0.                | 2. rage 1 0               |                                  | 10:37                                       |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                             | GEO                           | erator's Site Address (If diff<br>ORGIA POWER PLANT<br>5 CROSSGATE RD. |                | iling):           | A. Manifes                | MNA                              | 6739491                                     |
| 241 RALPH MCGILL BLVD N<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 40 |                               | RT WENTWORTH, GA   | 31407          |                   |                           | B. State G                       | Generator's ID                              |
| 5. Transporter 1 Company Name  |                               | 6. US EPA ID   | Number         |                   |                           |                                  |   |
| (100stal6  | radina                        | 8 US EPA ID  | Ni washaw      |                   |                           | ransporter's IE<br>orter's Phone |   |
| 7. Transporter 2 Company Name  | U                             |  |                |                   | 6.5 ELECADEROS - 5.5 (L.) | ansporter's IC<br>orter's Phone  |   |
| 9. Designated Facility Name and  | Site Address                  | 10. US EPA II  | Number         |                   | G. State F                | acility ID                       |   |
| SUPERIOR LANDFILL  |                               |  |                |                   |                           | acility Phone                    | 912-927-6113                                |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419                                  |                               |  |                |                   | H. State F                | actificy Priorite                | 312 327 0113                                |
| Savaillali, GA 51419   |                               |  |                |                   |                           |                                  |   |
| G 11. Description of Waste Materi  | als                           |  | 12. Cor<br>No. | Type              | 13. Total<br>Quantity     | 14. Unit<br>Wt./Vol.             | I. Misc. Comments                           |
| a. COAL ASH& COAL CONT   |                               | L  | -10            | DI                | R                         |                                  |   |
| R WM Pr  | ofile# 375200GAKRA            |  |                |                   |                           |                                  |   |
| Д <b>b.</b><br>Т   |                               |  |                | -                 |                           |                                  |   |
| o  | WM Profile #                  |  |                | e de la companion |                           |                                  |   |
| R c.   | WIVI Profile #                |  |                |                   | AND PROPERTY OF           |                                  |   |
| 7  |                               |  |                |                   |                           |                                  |   |
|  | WM Profile #                  |  |                |                   |                           |                                  |   |
| d.   |                               |  |                |                   |                           | 1                                |   |
|  |                               |  |                |                   |                           |                                  |   |
|  | WM Profile #                  |  | K Disno        | sal Locatio       | n 0                       | 1                                | A San Messay San en Messay III a successiva |
| J. Additional Descriptions for M   | Materials Listed Above        |  | R. Dispo.      |                   | h //                      | 11174                            | 11  |
|  |                               |  | Cell           |                   | 1011                      | 701                              | Level                                       |
|  |                               |  | Grid           | 1                 | 1                         | 136                              |   |
| 15. Special Handling Instruction   | s and Additional Information  | on   |                |                   | 001                       | W                                |   |
|  |                               |  |                |                   |                           |                                  |   |
| Purchase Order # GPC1070   | 50293                         | EMERGENCY CO   | NTACT / PH     | ONE NO.:          |                           |                                  |   |
| 16. GENERATOR'S CERTIFICATE  |                               |  |                |                   |                           |                                  |   |
| I haraby cortify that the above-   | lescribed materials are not   | hazardous wastes as defin  | ed by CFR I    | Part 261 or       | any applicab              | le state law, h                  | nave been fully and                         |
| accurately described, classified   | and packaged and are in pr    | oper condition for transpo<br>Signature "On beha                       | tation acco    | ording to a       | pplicable reg             | ulations.                        | Month Day Year                              |
| Printed Name   |                               | Signature on bena  | 101            |                   |                           |                                  | 5 16 18                                     |
| т 17. Transporter 1 Acknowledge  | ment of Receipt of Materia    | als /  | -/             | 2                 |                           |                                  |   |
| Printed Name   | 1000                          | Signature  | The            |                   | 45                        |                                  | Month Day Year                              |
| S AlliChall  | 11411                         | X  | reces          | INC               | h-                        |                                  | 12/16/15                                    |
| 18. Transporter 2 Acknowledge  | ment of Receipt of Materia    |  |                |                   |                           |                                  | Month Day Year                              |
| Printed Name   |                               | Signature  |                |                   |                           |                                  | 3000  |
| R  |                               |  |                |                   |                           | 7 7 30                           |   |
| 19. Certificate of Final Treatme   | nt/Disposal                   |  | - حاء مماده    | hous do           | ribed wasta               | was managad                      | in compliance with all                      |
| I certify, on behalf of the above applicable laws, regulations, pe           | listed treatment facility, th | nat to the best of my knowl<br>ates listed above                       | eage, the a    | pove-desc         | inped waste               | was manageu                      | in compliance with the                      |
| applicable laws, regulations, pe   | : Certification of receipt of | non-hazardous materials o  | overed by      | this manife       | est.                      |                                  | 1   |
| T Printed Name   |                               | Signature  |                | San III           | 77.16                     | A STATE OF                       | Month Day Year                              |
| Y Timee Name   | 1 Va                          | 0  | _              |                   |                           |                                  | 11/1/                                       |
| TREATMENT STORAGE  | DISPOSAL FACILITY COPY        | Blue- GENERATOR  | #2 COPY        |                   | 1                         | ellow- GENER                     | RATOR #1 COPY                               |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253711

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/16/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Time

Destination

PO

Profile Generator

Manifest 6739492

375200GAKRA (COAL ASH & COAL CUNTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale 05/16/2018 11:15:34 Inbound 1

LD%

Operator lbejaran lbejaran

Vehicle# L07

0001037

Tax

Container Driver

Billing #

Gen EPA ID NR

Rate

Check#

Gross Tare Net

58300 1b 25240 lb 33060 lb

Tons

16.53

Comments

Product

Dut 05/16/2018 11:15:34

Oty

Amount

Origin

PORTW

COAL ASH & COAL CO 100

16.53 Tons

MOU



|        | NON-HAZARDOUS MANIFEST  | 1. Generator's US E  | 10.87 (3) (3) (4.5)                                   | nifest Doc No.   | 2. Page 1           | of   | 1817//                             |            |
|--------|---|--|---|------------------|---------------------|--|------------------------------------|------------|
|        |   |  | / A   |                  |                     |  | 18:41                              |            |
|        | 3. Generator's Mailing Address:<br>GEORGIA POWER  |  | enerator's Site Address (If dif<br>EORGIA POWER PLANT |                  |                     | est Number<br>/MNA   | 6739492                            |            |
|        | 241 RALPH MCGILL BLVD NE, I   | BIN#10221 1  | 55 CROSSGATE RD.                                      |                  |                     | A STATE OF THE STA | Generator's ID                     |            |
|        | ATLANTA, GA 30308-3374  | P  | ORT WENTWORTH, GA                                     | 31407            | 100                 |  |                                    | - 1        |
|        | 4. Generator's Phone 404-50   | 06-1365  |   |                  |                     | The Park   |                                    |            |
| Ī      | 5. Transporter 1 Company Name   |  | 6. US EPA ID  | Number           |                     |  |                                    |            |
|        | ( mestal 6  | codino   |   |                  |                     | Transporter's I<br>porter's Phone  |                                    |            |
| +      | 7. Transporter 2 Company Name   | 1 Maring   | 8. US EPA ID  | Number           | D. Italis           | porter's Priorie   |                                    | ne project |
|        | 7. Hansporter 2 company name  |  |   |                  | E. State            | Transporter's I  | D                                  |            |
|        |   |  |   |                  | F. Transı           | oorter's Phone   |                                    |            |
|        | 9. Designated Facility Name and Site  | Address  | 10. US EPA II   | O Number         | C State             | Facility ID  |                                    |            |
|        | SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD  |  |   |                  | Vision state of the | Facility ID  | 912-927-6113                       |            |
| 0      |   |  |   |                  | H. State            | Facility Phone   | 912-927-0113                       | HARLES AND |
|        | Savannah, GA 31419  |  |   |                  |                     |  |                                    |            |
|        | 11. Description of Waste Materials  |  |   | 12. Containe     |                     | 14. Unit   | I. Misc, Comments                  |            |
| G      | The Mark the control of the Control | UNIATED MAGEE  |   | No.              | Type Quantity       | Wt./Vol.   |                                    |            |
| E<br>N | a. COAL ASH& COAL CONTAM  | IINATED WASTE  | +   | 107 P            | TIY                 |  |                                    |            |
| E      | NAME Describe   | # 375200GAKR   | ^   |                  | )                   |  |                                    |            |
| R      | b.  | # 373200GAKK   | Α.  |                  |                     |  | n et se seguination de se se se se |            |
| T      |   |  |   |                  |                     |  |                                    |            |
| 0      | V   | VM Profile #   |   |                  |                     |  |                                    |            |
| R      | c.  | · · · · · · · · · · · · · · · · · · ·  |   |                  |                     |  |                                    |            |
|        |   |  |   |                  |                     |  |                                    |            |
| 6      | V   | VM Profile #   |   | 11.50元 州         |                     |  |                                    |            |
| A      | d.  |  |   |                  |                     |  | Man and the                        |            |
| H      |   |  |   |                  |                     |  |                                    |            |
|        |   | VM Profile #   |   | K Dissessible    |                     |  |                                    |            |
|        | J. Additional Descriptions for Mate   | rials Listed Above   |   | K. Disposal Lo   | b 11                | 170  | 17                                 |            |
|        |   |  |   | Cell             | NOU                 | 111  | Level ()                           | 114        |
|        |   |  |   | Grid             | 1 97                | 32   |                                    |            |
|        | 15. Special Handling Instructions and   | d Additional Informat  | cion  |                  | Con                 | 2  |                                    |            |
|        |   |  |   |                  |                     |  |                                    |            |
|        | 5   | 0.2  | EMERGENCY CO  | NTACT / DUONE    | NO ·                |  |                                    |            |
|        | Purchase Order # GPC1076029   | 93   | EMERGENCI CO  | VIACI / PHONE    | . NO                |  |                                    |            |
|        | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-descr   |  | et have adaus westes as defin                         | ad by CEP Part   | 761 or any applica  | hle state law l  | have been fully and                |            |
|        | accurately described, classified and p  | packaged and are in a  | proper condition for transpo                          | rtation accordin | ng to applicable re | gulations.   |                                    |            |
|        | Printed Name  |  | Signature "On beha                                    | lf of"           |                     |  | Month Day                          | Year       |
|        | 8+ilipovich   | apple of the second  | 105   |                  |                     |  | 121161                             | 16         |
| T<br>R | 17. Transporter 1 Acknowledgemen  | t of Receipt of Mater  |   | 1                | 1                   |  | Month Day                          | Year       |
| A<br>N | Printed Name  | 12   | Signature   | 1 H              |                     |  | 5/6                                | 1          |
| S<br>P | 18. Transporter 2 Acknowledgemen  | at of Receipt of Mater   | ials  | -/-              | 1                   | THE STREET   |                                    | 10         |
| O<br>R | Printed Name  | it of necespt of mater   | Signature   |                  |                     |  | Month Day                          | Year       |
| T      | . Tilled Holls  |  |   |                  |                     |  |                                    |            |
| R      |   | and the second s |   |                  |                     |  |                                    | 1 1        |
| F      | 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste   | usposal  | that to the bost of my knowl                          | edge the above   | e-described waste   | was managed  | in compliance with all             |            |
| A<br>C | I certify, on behalf of the above liste applicable laws, regulations, permits   | s and licenses on the  | dates listed above.                                   | euge, the above  | c described waste   |  |                                    |            |
| l<br>L | 20. Facility Owner or Operator: Cer   | tification of receipt o  | of non-hazardous materials c                          | overed by this i | manifest.           |  |                                    |            |
| T      | Printed Name  | MA   | Signature   | 1                | 14.1762             | 77.5   | Month Day                          | Year       |
| Y      |   | TV   |   | /                |                     |  | 1/2                                | U          |
| _      | White- TREATMENT, STORAGE, DISF   | POSAL FACILITY COPY  | Blue- GENERATOR                                       | #2 COPY          | THE PERMIT          | Yellow- GENER  | RATOR #1 COPY                      |            |

Pink- FACILITY USE ONLY



Original Ticket# 1253718

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/16/2018 Payment Type Credit Account Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6739493

Destination PO

Comments

Profile 3752006AKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/16/2018 11:28:48 Inbound 1 Out 05/16/2018 11:28:48

Scale

Operator lbejaran lbejaran

Vehicle# 38

0001037

Container Driver

Billing #

Gen EPA ID NR

Check#

Gross 66240 1b 27960 15 Tare Net 38280 1b Tons 19.14

LD% Qty UOM Rate Tax Product

1 COAL ASH & COAL CO 100

19.14 Tons

Origin

PORTW

Total Tax Total Ticket

Amount



|                  | WASTE MANAGEMENT   |   |  |                           |                  |                       |                                 | and the second |              |         |
|------------------|--|---|--|---------------------------|------------------|-----------------------|---------------------------------|----------------|--------------|---------|
|                  | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA   |  | ifest Doc N               | No.              | 2. Page 1 o           | of                              | 10             | 50           |         |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEC   | erator's Site Address (If diff<br>PRGIA POWER PLANT  |                           | ailing):         |                       | st Number                       | 6739           | 493          |         |
|                  | 241 RALPH MCGILL BLVD NE, I<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-5                                      |   | CROSSGATE RD.<br>IT WENTWORTH, GA  | 31407                     |                  |                       | B. State G                      | ienerator's I  | D            |         |
|                  | 5. Transporter 1 Company Name  | 1   | 6. US EPA ID   | Number                    |                  | C. State T            | ansporter's ID                  | )<br>)         |              |         |
|                  | 7. Transporter 2 Company Name  | ading.  | 8. US EPA ID   | Number                    |                  |                       | orter's Phone                   |                |              |         |
|                  |  |   |  |                           |                  |                       | ansporter's ID<br>orter's Phone |                |              |         |
|                  | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL  | Address   | 10. US EPA II  | Number                    |                  | G. State F            | acility ID                      |                |              |         |
|                  | 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |   |  |                           |                  | H. State F            | acility Phone                   | 912-9          | 27-6113      |         |
| G                | 11. Description of Waste Materials   |   |  | 12. Co                    | ntainers<br>Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol.            | I. Mi          | sc. Comments |         |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAM   | INATED WASTE  | B  | 738                       | DT               | 18                    |                                 |                |              |         |
| R                | WM Profile<br>b.   | # 375200GAKRA   |  |                           |                  |                       |                                 |                |              |         |
| TO               |  |   |  |                           | o Throne         |                       |                                 |                |              | esanisa |
| R                | c. V   | VM Profile #  |  |                           |                  |                       |                                 |                |              |         |
|                  | v  | VM Profile #  |  |                           |                  |                       |                                 |                |              |         |
|                  | d.   |   |  |                           |                  |                       | 11 11 11                        |                |              |         |
|                  | v  | VM Profile #  |  |                           |                  |                       |                                 |                |              |         |
|                  | J. Additional Descriptions for Mate  | A television to the property of the control of the |  | K. Dispos<br>Cell<br>Grid | sal Location     | 3201                  | 74                              | Level          | 65           | ,       |
|                  | 15. Special Handling Instructions and  | d Additional Information  |  |                           |                  |                       |                                 |                |              |         |
|                  | Purchase Order # GPC1076029  | 93  | EMERGENCY CON  | ITACT / PH                | ONE NO.:         |                       |                                 |                |              |         |
|                  | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr   | ibed materials are not h  | azardous wastes as defin   | ed by CFR F               | Part 261 or      | any applicab          | le state law, h                 | ave been fu    | lly and      |         |
|                  | accurately described, classified and printed Name  | packaged and are in prop  | per condition for transpor<br>Signature "On behal  |                           | ording to ap     | plicable regu         | ilations.                       | Month          | Day Y        | Year    |
| Т                | 17. Transporter 1 Acknowledgemen   | t of Receipt of Materials   | 0  |                           | 1                |                       |                                 | -0             | 101          | C       |
| R<br>A<br>N<br>S | Printed Name   | 29-er5  | Signature  | Upgs.                     | 4                |                       |                                 | Month          | Day 1        | Year    |
| P<br>O<br>R      | 18. Transporter 2 Acknowledgemen   | t of Receipt of Materials   | The same of the sa | // '                      |                  |                       |                                 | Month          | Day          | Year    |
| T<br>E<br>R      | Printed Name   |   | Signature  |                           |                  | R. Phi                |                                 | IVIOLITI       | Jay          | Cui     |
| FAC              | 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits | d treatment facility, tha   | t to the best of my knowle   | edge, the a               | bove-descr       | ibed waste v          | vas managed i                   | in complian    | ce with all  |         |
| 1<br>L           | 20. Facility Owner or Operator: Cer  | tification of receipt of n  | on-hazardous materials co  | overed by t               | this manifes     | t.                    |                                 | 1              |              |         |
| T                | Printed Name   | ^   | Signature  |                           |                  |                       |                                 | Month          | Day /        | Year    |
| L                | White- TREATMENT, STORAGE, DISF  | POSAL FACILITY COPY   | Blue- GENERATOR  | #2 COPY                   |                  | Y                     | ellow- GENER                    | ATOR #1 CO     | PY           |         |

Pink- FACILITY USE ONLY

Original Ticket# 1253767

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739494

Destination

PO

In

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/16/2018 12:44:05 Out 05/16/2018 12:44:05

Scale Inbound 1

Operator lbejaran lbejaran

Vehicle# 5307

Rate

0001037

Container

Billing #

Gen EPA ID NR

Driver Check#

> Bross Tare Net Tons

Tax

24080 1b 36580 1b 18, 29

60660 lb

Comments

Product LD% Qty

Amount Origin

PORTW

1 COAL ASH & COAL CO 100 18.29 Tons

UOM





| - 7              | WASTE MANAGEMENT   |                            |   |              |              |   |  |             |             |        |
|------------------|--|----------------------------|---|--------------|--------------|---|--|-------------|-------------|--------|
|                  | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA      |   | ifest Doc No | ).           | 2. Page 1 o                             | of   | 11:         | 5           | 0      |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER   | GEC                        | erator's Site Address (If diff<br>DRGIA POWER PLANT |              | ing):        | A. Manifes                              | st Number  | 6739        | 494         |        |
|                  | 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | POR                        | CROSSGATE RD.<br>RT WENTWORTH, GA                   | 31407        |              |   | B. State G   | enerator's  | ID          |        |
|                  | 4. Generator's Phone 404-5 5. Transporter 1 Company Name   | 06-1365                    | 6. US EPA ID  | Number       |              | C State Tr                              | ransporter's ID  |             |             |        |
|                  | 7. Transporter 2 Company Name  | joding                     | 8. US EPA ID  | Number       |              | 200000000000000000000000000000000000000 | orter's Phone  |             |             |        |
|                  | 7. Transporter 2 company Name  |                            | d. GSTAID   |              |              |   | ansporter's ID<br>orter's Phone  |             |             |        |
|                  | 9. Designated Facility Name and Site SUPERIOR LANDFILL   | Address                    | 10. US EPA II                                       | ) Number     |              | G. State F                              | acility ID   |             |             |        |
|                  | 3001 LITTLE NECK ROAD  |                            |   |              |              | H. State F                              | acility Phone  | 912-9       | 27-6113     | 3      |
|                  | Savannah, GA 31419   |                            |   |              |              |   |  |             |             |        |
| G                | 11. Description of Waste Materials   |                            |   | No.          | Type         | 13. Total<br>Quantity                   | 14. Unit<br>Wt./Vol.   | I. M        | isc. Commen | ts     |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAN   |                            | 5   | 207          | DI           | 18                                      | Victoria de la composición dela composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición dela composición de la composición dela composición dela composición dela composición dela composición dela composición dela composic |             |             |        |
| R                |  | # 375200GAKRA              |   |              |              |   |  |             |             |        |
| A                | b.   |                            |   | -3/4         |              | 4                                       |  | - T         |             |        |
| T                |  |                            |   |              |              |   |  |             |             |        |
| R                | C.   | VM Profile #               |   |              |              |   |  |             |             |        |
|                  |  |                            |   |              |              |   |  |             |             |        |
|                  | The state of the s | VM Profile #               | Carly Bayers  | Proposition  |              |   |  |             | 211         | ning - |
|                  | d.   |                            |   |              |              |   | 1  |             |             |        |
|                  |  |                            |   |              |              |   |  |             |             |        |
|                  |  | VM Profile #               |   | K. Disposa   | Location     |   |  |             |             |        |
|                  | J. Additional Descriptions for Mate  | riais Listed Above         |   | K. Dispusa   | n Location   | 171                                     | 76   |             | 10          |        |
|                  |  |                            |   | Cell         | 1            | 1300                                    | 11   | Level       | 01          |        |
|                  |  |                            |   | Grid         | 1 4          | 276                                     | 32   |             |             |        |
|                  | 15. Special Handling Instructions an   |                            |   | TACT / DUO   | NIE NO       |   |  |             |             |        |
| W                | Purchase Order # GPC107602   | 93                         | EMERGENCY COI                                       | VIACI / PHU  | THE NU.:     |   |  |             |             |        |
|                  | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-description  | ihad matarials are not h   | azardous wastes as defin                            | ed by CFR Pa | ert 261 or : | any applicah                            | le state law. ha   | ave been fu | illy and    |        |
|                  | accurately described, classified and   | packaged and are in pro    | per condition for transpor                          | tation accor | ding to ap   | plicable regu                           | ulations.  |             |             |        |
|                  | Printed Name   |                            | Signature "On beha                                  | f of"        |              |   |  | Month       | Day         | Year / |
|                  | Btilipourch  | I I Danish of Advisor 1    | D F   |              |              |   |  |             | $\Pi(t)$    | 10     |
| T<br>R           | 17. Transporter 1 Acknowledgemer Printed Name  | it of Receipt of Materials | Şignature   |              | 1            | 11                                      |  | Month       | Day         | Year   |
| A<br>N<br>S<br>P | 18. Transporter 2 Acknowledgemer   | SMall                      | V   |              | 1            | W                                       | _  | 15          | 16          | 1/8    |
| O<br>R           | Printed Name   | it of receipt of indeering | Signature   |              |              |   |  | Month       | Day         | Year   |
| E<br>R           |  |                            |   |              |              |   |  |             |             |        |
| -                | 19. Certificate of Final Treatment/D   | isposal                    | - 1   |              |              |   | 0  |             |             |        |
| F<br>A<br>C      | I certify, on behalf of the above liste<br>applicable laws, regulations, permit  | d treatment facility, tha  | t to the best of my knowl<br>tes listed above.      | edge, the ab | ove-descri   | bed waste \                             | was managed i  | n complian  | ice with al | l.     |
| L                | 20. Facility Owner or Operator: Ce   | tification of receipt of n | on-hazardous materials c                            | overed by th | is manifes   | t.                                      |  | -           |             |        |
| T                | Printed Name   | UNB3                       | Signature   | 1            |              |   |  | Month       | Day         | Year   |
| _                | White- TREATMENT, STORAGE, DIS   | POSAL FACILITY COPY        | Blue- GENERATOR                                     | #2 COPY      |              | Υ                                       | ellow- GENERA  | ATOR #1 CC  | PY          |        |

Pink- FACILITY USE ONLY



Original Ticket# 1253773

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739495

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/16/2018 12:57:40

Out 05/16/2018 12:57:40

Scale

Inbound 1

Operator lbejaran

lbejaran

Vehicle# 36

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

Gross Tare

62720 1b 25980 lb

Net Tons 36740 1b 18.37

Comments

Amount Origin Tax UOM Rate Qty LD% Product PORTW 1 COAL ASH & COAL CD 100 18.37 Tons



| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA I                                    |  | ifest Doc N  | 0.                        | 2. Page 1 c                    | of                           | 111                | 11      |
|--|--|--|--------------|---------------------------|--------------------------------|------------------------------|--------------------|---------|
| 3. Generator's Mailing Address: GEORGIA POWER  |  | ator's Site Address (If diff<br>RGIA POWER PLANT                           |              | ling);                    | A. Manifes                     |                              | 6739495            | 7       |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | BIN#10221 155 0  | CROSSGATE RD.  |              |                           | Wi                             | MNA<br>B. State G            | enerator's ID      |         |
| 5. Transporter 1 Company Name  | 100-1303   | 6. US EPA ID   | Number       |                           |                                | ansporter's ID               |                    |         |
| 7. Transporter 2 Company Name  | T same   | 8. US EPA ID   | Number       |                           | E. State Tr                    | ansporter's ID               |                    |         |
| 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | e Address  | 10. US EPA II  | ) Number     |                           |                                |                              | 912-927-61         | 13      |
| H. State Facility Phone 912-927-6113  Savannah, GA 31419  12. Containers 13. Total 14. Unit Wt./vol. 1. Misc. Comments  13. Total Wt./vol. 1. Misc. Comments  14. Unit Wt./vol. 1. Misc. Comments  15. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  WM Profile #  15. WM Profile #  16. WM Profile #   | nents  |  |              |                           |                                |                              |                    |         |
| a. COAL ASH& COAL CONTAM   |  | Br   | 34           | DT                        | 18                             | Wt./you                      |                    |         |
| b. WM Profile  | # 375200GAKRA  |  |              |                           |                                |                              |                    |         |
| The state of the s | WM Profile #   |  |              |                           |                                |                              |                    |         |
| c.   | NM Profile #   |  |              |                           |                                |                              |                    |         |
| d.   | WM Profile #   |  |              |                           |                                |                              |                    | - Pay   |
| J. Additional Descriptions for Mate  | erials Listed Above  |  | Cell         | al Location               | 1117                           | 5 LUE                        | Level 3            | 2       |
| 15. Special Handling Instructions an   | d Additional Information                                   |  | Grid /       | -) 2                      | 0/ 6                           |                              | E                  | 1654    |
| Purchase Order # GPC107602   | 193  | EMERGENCY COI  | NTACT / PH   | ONE NO.:                  |                                |                              |                    |         |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and  | ribed materials are not ha                                 | azardous wastes as defin<br>er condition for transpo<br>Signature "On beha | rtation acco | art 261 or<br>ording to a | any applicab<br>oplicable regi | le state law, h<br>ulations. | ave been fully and | Year    |
| Printed Name B + Npourch   |  | RI   |              |                           | -                              |                              | 5 16               | 17      |
|  | 1411   | Signature  | Je.          | Elin                      |                                |                              | Month Day          | Year    |
| 18. Transporter 2 Acknowledgeme  | nt of Receipt of Materials                                 | Signature  |              |                           | W T                            |                              | Month Day          | Year    |
| 19. Certificate of Final Treatment/I I certify, on behalf of the above liste applicable laws, regulations, permit  | ed treatment facility, that<br>ts and licenses on the date | es listed above.   |              |                           |                                | was managed                  | in compliance with | n all   |
| 20. Facility Owner or Operator: Ce   | rtification of receipt of no                               | on-hazardous materials o   | overed by t  | his manife                | st.                            |                              | Month / Da         | / /Year |
| Printed Name   |  | (1)  |              |                           |                                |                              | 5/6                | 18      |
| White- TREATMENT, STORAGE, DIS   |  | Blue- GENERATOR<br>Gold- TRANSPORTE  |              |                           | Y                              | ellow- GENER.                | ATOR #1 COPY       |         |



Original Ticket# 1253779

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# 38

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739496

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

Out 05/16/2018 13:07:59

Scale In 05/16/2018 13:07:59 Inbound 1

Operator RB

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

RB

Gross Tare

64260 1b 27960 lb 36300 16

Net 18.15 Tons

Comments

Origin Amount LIOM Rate Tax LD% Qty Product PORTW 18.15 Tons 1 COAL ASH & COAL CO 100



| NON-HAZARDOUS MANIFEST  | 1. Generator's US E                             |   | fest Doc No           | 0.                          | 2. Page 1 c                   | of   | 10'0                     | 1   |
|---|---|---|-----------------------|-----------------------------|-------------------------------|--|--------------------------|-----|
| 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374   | BIN#10221 15                                    | A A<br>enerator's Site Address (If diffe<br>EORGIA POWER PLANT<br>55 CROSSGATE RD.<br>DRT WENTWORTH, GA | KRAFT                 | ling):                      | A. Manifes                    | MNA  | 6739496<br>enerator's ID | 0   |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | 606-1365<br>Coding                              | 6. US EPA ID I  |                       |                             | D. Transpo                    | ansporter's ID<br>orter's Phone<br>ansporter's ID<br>orter's Phone |                          |     |
| 9. Designated Facility Name and Sit<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | e Address                                       | 10. US EPA ID   | Number                |                             | G. State Fa                   | acility ID<br>acility Phone  | 912-927-6113             |     |
| 11. Description of Waste Materials  |   |   | 12. Con<br>No.        | tainers<br>Type             | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.   | I. Misc. Comment         | s   |
| a. COAL ASH& COAL CONTAN  | //INATED WASTE<br>e# 375200GAKR                 | BI  | 134                   | DT                          | 18                            |  |                          |     |
| b.  | WM Profile #                                    |   |                       |                             |                               |  |                          |     |
| <b>d.</b>   | WM Profile #  WM Profile #  erials Listed Above |   | K. Dispos  Cell  Grid | al Location                 | 370                           | 179  | Level                    |     |
| 15. Special Handling Instructions a   | nd Additional Informat                          | tion  |                       |                             | XII                           | 1,0  |                          |     |
| Purchase Order # GPC10760   | 293   | EMERGENCY COM   | TACT / PH             | ONE NO.:                    |                               |  |                          |     |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-des accurately described, classified and Printed Name  | packaged and are in p                           | Signature "On behal   | tation acco           | Part 261 or<br>ording to ap | any applicab<br>oplicable reg | le state law, h<br>ulations.                                       | Month Day                | Yea |
| 17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  18. Transporter Printed | eth   | Signature   | 1                     |                             |                               |  | Month Day                | Yea |
| Printed Name  19. Certificate of Final Treatment/   | Disposal  | Signature   | vdan the -            | hovo doca                   | rihad wasto                   | was managed  | Month Day                | Yea |
| I certify, on behalf of the above lis applicable laws, regulations, perm  | its and licenses on the                         | dates listed above.   |                       |                             | - 1                           | was managed  | in compliance with a     |     |
| 20. Facility Owner or Operator: C Printed Name  | ertification of receipt of                      | Signature   | 1                     | nis manife                  |                               |  | Month Day                | yes |
| White- TREATMENT, STORAGE, DI   |   | Blue- GENERATOR Gold- TRANSPORTE  |                       |                             | Y                             | 'ellow- GENER  | ATOR #1 COPY             |     |



Original Ticket# 1253781

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/16/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739497

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

Out 05/16/2018 13:11:41

Scale In 05/16/2018 13:11:41

Inbound 1

Operator RB

Gross Tare

60400 lb 25340 1b 35060 lb

Net Tons 17.53

Comments

MANAGEMENT

Vehicle# L10 Container Driver

Gen EPA ID NR

Billing # 0001037

Check#

Origin Rate Tax Amount LD% Qty UOM Product SAVANNAH 1 COAL ASH & COAL CO 100 17.53 Tons



### WAND NON-HAZARDOUS MANIFEST

| - 1  | WASTE MANAGEMENT   |   |  |                           |  | 2 2 2                 |                      |  |
|--|--|---|--|---------------------------|--|-----------------------|----------------------|--|
|  | NON-HAZARDOUS MANIFEST  1. Generator's   | US EPA<br>N / A                         |  | ifest Doc N               | lo.                                    | 2. Page 1 c           | of                   | 12:30  |
| (  | B. Generator's Mailing Address:<br>GEORGIA POWER   | GEO                                     | rator's Site Address (If diffe<br>RGIA POWER PLANT   |                           | ailing):                               | A. Manifes            | MNA                  | 6739497  |
| 1  | 241 RALPH MCGILL BLVD NE, BIN#10221<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-506-1365   | 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | CROSSGATE RD.<br>T WENTWORTH, GA   | 31407                     |  |                       | B. State G           | enerator's ID  |
|  | 5. Transporter 1 Company Name  |   | 6. US EPA ID   | Number                    | 7.5                                    |                       |                      |  |
|  | 5. Transporter 1 Company Name  |   | 0.   |                           |  | C. State Ti           | ransporter's ID      |  |
| 1  | "nasial Goodin   | (A                                      |  |                           |  | D. Transpo            | orter's Phone        |  |
| ١.   | 7. Transporter 2 Company Name  |   | 8. US EPA ID   | Number                    |  |                       |                      |  |
|  |  | 1                                       |  |                           |  |                       | ransporter's ID      |  |
|  |  |   |  |                           | 1000                                   | F. Transpo            | orter's Phone        |  |
|  | 9. Designated Facility Name and Site Address   |   | 10. US EPA IC  | Number                    |  |                       |                      |  |
|  | SUPERIOR LANDFILL  |   |  |                           |  | G. State F            | acility ID           |  |
|  | 3001 LITTLE NECK ROAD  |   |  |                           |  | H. State F            | acility Phone        | 912-927-6113   |
| 1 0  | Savannah, GA 31419   |   |  | 110                       |  |                       |                      |  |
|  |  |   |  | National Property         |  |                       |                      |  |
| -  | 11. Description of Waste Materials   | Y VI                                    |  | 12. Co<br>No.             | ontainers<br>Type                      | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol. | I. Misc. Comments  |
| 1  | a. COAL ASH& COAL CONTAMINATED WAS   | TE                                      |  | 2                         |  |                       |                      | THE STATE OF THE S |
| 3  | a. COAL ASH& COAL CONTAININATED WAS  | ,,,,                                    | 4  | 210                       | 177                                    | 17                    |                      |  |
| à,   | WM Profile # 375200G   | V K D V                                 | 01   |                           |  |                       |                      |  |
| L  |  | AKKA                                    |  |                           |  |                       |                      |  |
|  | b.   |   |  |                           | 1                                      | V 18                  |                      |  |
|  |  |   |  |                           |  |                       |                      |  |
| L  | WM Profile #   |   |  |                           |  |                       |                      | A COLLEGE OF THE SERVICE OF THE SERV |
|  | C.   |   |  |                           |  | 1 2                   |                      |  |
|  | WM Profile #   |   |  |                           |  |                       |                      |  |
| +  | d.   | # TE                                    |  |                           | 11 11 11 11 11 11 11 11 11 11 11 11 11 |                       |                      |  |
|  |  |   |  |                           | 1-1                                    |                       |                      |  |
|  |  |   |  |                           |  |                       |                      |  |
| -  | WM Profile # J. Additional Descriptions for Materials Listed Above   | VΩ                                      |  | K. Dispo                  | sal Location                           |                       |                      |  |
|  | 1. Additional Descriptions for Materials Listed Abo  | 55.                                     |  |                           | - 1                                    | 1171                  | 174                  | (1   |
|  |  |   |  | Cell                      | / A                                    | 1)6                   | 16                   | Level  |
| W  |  |   |  | Grid                      | 1                                      | AL                    | 31                   |  |
|  | 15. Special Handling Instructions and Additional Info  | rmation                                 | 1  |                           |  |                       |                      |  |
|  |  |   |  |                           |  |                       |                      |  |
|  |  |   |  |                           |  |                       |                      |  |
|  | Purchase Order # GPC10760293   |   | EMERGENCY CO   | NTACT / PI                | HONE NO.:                              |                       |                      |  |
| Ī  | 16. GENERATOR'S CERTIFICATE:   |   |  |                           |  |                       |                      |  |
|  | the above described materials a  | are not h                               | nazardous wastes as defin  | ed by CFR                 | Part 261 or                            | any applical          | ole state law, h     | nave been fully and  |
| -  | accurately described, classified and packaged and ar   | re in pro                               | per condition for transpo  | rtation acc               | cording to ap                          | plicable reg          | ulations.            | Month Day Year   |
|  | accurately described, classified and packages are  |   | Signature "On beha   | lt of"                    |  |                       |                      | 1/0 /8   |
|  | Printed Name   |   |  |                           |  |                       |                      | THOSE I I  |
|  | Printed Name D + 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1   | 200                                     | 100  |                           |  |                       |                      |  |
|  | Printed Name   | Material                                |  |                           |  |                       |                      | Month Day Year   |
| R<br>A   | Printed Name D + 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1   | Material                                | s<br>Signature   | 1/1                       | in M                                   | 21                    |                      | Month Day Year   |
| R<br>A<br>N<br>S                               | Printed Name  17. Transporter 1 Acknowledgement of Receipt of No. 10 Printed Name    Columbia   Col |   | Signature  | Aca                       | mple                                   | 21                    |                      | Month Day Year   |
| RANSPO   | Printed Name  17. Transporter 1 Acknowledgement of Receipt of Name  18. Transporter 2 Acknowledgement of Receipt of Name   |   | Signature  | Aca                       | infil                                  | 21                    |                      | 15 1/01/   |
| R<br>T   | Printed Name  17. Transporter 1 Acknowledgement of Receipt of No. 10 Printed Name    Columbia   Col |   | Signature  | Aca                       | mu                                     | 21-                   |                      | 5 161  |
| R<br>A<br>N<br>S<br>P<br>O<br>R                | Printed Name  17. Transporter 1 Acknowledgement of Receipt of Name  18. Transporter 2 Acknowledgement of Receipt of Name   |   | Signature  | Aca                       | mple                                   | 21-                   |                      | 5 161  |
| RANSPORTE                                      | Printed Name  17. Transporter 1 Acknowledgement of Receipt of No. 18. Transporter 2 Acknowledgement of Receipt of No. 19. Printed Name   | Material                                | Signature<br>s<br>Signature  | Acia                      |  | 01-                   |                      | Month Day Year   |
| R<br>A<br>N<br>S<br>P<br>O<br>R<br>T<br>E<br>R | Printed Name  17. Transporter 1 Acknowledgement of Receipt of Northead Name  18. Transporter 2 Acknowledgement of Receipt of Northead Name  19. Certificate of Final Treatment/Disposal  Light on hehalf of the above listed treatment face  | Material                                | Signature  Signature  Signature  at to the best of my know   | Action and the ledge, the |  | ribed waste           | was managed          | Month Day Year   |
| R<br>A<br>N<br>S<br>P<br>O<br>R<br>T<br>E<br>R | Printed Name  17. Transporter 1 Acknowledgement of Receipt of Management Of Receipt Of Managemen | Material                                | Signature  Signature  at to the best of my know tes listed above.  | - 0                       | above-descr                            |                       | was managed          | Month Day Year   |
| RANSPORTE                                      | Printed Name  17. Transporter 1 Acknowledgement of Receipt of Northead Name  18. Transporter 2 Acknowledgement of Receipt of Northead Name  19. Certificate of Final Treatment/Disposal  Light on hehalf of the above listed treatment face  | Material                                | Signature  Signature  Signature  at to the best of my know tes listed above.  non-hazardous materials of | - 0                       | above-descr                            |                       | was managed          | Month Day Year   |
| R<br>A<br>N<br>S<br>P<br>O<br>R<br>T<br>E<br>R | Printed Name  17. Transporter 1 Acknowledgement of Receipt of Management Of Receipt Of Managemen | Material                                | Signature  Signature  at to the best of my know tes listed above.  | - 0                       | above-descr                            |                       | was managed          | Month Day Year   |

Pink- FACILITY USE ONLY



Original Ticket# 1253782

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739498

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/16/2018 13:13:33 In Out 05/16/2018 13:13:33

Scale Inbound 1 Operator RB RB

56660 1b Gross 25240 lb Tare 31420 lb Net 15.71

Comments

WASTE MANAGEMENT

Vehicle# LØ7

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

| Clare | duct   | LD%  | Qtv   | MOU  | Rate | Tax  | Amount   | Origin  |
|-------|--|--|-------|------|------|--|--|---|
| FILM  | 3 5.64 to  | 1577(477) 7.5-                                 |       |      |      | ment recent despite and the second design parties about the second | ar annual marter, compa alphanic designs designs assure profess designs designs designs designs. | t lates that seem over here aren more man, and found some print have been |
| ****  | anne plant, brick backs, below sold damp come better come name boom bloom from comes their sides b | die trans arm was same trans and and trans the |       | 200  |      |  |  | PORTW   |
| 1     | COAL ASH & COAL  | CO 100   | 15.71 | Tons |      |  |  | r On rec  |

Total Tax Total Ticket

Tons



| WASTE WARDENEET   | 1. Generator's US EPA                            | ID No. Man  | ifest Doc No.           | 2. Page 1 o                           | f                               |                           |
|---|--|---|-------------------------|---------------------------------------|---------------------------------|---------------------------|
| NON-HAZARDOUS MANIFEST  | N / /  |   |                         |                                       |                                 | 12:35                     |
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE,   | Gene<br>GEC<br>BIN#10221 155                     | erator's Site Address (If diffe<br>PRGIA POWER PLANT<br>CROSSGATE RD.<br>RT WENTWORTH, GA | KRAFT                   | A. Manifes                            | ANA                             | 6739498<br>Generator's ID |
| ATLANTA, GA 30308-3374  4. Generator's Phone 404-5  | 06-1365  | () WEITH CHILL  |                         |                                       |                                 |                           |
| 5. Transporter 1 Company Name   | iradina  | 6. US EPA ID  |                         |                                       | ansporter's II<br>orter's Phone | )                         |
| 7. Transporter 2 Company Name   | 9  | 8. US EPA ID  | V <sub>a</sub>          |                                       | ansporter's II<br>rter's Phone  |                           |
| 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD  | Address  | II. USTRAL  | ALUMBE.                 | G. State Fa                           | acility ID                      | 912-927-6113              |
| Savannah, GA 31419  |  |   |                         |                                       |                                 |                           |
| 11. Description of Waste Materials  |  |   | 12. Containers No. Type | 13. Total Quantity                    | 14. Unit<br>Wt./Vol.            | I. Misc. Comments         |
| a. COAL ASH& COAL CONTAN  | INATED WASTE                                     | J   | 207 D                   | 1 17                                  |                                 |                           |
| WM Profile  | # 375200GAKRA                                    | 10.7  |                         |                                       |                                 |                           |
| b.  | WM Profile #                                     |   |                         |                                       |                                 |                           |
| c.  |  |   |                         |                                       |                                 |                           |
|   | WM Profile #                                     |   |                         |                                       |                                 |                           |
| d.  J. Additional Descriptions for Mate   | WM Profile #                                     |   | K. Disposal Loca        | tion                                  | 119                             |                           |
| J. Additional Descriptions for Mac  | eriais Listeu Above                              |   | Cell<br>Grid            | N329                                  | 32                              | Level                     |
| 15. Special Handling Instructions ar  | nd Additional Informatio                         | n   |                         | ~\ 14                                 |                                 |                           |
| Purchase Order # GPC107602  | 293  | EMERGENCY CO  | NTACT / PHONE N         | O.:                                   |                                 |                           |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descaccurately described, classified and   | cribed materials are not packaged and are in pro | oper condition for transpo  | reaction according to   | 1 or any applicat<br>o applicable reg | le state law,<br>ulations.      |                           |
| Printed Name  D 17. Transporter 1 Acknowledgeme   |  | Signature "On beha  | If of"                  |                                       |                                 | Month Day Year            |
| 17. Transporter 1 Acknowledgement   | Int of Receipt of Materia                        | Signature   | 1,60                    |                                       |                                 | Month Day Year            |
| 18. Transporter 2 Acknowledgeme   | ent of Receipt of Materia                        | Signature   |                         |                                       |                                 | Month Day Year            |
| 19. Certificate of Final Treatment/ I certify, on behalf of the above list applicable laws, regulations, perm 20. Facility Owner or Operator: C | ted treatment facility, th                       | ates listed above.  |                         |                                       | was manage                      | d in compliance with all  |
| White- TREATMENT, STORAGE, DI   | SPOSAL FACILITY COPY                             | Blue- GENERATOR   | R #2 COPY               |                                       | Yellow- GENE                    | RATOR #1 COPY             |

Pink- FACILITY USE ONLY



Original Ticket# 1253819

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier NUMBERS INTERPRISE Vehicle# 5307 Volume

=+ - d.

Ticket Date 05/16/2018

Payment Type Credit Account .

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739499

Destination

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/16/2018 14:27:53 Inbound 1

Dut 05/16/2018 14:27:53

Scale

Operator lbejaran

Container Driver

Billing # 0001037

Gen EPA ID NR

Check#

lbejaran

Gross Tare

> Net Tons

61420 lb 24080 1b 37340 1b 18.67

Comments

Origin Amount Tax MOU Rate LD% Qty Product

1 COAL ASH & COAL CO 100 18.67 Tons

PORTW



| WASTE MA   | N-HAZARODUS MANIFEST  1. Generator's US EPA ID No. N / A  N / A  N-HAZARODUS MANIFEST  N-HAZARODUS MANIFEST  Service Management of Site Address is efferwed base nating: GEORGIA POWER INTENDRET, GA 31407  REPRINT (GRILL BLVD NE, BINPI 10221  ALPH MCGILL BLVD NE, BINPI 10221  SECORGIA POWER PLANT KRAFT  SE CROSSATE RD. PORT WENTWORTH, GA 31407  B. State Generator's ID  D. Transporter's ID  D. Transporter's Dione  E. State Transporter's ID  F. Transporter's Phone  G. State Transporter's ID  F. Transporter's Phone  B. US EPA ID Number  E. State Transporter's ID  F. Transporter's Phone  G. State Transporter's ID  F. Transporter's Phone  Secription of Waste Materials  AL ASH& COAL CONTANTINATED WASTE  WM Profile 8  WM Profile 9  WM Profile 8  WM Profile 9  WM Prof |  |  |                         |            |  |                   |   |                |            |           |
|--|--|--|--|-------------------------|------------|--|-------------------|---|----------------|------------|-----------|
| NON-HA   | AZARDOUS MANIFEST  | The state of the s |  | Manife                  | st Doc No  | ).   |                   |   | 1:4            | 5          |           |
|  |  | All the Carry  |  |                         |            | ing):  |                   |   | 67394          | 99         | - 1       |
| Control of the last of the las |  | . BIN#10221  | 155 CROSSGAT   | E RD.                   |            |  | 7.75              | B. State C  | enerator's ID  |            |           |
|  |  |  | PORT WENTWO  | ORTH, GA 3              | 1407       |  | Mark.             |   |                |            |           |
|  |  | 506-1365   | 1  |                         |            |  |                   |   |                |            |           |
| 5. Transpor  | rter 1 Company Name  | 7  | 6.   | US EPA ID No            | mber       |  | C State Tr        | ansnorter's II  |                |            |           |
| 10   | 05/01/   | Londin   | G  |                         |            |  | Z III             |   |                |            |           |
| 7. Transpo   | rter 2 Company Name  | Truchia  | 8.   | US EPA ID No            | ımber      |  |                   |   |                |            |           |
|  |  |  |  |                         |            |  | - ADT CONSUME NO. | The Production of the Strategy and Strategy | ,              |            |           |
| 9 Designa  | ted Facility Name and Si   | te Address   | 10.  | US EPA ID N             | lumber     |  |                   |   |                |            |           |
|  |  |  |  |                         |            |  | G. State Fa       | acility ID  |                |            |           |
| 3001 LIT   | TLE NECK ROAD  |  |  |                         |            |  | H. State Fa       | acility Phone   | 912-92         | 7-6113     |           |
| Savanna  | ah, GA 31419   |  |  |                         |            |  |                   |   |                |            |           |
|  |  |  |  |                         | 12. Con    | tainers  | 13. Total         | 14. Unit  | I Misc         | Comments   |           |
|  |  |  |  |                         | No.        | Туре   | Quantity          | Wt./Vol.  |                |            |           |
| a. COAL  | ASH& COAL CONTA  | MINATED WAS  | TE   | 5                       | ME         | M  | 17                |   | 1-3-0          |            |           |
|  |  |  | A V D A  | ->                      | 7          |  |                   |   |                |            |           |
| b.   | WM Prof  | ile# 3/3200G   | AKNA   |                         |            |  |                   |   |                |            |           |
| U.   |  |  |  |                         |            |  |                   |   |                |            | -         |
|  |  | WM Profile #   |  |                         |            |  |                   |   |                |            | 100       |
| c.   |  |  |  |                         |            | N. Park  |                   |   |                |            |           |
|  |  |  |  |                         |            |  |                   |   |                |            | n er miga |
|  |  | WM Profile #   |  |                         |            |  |                   |   |                |            |           |
| d.   |  |  |  |                         |            |  | The second        |   | WEN SA         |            |           |
|  |  | WM Profile #   |  |                         |            |  |                   |   |                |            | District. |
| J. Additio   | onal Descriptions for Ma   |  | <i>v</i> e   |                         | K. Dispos  | al Location  | i                 |   |                |            | 77        |
|  |  |  |  | -                       | Coll #     | 3 1  | 0100              | 171   | Level 2        | 7 (-       | 1         |
|  |  |  |  |                         | - 1        | 5/   | 011               | lusti   | (6)            |            | 0         |
| 15. Speci  | ial Handling Instructions  | and Additional Info  | rmation  |                         |            |  |                   |   |                |            | -         |
|  |  |  |  |                         |            |  |                   |   |                |            |           |
| 1 - 11 -   |  |  |  | POENCY CONT             | ACT / DU   | ONE NO :   |                   |   |                |            |           |
| The state of the s | The wife of the control of the contr | 0293   | EME  | RGENCY CON              | ACI / PH   | ONE NO   | 1000              | No. of the last   |                |            |           |
| 16. GENI   | ERATOR'S CERTIFICATE:  | th d atarials  | ero not hazardous wa   | stes as defined         | l by CFR F | Part 261 or  | any applicab      | le state law,   | have been ful  | ly and     |           |
| I hereby   | certify that the above-de<br>ly described, classified ar   | nd packaged and a  | e in proper condition  | for transport           | ation acce | ording to a  | pplicable reg     | ulations.   |                |            | 1 0       |
| Printed N  | lame   |  | Signatu  | re "On behalf           | of"        |  |                   |   |                | //o        | Year      |
| 133  | Filipovich   |  | 1 0  |                         | -          | 1/   |                   |   | 10             | 14         | 11        |
|  |  | nent of Receipt of I   | Viateriais   | ire \                   | . 1        | 161  | A                 | B. 10.7. 7  | Month          | Day        | Yea       |
| Printe   | ed Name  | Smo  | at V   | TO TO                   | W          | UN   | 11                |   | 5              | 16         | 1         |
| N V  | sporter 2 Acknowledgen   | nent of Receipt of I   | Materials  |                         |            |  |                   |   |                |            | 1         |
| 18. Tran   |  |  | Signatu  | ure                     |            |  |                   |   | Month          | Day        | Yea       |
|  | ed Name  |  | A NOTE OF THE PARTY OF THE PART | -15, 114                | -41        |  |                   | Million   |                |            |           |
| Printe   | ed Name  |  |  |                         |            | The second secon |                   |   |                |            |           |
| Printe   | rg v CF  | t/Disposal   |  |                         |            |  |                   |   | a lake         |            |           |
| 19. Cert   | ificate of Final Treatmen  | isted treatment fac  | ility, that to the best  | of my knowle            | dge, the a | bove-desc  | ribed waste       | was manage  | d in complian  | ce with al | 1.        |
| 19. Cert   | ificate of Final Treatmen<br>on behalf of the above I  | isted treatment fac<br>mits and licenses o   | n the dates listed abo   | ove.                    |            |  |                   | was manage  | d in compliand | ce with al | l.        |
| 19. Certify, applicab  | ificate of Final Treatmen<br>on behalf of the above I<br>lle laws, regulations, pen<br>lity Owner or Operator:   | isted treatment fac<br>mits and licenses o   | eipt of non-hazardou   | ove,<br>is materials co |            |  |                   | was manage  | d in compliand | ce with al | - 1/      |
| 19. Certify, applicab  | ificate of Final Treatmen<br>on behalf of the above I  | isted treatment fac<br>mits and licenses o   | n the dates listed abo   | ove,<br>is materials co |            |  |                   | was manage  | 19             | 16         | (Yea      |

Pink-FACILITY USE ONLY



Original Ticket# 1253826

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier

Ticket Date 05/16/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739500

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/16/2018 14:44:41 In Out Ø5/16/2018 14:44:41

Scale

Inbound 1

Operator lbejaran lbejaran

B AND N

0001037

Vehicle# 36

Billing #

Gen EPA ID NR

Container Driver

Check#

Gross Tare Net

Tons

64500 15 25980 lb 38520 1b 19.26

Comments

Amount Origin Tax Rate HOL LD% Qty Product PORTW

COAL ASH & COAL CO 100

19.26 Tons

C Pettra



# WWW. NON-HAZARDOUS MANIFEST

| NON-HAZARDOUS MANIFEST   | . Generator's US EPA I                          |                                | wanir       | est Doc No.             | 2. Page 1 o  |                                 | 200                      |
|--|---|--------------------------------|-------------|-------------------------|--|---------------------------------|--------------------------|
| Generator's Mailing Address:   | Gener   | rator's Site Add<br>RGIA POWEF |             |                         | A. Manifes   | MNA                             | 6739500                  |
| 41 RALPH MCGILL BLVD NE, BIN<br>TLANTA, GA 30308-3374<br>Generator's Phone 404-506   | POR   | CROSSGATE<br>T WENTWOF         |             | 1407                    |  | B. State G                      | enerator's ID            |
| . Transporter 1 Company Name   | 75.0  | 6. U                           | IS EPA ID N | umber                   |  | ansporter's ID<br>orter's Phone |                          |
| . Transporter 2 Company Name   | Samy  | 8. L                           | JS EPA ID N | umber                   | E. State Tr  | ransporter's ID                 |                          |
| D. Designated Facility Name and Site Ac<br>SUPERIOR LANDFILL   | ddress  | 10.                            | US EPA ID   | Number                  | G. State F   | acility ID                      | 242 227 6112             |
| 3001 LITTLE NECK ROAD<br>Savannah, GA 31419  |   |                                |             |                         | H. State F   | acility Phone                   | 912-927-6113             |
| 11. Description of Waste Materials   | LATED MACTE                                     |                                | <u> </u>    | 12. Containers No. Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.            | I. Misc. Comments        |
| a. COAL ASH& COAL CONTAMIN   | a TERROS CAMBA                                  |                                | I           | 13/P                    |  |                                 |                          |
| <b>).</b>  |   |                                |             |                         |  |                                 |                          |
| c. Wh  | Λ Profile #                                     | y de la constant               |             |                         |  |                                 |                          |
| WI   | VI Profile #                                    |                                |             |                         |  |                                 |                          |
| J. Additional Descriptions for Materi  | M Profile #<br>als Listed Above                 |                                |             | K. Disposal Loca        | 20/2   | 9606                            | kend 354. C              |
| 15. Special Handling Instructions and  | Additional Information                          | n                              |             |                         |  |                                 |                          |
| Purchase Order # GPC1076029  | 3   | EMER                           | GENCY CO    | NTACT / PHONE N         | 0.:  |                                 |                          |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-describ accurately described, classified and page             | oed materials are not<br>ackaged and are in pro | oper condition i               | or transpor | tation according        | 1 or any applica<br>to applicable reg  | ble state law,<br>gulations.    | have been fully and      |
| Printed Name   |   | Signature                      | e "On beha  | f of"                   |  |                                 | 5/4/                     |
| 17. Transporter 1 Acknowledgement Printed Name   | IN  | Signatur                       | e l         | Pitter                  | - Company - Comp |                                 | Month Day                |
| 18. Transporter 2 Acknowledgement<br>Printed Name  | or veceibt or mareria                           | Signatur                       | e           |                         |  |                                 | Month Day                |
| 19. Certificate of Final Treatment/Di<br>I certify, on behalf of the above listed<br>applicable laws, regulations, permits | treatment facility, th                          | ates listen abov               | e.          |                         |  | was manage                      | d in compliance with all |
| 20. Facility Owner or Operator: Cert   | tification of receipt of                        | non-hazardous<br>Signatu       | materials   | overed by this m        | anifest.   | H Sy                            | Month Day                |

Pink- FACILITY USE ONLY



Original Ticket# 1253829

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/16/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6739501

Destination PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/16/2018 14:49:35 Out 05/16/2018 14:49:35

Scale Inbound 1

Operator lbejaran lbejaran

Vehicle# 38

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

64560 lb Gross 27960 lb Tare 36600 1b Net 18.30 Tons

Comments

Origin Rate Tax Amount UOM -Qty LD% Product PORTW

1 COAL ASH & COAL CO 100

18.30 Tons



### WWW. NON-HAZARDOUS MANIFEST

|  |  | DA ID Manie  | est Doc N  | 0                           | 2. Page 1 c  | +                                      |                                     |             |
|--|--|--|--|-----------------------------|--|--|-------------------------------------|-------------|
| NON-HAZARDOUS MANIFEST   | 1. Generator's US E  |  | est Doc N  | 0.                          |  |  | 2:1                                 | 0           |
| GEORGIA POWER  | GI   | nerator's Site Address (If differ<br>ORGIA POWER PLANT<br>S CROSSGATE RD.  |  | iling):                     | A. Manifes   | MNA                                    | 673950<br>Generator's ID            | 01          |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | PC   | ORT WENTWORTH, GA  | 31407  |                             |  | B. State C                             | ienerator 310                       |             |
|  | 06-1365  | 6. US EPA ID N   | lumber   |                             |  |  |                                     |             |
| 5. Transporter 1 Company Name  | Indian   | 6. USEFAIDIN   | lullibei   |                             | The state of the s | ansporter's ID<br>orter's Phone        | )                                   |             |
| 7. Transporter 2 Company Name  | JULATIO  | 8. US EPA ID N   | lumber   |                             |  |  |                                     |             |
| . Transporter 2 company Nume   | C  |  |  |                             | NAME OF THE PROPERTY OF THE PR | ansporter's II<br>orter's Phone        |                                     |             |
| 9. Designated Facility Name and Site   | e Address  | 10. US EPA ID  | Number   |                             |  | 111 15                                 |                                     |             |
| SUPERIOR LANDFILL  |  |  |  |                             | G. State F   |  | 042.02                              | 7.6112      |
| 3001 LITTLE NECK ROAD  |  |  |  |                             | H. State F   | acility Phone                          | 912-92                              | /-0112      |
| Savannah, GA 31419   |  |  |  |                             |  |  |                                     |             |
|  |  |  | 12. Co   | ntainers                    | 13. Total  | 14. Unit                               | 1 Micc                              | . Comments  |
| 11. Description of Waste Materials   |  |  | No.  | Туре                        | Quantity   | Wt./Vol.                               | i. wisc                             | . comments  |
| a. COAL ASH& COAL CONTAN   | INATED WASTE   | Bo   | 138  | M                           | 18   |  |                                     |             |
| WM Profile   | e# 375200GAKR  | A  |  |                             |  | July of Helli                          |                                     |             |
| b.   |  |  |  |                             |  |  |                                     |             |
|  |  |  |  |                             |  |  |                                     |             |
|  | WM Profile #   |  | 76.0   |                             |  | 1.44                                   |                                     |             |
| C.   |  |  |  |                             |  |  |                                     |             |
|  |  |  |  |                             |  |  |                                     |             |
|  | WM Profile #   |  |  |                             |  |  |                                     |             |
| d.   |  |  |  |                             |  |  |                                     |             |
|  |  |  |  |                             |  |  |                                     |             |
|  | WM Profile #   |  | 13001 232  |                             |  |  |                                     |             |
|  | erials Listed Above  |  | K. Dispo   | sal Location                |  |  |                                     | Section -   |
| J. Additional Descriptions for Mat   |  |  |  |                             | 1  | 0                                      | Level                               | 115         |
|  |  |  | Cell A   | 70                          | 1 /1   | 21 7                                   | 1                                   |             |
| J. Additional Descriptions for Mat   |  |  | Cell<br>Grid                                     | 320                         | 1290   | 1811                                   | 631                                 | 601         |
| J. Additional Descriptions for Mat  15. Special Handling Instructions an   | nd Additional Informa  |  | Grid/  | 32 O                        | 1290   | ~8(1                                   | 632                                 | ( ()        |
| J. Additional Descriptions for Mat  15. Special Handling Instructions as  Purchase Order # GPC107602   | nd Additional Informa  | tion  EMERGENCY CON  | Grid/  | HONE NO.:                   | 12.90  | ~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 632                                 | <u>( ()</u> |
| J. Additional Descriptions for Mat  15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE:   | nd Additional Informa  | EMERGENCY CON  | Grid/U   | Part 261 or                 | any applicat   | ole state law,                         | 632                                 | y and       |
| J. Additional Descriptions for Mat  15. Special Handling Instructions at  Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description described, classified and   | nd Additional Informa  | EMERGENCY CON<br>ot hazardous wastes as define<br>proper condition for transpor  | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicat   | ole state law,<br>ulations.            | 632                                 | y and       |
| J. Additional Descriptions for Mat  15. Special Handling Instructions at  Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description described, classified and Printed Name  | nd Additional Informa  | EMERGENCY CON  | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicable reg   | ole state law,<br>ulations.            | have been full                      |             |
| J. Additional Descriptions for Mat  15. Special Handling Instructions at  Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description described, classified and Printed Name  | nd Additional Informa<br>293<br>cribed materials are n<br>I packaged and are in  | EMERGENCY CON<br>ot hazardous wastes as defin<br>proper condition for transpor<br>Signature "On behal  | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicat   | ole state law,<br>ulations.            | have been full                      |             |
| J. Additional Descriptions for Mate 15. Special Handling Instructions at Purchase Order # GPC107602.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described caccurately described, classified and Printed Name  17. Transporter 1 Acknowledgements  | nd Additional Informa<br>293<br>cribed materials are n<br>I packaged and are in  | emergency con<br>ot hazardous wastes as defin<br>proper condition for transpor<br>Signature "On behal<br>rials   | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicat   | ole state law,<br>ulations.            | have been full                      |             |
| J. Additional Descriptions for Mat  15. Special Handling Instructions at  Purchase Order # GPC10760.  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description described, classified and Printed Name  | nd Additional Informa<br>293<br>cribed materials are n<br>I packaged and are in  | EMERGENCY CON<br>ot hazardous wastes as defin<br>proper condition for transpor<br>Signature "On behal  | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicat   | ole state law,<br>ulations.            | have been full                      | Day /       |
| J. Additional Descriptions for Material Section 15. Special Handling Instructions at Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description of the printed Name  17. Transporter 1 Acknowledgement Printed Name  | nd Additional Informa  293  cribed materials are not packaged and are in ent of Receipt of Mate  | emergency control of hazardous wastes as defining proper condition for transport Signature "On behalt rials Signature"   | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicable reg   | ole state law,<br>ulations.            | have been full Month Month          | Day Day     |
| J. Additional Descriptions for Material Special Handling Instructions at Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-destaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement 19. Transporter 2 Acknowled | nd Additional Informa  293  cribed materials are not packaged and are in ent of Receipt of Mate  | emergency control of hazardous wastes as defining proper condition for transport Signature "On behalt rials Signature"   | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicable reg   | ole state law,<br>ulations.            | have been full                      | Day /       |
| J. Additional Descriptions for Mat  15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-description of the company of the comp | nd Additional Informa  293  cribed materials are not packaged and are in ent of Receipt of Mate  | emergency control of hazardous wastes as define proper condition for transportion of Signature "On behalt rials Signature rials  | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicat   | ole state law,<br>ulations.            | have been full Month Month          | Day Day     |
| J. Additional Descriptions for Mat  15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-destaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name   | 293  cribed materials are not packaged and are interested for the packaged for the packaged and are interested for the packaged for  | emergency control of hazardous wastes as define proper condition for transportion of Signature "On behalt rials Signature rials  | Grid/<br>ITACT / PI<br>ed by CFR<br>tation acc   | Part 261 or                 | any applicate pplicable reg  | ole state law,<br>ulations.            | have been full Month Month          | Day Day     |
| J. Additional Descriptions for Mat  15. Special Handling Instructions at  Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-destaccurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name   | 293  cribed materials are not packaged and are in the second seco | emergency control of hazardous wastes as define proper condition for transport Signature "On behalt rials Signature signature rials Signature sign | Grid/U   | Part 261 or<br>cording to a |  |  | have been full  Month  Month  Month | Day Day Day |
| J. Additional Descriptions for Mat  15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment Learning on helalf of the above lise   | nd Additional Informa  293  cribed materials are not packaged and are in ent of Receipt of Materials are not receipt of Materials ar | emergency control of hazardous wastes as defining proper condition for transport Signature "On behalt rials Signature signature that to the best of my knowledge of the control of the con | Grid/U   | Part 261 or<br>cording to a |  |  | have been full  Month  Month  Month | Day Day Day |
| J. Additional Descriptions for Material Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment, I certify, on behalf of the above list applicable laws regulations, perm  | nd Additional Informa  293  cribed materials are not packaged and are in ent of Receipt of Materials are not packaged and are in ent of Receipt of Materials are not packaged and are in ent of Receipt of Materials and licenses on the ent of the ent of Receipt of Materials and licenses on the ent of Receipt of Material | emergency control of hazardous wastes as defining proper condition for transportion of Signature | Grid/UnitACT / PHeed by CFR tation according for | Part 261 or<br>cording to a | )<br>ribed waste   |  | have been full  Month  Month  Month | Day Day Day |
| 15. Special Handling Instructions and Purchase Order # GPC107602  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-dest accurately described, classified and Printed Name  17. Transporter 1 Acknowledgement Printed Name  18. Transporter 2 Acknowledgement Printed Name  19. Certificate of Final Treatment, I cortify, on helpful of the above list   | nd Additional Informa  293  cribed materials are not packaged and are in ent of Receipt of Materials are not packaged and are in ent of Receipt of Materials are not packaged and are in ent of Receipt of Materials and licenses on the ent of the ent of Receipt of Materials and licenses on the ent of Receipt of Material | emergency control of hazardous wastes as defining proper condition for transportion of Signature | Grid/UnitACT / PHeed by CFR tation according for | Part 261 or<br>cording to a | )<br>ribed waste   |  | have been full  Month  Month  Month | Day Day Day |

Pink- FACILITY USE ONLY



Original Ticket# 1253830

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Vehicle# L10

Ticket Date 05/16/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739502

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/16/2018 14:51:17 Out 05/16/2018 14:51:17

Scale

Inbound 1

Operator lbejaran lbejaran

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Gross Tare

Net Tons

61440 lb 25340 lb 36100 lb 18.05

Comments

Amount Origin MOU Rate Tax LD% Qty. Product PORTW 1 COAL ASH & COAL CO 100 18.05 Tons



| NON-HAZARDOUS MANIFEST  1. Generator's US EPA ID N N / A  |   | fest Doc No          |                         | 2. Page 1 o                                       |                                 | 2                                       | 14                |    |  |
|---|---|----------------------|-------------------------|---|---------------------------------|---|-------------------|----|--|
| . deliciator s maning man ass.  | or's Site Address (If diffe   |                      | ing):                   | A. Manifes  | t Number<br><b>//NA</b>         | 6739502                                 |                   |    |  |
| 141 RALPH MCGILL BLVD NE, BIN#10221 155 CR ATLANTA, GA 30308-3374 PORT-V  Generator's Phone 404-506-1365  | 31407   |                      |                         | B. State G  | enerator's ID                   |   |                   |    |  |
| Transporter 1 Company Name 6  | . US EPA ID   | lumber               |                         |   | 4 4 1                           |   |                   |    |  |
| mostal ( rating)  |   |                      |                         |   | ansporter's ID<br>orter's Phone |   |                   |    |  |
| . Transporter 2 Company Name 8  | . US EPA ID I   | Number               | ALC: N                  | E. State Transporter's ID  F. Transporter's Phone |                                 |   |                   |    |  |
|   |   |                      |                         |   |                                 |   |                   |    |  |
| ). Designated Facility Name and Site Address 1  | 0. US EPA ID  | Number               |                         |   |                                 |   |                   |    |  |
| SUPERIOR LANDFILL   |   |                      |                         | G. State F  | acility ID                      |   | 70 - Tanian ar ar |    |  |
| 3001 LITTLE NECK ROAD   |   |                      |                         | H. State F  | acility Phone                   | 912-927-6113                            |                   |    |  |
| Savannah, GA 31419  |   |                      |                         |   |                                 |   |                   |    |  |
| 11. Description of Waste Materials  |   | 12. Con              | tainers<br>Type         | 13. Total<br>Quantity                             | 14. Unit<br>Wt./Vol.            | I. Misc.                                | Comments          | S  |  |
| a. COAL ASH& COAL CONTAMINATED WASTE  |   | NO.                  | N-T                     | 15  |                                 | RELIE                                   |                   |    |  |
| a. COME ASITIC COME COMMANDER TO THE COME   | 1   | -10                  | 1)/                     | 18  |                                 |   |                   |    |  |
| WM Profile # 375200GAKRA  |   |                      |                         |   |                                 |   |                   |    |  |
| b.  |   | 10                   |                         |   | . Y                             |   |                   |    |  |
| WM Profile #  |   |                      | un and all and a second |   |                                 |   |                   |    |  |
| c.  |   |                      |                         |   |                                 |   |                   |    |  |
|   |   |                      |                         |   |                                 |   |                   |    |  |
| WM Profile #  |   |                      |                         |   |                                 | X 10000 1000 1000 1000 1000 1000 1000 1 |                   |    |  |
| <b>a.</b>   |   |                      |                         |   |                                 |   |                   |    |  |
| WM Profile #  |   |                      |                         |   |                                 |   |                   |    |  |
| J. Additional Descriptions for Materials Listed Above   |   | K. Disposal Location |                         |   |                                 |   |                   |    |  |
|   |   | Cell Leyel           |                         |   |                                 |   |                   |    |  |
|   |   | Grid /               | ) (                     | 116   | 1 ( )                           | 1000                                    | -0                | >  |  |
| 15. Special Handling Instructions and Additional Information  |   |                      |                         |   |                                 |   | 5.1               |    |  |
| Purchase Order # GPC10760293  | EMERGENCY COI   | NTACT / PH           | ONE NO.:                |   |                                 |   | -                 | 5  |  |
| 16. GENERATOR'S CERTIFICATE:  |   | ad by CER I          | 2art 261 or             | any annlicat                                      | ale state law. h                | nave been full                          | y and             |    |  |
| I hereby certify that the above-described materials are not hazaccurately described, classified and packaged and are in proper  | ardous wastes as defin<br>r condition for transpo                   | tation acco          | ording to a             | plicable reg                                      | ulations.                       | - I                                     |                   |    |  |
| Printed Name  | Signature "On beha  | f of"                |                         |   |                                 | Month                                   | Day //            | 7  |  |
| BFilipovich   | BAL   |                      |                         |   |                                 | 1-0-1                                   | 14                | 1  |  |
| 17. Transporter 1 Acknowledgement of Receipt of Materials   | Signature   | 11                   |                         |   |                                 | Month                                   | Day               |    |  |
| Printed Name / Signature  |   |                      | ein Di                  | en  |                                 | 5                                       | 14                | 1/ |  |
| Marinite 1  |   | 1                    | /                       | The sales   |                                 | Month                                   | Day               |    |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials   | /   | -                    |                         |   |                                 | WOITH                                   | Day               |    |  |
| 111. (Mattible)   | Signature   |                      |                         |   |                                 |   |                   | 1  |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name  |   |                      |                         |   |                                 |   | 211 - 1           |    |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name  19. Certificate of Final Treatment/Disposal Lectify, on behalf of the above listed treatment facility, that to applicable laws regulations permits and licenses on the dates. | o the best of my know   |                      |                         |   | was managed                     | in complianc                            | e with a          | 11 |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name  19. Certificate of Final Treatment/Disposal Lectify, on behalf of the above listed treatment facility, that to applicable laws regulations permits and licenses on the dates. | o the best of my know<br>s listed above.<br>n-hazardous materials o |                      |                         |   | was manageo                     |   |                   |    |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name  19. Certificate of Final Treatment/Disposal Learning on bodyle of the above listed treatment facility, that the second of the above listed treatment facility.                | o the best of my know   |                      |                         |   | was managed                     | I in complianc                          | e with a          |    |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253833

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Vehicle# L07 Ticket Date 05/16/2018 Container Payment Type Credit Account Driver

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6739503

Destination

PO

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT Time

Out 05/16/2018 14:59:12

Scale In 05/16/2018 14:59:12 Inbound 1

Operator rb rb

Gross Tare Net Tons

Amount

59420 1b 25240 lb 34180 lb 17.09

Comments

Tax Rate HOU

Check#

Billing #

Gen EPA ID NR

0001037

Dty LD% Product

Origin

1 COAL ASH & COAL CO 100 17.09 Tons

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

PORTW



| WASTE MANAGEMENT   |   |                             |                          | •                         |   | 2. Page 1 c   |                  |  |  |  |  |  |  |
|--|---|-----------------------------|--------------------------|---------------------------|---|---|------------------|--|--|--|--|--|--|
| NON-HAZARDOUS MANIFEST   | ID No.  | Manifest Doc No.            |                          |                           |   | ot  | 2:19             |  |  |  |  |  |  |
| 3. Generator's Mailing Address: GEORGIA POWER  241 RAI PH MCGILL BLVD NE. BIN#10221 Generator's Site Address (If difference of the state of the stat |   |                             |                          |                           | iling):                                 | A. Manifes  | st Number<br>MNA | 6739503  |  |  |  |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | 31407   |                             | B. State Generator's ID  |                           |   |   |                  |  |  |  |  |  |  |
| 4. Generator's Phone 404-5 5. Transporter 1 Company Name   | JS EPA ID I   | Number                      |                          | C. State Transporter's ID |   |   |                  |  |  |  |  |  |  |
| 7. Transporter 2 Company Name  | ading   | 8. US EPA ID Number         |                          |                           |   | D. Transporter's Phone  E. State Transporter's ID  F. Transporter's Phone |                  |  |  |  |  |  |  |
| 9. Designated Facility Name and Site   | Address   |                             |                          |                           |   |   |                  |  |  |  |  |  |  |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD  |   |                             |                          |                           |   | G. State F  | acility ID       | 912-927-6113   |  |  |  |  |  |
| Savannah, GA 31419   |   |                             |                          |                           |   |   | 14. Unit         |  |  |  |  |  |  |
| 11. Description of Waste Materials a. COAL ASH& COAL CONTAN  | INATED WASTE  |                             | 0                        | No.                       | Type                                    | 13. Total<br>Quantity   | Wt./Vol.         | I. Misc. Comments  |  |  |  |  |  |
|  | # 375200GAKRA   |                             | 7-                       | 01                        | 1)1                                     | 18  |                  |  |  |  |  |  |  |
| b.   |   | 39 37                       |                          |                           |   |   |                  |  |  |  |  |  |  |
| c  | WM Profile #  |                             |                          |                           |   |   |                  |  |  |  |  |  |  |
|  | WM Profile #  | Y                           |                          |                           |   |   |                  |  |  |  |  |  |  |
| d.   |   |                             |                          |                           |   |   |                  | - Supplem - Completing to the Completing Com |  |  |  |  |  |
|  | WM Profile #  |                             | 1500                     |                           |   |   |                  |  |  |  |  |  |  |
| J. Additional Descriptions for Mate  | erials Listed Above                                       |                             |                          | Cell Grid                 | A S S S S S S S S S S S S S S S S S S S |   |                  |  |  |  |  |  |  |
| 15. Special Handling Instructions ar   | nd Additional Information                                 | 1                           |                          |                           |   |   |                  | 300  |  |  |  |  |  |
| Purchase Order # GPC107602   | 293   | EMER                        | GENCY CON                | NTACT / PH                | IONE NO.:                               |   |                  |  |  |  |  |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc  | ribed materials are not h                                 | nazardous wast              | es as defin              | ed by CFR I               | Part 261 or                             | any applicab  | le state law, h  | nave been fully and  |  |  |  |  |  |
| accurately described, classified and Printed Name  | packaged and are in pro                                   | per condition for Signature | or transpor<br>"On behal | f of"                     | ording to ap                            | pricable reg  | ulations.        | Month Day Yea  |  |  |  |  |  |
| 17. Transporter 1 Acknowledgeme  | nt of Receipt of Materials                                | s \ Signature               |                          | 1                         | 21                                      |   |                  | Month Day Yea  |  |  |  |  |  |
| 1 CON  | 18. Transporter 2 Acknowledgement of Receipt of Materials |                             |                          |                           |   |   | 5 76             |  |  |  |  |  |  |
| Printed Name   |   | Signature                   | 9                        | *                         |   |   |                  | Month Day Yea  |  |  |  |  |  |
| 19. Certificate of Final Treatment/ I certify, on behalf of the above list   | ed treatment facility, tha                                | at to the best of           | f my knowl               | edge, the a               | above-descr                             | ibed waste  | was managed      | in compliance with all   |  |  |  |  |  |
| applicable laws, regulations, permi  20. Facility Owner or Operator: Co  | ertification of receipt of n                              | non-hazardous               | materials c              | overed by                 | this manife                             | st.   |                  | Month Day Yea  |  |  |  |  |  |
| Printed Name White-TREATMENT, STORAGE, DIS   |   | Signatur                    | ENERATOR                 | )                         |   |   | CENER            | RATOR #1 COPY  |  |  |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253907

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739504

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/17/2018 07:55:31 Out 05/17/2018 07:55:31

Scale

Inbound 1

Operator RB

Vehicle# BN24

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

RB

Gross Tare

56980 15 21800 lb 35180 lb

17.59

Net Tons

Comments.

Origin Amount Tax Qty Rate LD% UOM Product SAVANNAH 1 COAL ASH & COAL CO 100 17.59 Tons





|             |  | 1. Generator's US EPA I                          | D No. Ma                 | nifest Doc I | No.          | 2. Page 1  | of              |                       |  |  |  |
|-------------|--|--|--------------------------|--------------|--------------|--|-----------------|-----------------------|--|--|--|
|             | NON-HAZARDOUS MANIFEST   |  |                          | MIKE         |              |  |                 |                       |  |  |  |
|             | 3. Generator's Mailing Address:  | Gener  | A. Manife                | est Number   | 1117         |  |                 |                       |  |  |  |
|             | GEORGIA POWER GEORGIA POWER PLANT KRAFT  |  |                          |              |              |  | MNA             | 6739504               |  |  |  |
|             | 241 RALPH MCGILL BLVD NE, BI   |  | ROSSGATE RD.             |              |              |  | B. State G      | ienerator's ID        |  |  |  |
|             | ATLANTA, GA 30308-3374   |  | WENTWORTH, GA            | 31407        |              |  |                 |                       |  |  |  |
|             | 4. Generator's Phone 404-506  5. Transporter 1 Company Name  |  |                          |              |              |  |                 |                       |  |  |  |
| 18          | 3. Ivansporter 1 cumpany Name  | 1 -  | 6. US EPA ID             | Number       |              | C State T  | ransporter's ID |                       |  |  |  |
|             | 111040111  | CHINA  |                          |              |              | E SECULIAR S | orter's Phone   |                       |  |  |  |
|             | 7. Transporter 2 Company Name  |  | Number                   | lumber       |              |  |                 |                       |  |  |  |
|             |  | E. State Transporter's ID F. Transporter's Phone |                          |              |              |  |                 |                       |  |  |  |
|             | 9. Designated Facility Name and Site A   | ddress   | 10. US EPA I             | D Number     |              | 1. Hallspi   | orter's Phone   | Period Saltened Train |  |  |  |
|             | SUPERIOR LANDFILL  |  |                          |              |              | G. State F   | acility ID      |                       |  |  |  |
|             | 3001 LITTLE NECK ROAD  |  |                          |              |              | H. State F   | acility Phone   | 912-927-6113          |  |  |  |
|             | Savannah, GA 31419   |  |                          |              |              |  |                 |                       |  |  |  |
|             |  |  |                          | 12 Co        | ntainers     | 13. Total  | 14. Unit        |                       |  |  |  |
| G           | 11. Description of Waste Materials   |  |                          | No.          | Туре         | Quantity   | Wt./Vol.        | I. Misc. Comments     |  |  |  |
| E<br>N      | a. COAL ASH& COAL CONTAMIN   | IATED WASTE                                      | Dn                       | 011          | NT           | 17   |                 |                       |  |  |  |
| Ε           |  | 27F200CAKDA                                      | DI                       | AY.          | DI           | 10   |                 |                       |  |  |  |
| R<br>A      | b. WM Profile #  | 375200GAKRA                                      |                          |              |              |  |                 |                       |  |  |  |
| T           |  |  |                          |              |              |  | 7114            |                       |  |  |  |
| 0           | WN   | 1 Profile #                                      |                          |              |              |  |                 | L                     |  |  |  |
| R           | C.   |  |                          |              |              |  |                 |                       |  |  |  |
|             |  |  |                          |              |              |  |                 |                       |  |  |  |
|             | d.   |  |                          |              | Hillingson   |  |                 |                       |  |  |  |
|             | u.   |  |                          | 1            |              |  |                 |                       |  |  |  |
|             |  |  |                          |              |              |  |                 |                       |  |  |  |
|             | J. Additional Descriptions for Material  | l Profile #<br>ls Listed Above                   |                          | K Dispos     | al Location  |  |                 |                       |  |  |  |
| 1           |  |  |                          | in Dispos    | ai Location  |  |                 |                       |  |  |  |
|             |  |  |                          | Cell         | 100          | Level ) / 1  |                 |                       |  |  |  |
|             | 15 Special Handling Instructions and A   | dditional Information                            |                          | Grid         | )40          | 10   | wyl             | 14,260)               |  |  |  |
|             | 15. Special Handling Instructions and Additional Information   |  |                          |              |              |  |                 |                       |  |  |  |
|             |  |  |                          |              |              |  |                 |                       |  |  |  |
|             | Purchase Order # GPC10760293   |  | EMERGENCY CON            | TACT / PHO   | ONE NO.:     |  |                 |                       |  |  |  |
|             | 16. GENERATOR'S CERTIFICATE:   | S Santa  |                          |              |              | 4 5 7 7  | TANA TE         |                       |  |  |  |
|             | I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations. |  |                          |              |              |  |                 |                       |  |  |  |
|             | Printed Name   | kaged and are in proper                          | Signature "On behal      |              | rding to app | olicable regu  | lations.        | Month Day Year        |  |  |  |
|             | BFILIPOVICE  |  | BRA                      | 1            |              |  |                 | Month Day Year        |  |  |  |
| T           | 17. Transporter 1 Acknowledgement of   |  |                          |              |              |  |                 |                       |  |  |  |
| R<br>A<br>N | Printed Name   | 110  | 1                        | -            |              | Month Day Year   |                 |                       |  |  |  |
| S<br>P      | X Robie Mers   | mx   | )                        |              |              | 15 17 10   |                 |                       |  |  |  |
| O<br>R      | 18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature  |  |                          |              |              |  |                 | Month Day Year        |  |  |  |
| T<br>E      | Filited Name   |  | Signature                |              |              |  |                 | Month Day Year        |  |  |  |
| R           |  |  |                          |              |              |  |                 |                       |  |  |  |
| F           | 19. Certificate of Final Treatment/Dispo   |  | the best of my lens with | dan the ch   | ovo desert   | and wests  | or managad to   | compliance with all   |  |  |  |
| A<br>C      | I certify, on behalf of the above listed tr<br>applicable laws, regulations, permits an  |  |                          | uge, the ab  | ove-describ  | jed waste w  | as managed in   | compliance with all   |  |  |  |
| L           | 20. Facility Owner or Operator: Certific   |  |                          | vered by th  | is manifest  |  |                 |                       |  |  |  |
| T           | Printed Name   |  | Signature)               |              |              |  | 7- N 51 3       | Month Day Year        |  |  |  |
| •           | 117  |  | 11/1                     |              |              | N. L.  |                 | 5/1/0                 |  |  |  |
|             | White- TREATMENT, STORAGE, DISPOSA   | AL FACILITY COPY                                 | Blue- GENERATOR          | t2 COPY      |              | Ve   | llow- GENERAT   | FOR #1 COPY           |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253908

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739505

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/17/2018 07:57:20 Out 05/17/2018 07:57:20

Scale Inbound 1 Operator

RB

Vehicle# L10

Billing # 0001037

Gen EPA ID NR

Container Driver

Check#

RB

Gross Tare

60620 1b 25340 1b

Net Tons 35280 1b 17.64

Comments

Origin Amount Tax LD% Qty HOU Rate Product PORTW 17.64 Tons 1 COAL ASH & COAL CO 100



|                                      | NON-HAZARDOUS MANIFEST  1. Generator's US E  N   | EPA ID No. Ma<br>/ A   | No. Manifest Doc No.                             |                                |  |                              | 7:18                       |                      |  |  |  |
|--------------------------------------|--|--|--|--------------------------------|--|------------------------------|----------------------------|----------------------|--|--|--|
|                                      | GEORGIA POWER G  | enerator's Site Address (If di<br>EORGIA POWER PLAN  |  |                                | st Number  | 6739505                      |                            |                      |  |  |  |
|                                      |  | 55 CROSSGATE RD.<br>ORT WENTWORTH, GA  |  |                                | B. State (   | Generator's ID               |                            |                      |  |  |  |
| -                                    | 5. Transporter 1 Company Name  | 6. US EPA ID   | C. State Transporter's ID D. Transporter's Phone |                                |  |                              |                            |                      |  |  |  |
|                                      | 7. Transporter 2 Company Name  | 8. US EPA ID   |  |                                | E. State Transporter's ID F. Transporter's Phone   |                              |                            |                      |  |  |  |
|                                      | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD   | 10. US EPA I   | ID Numbe   | r                              | G. State F   | acility ID acility Phone     | 912-927-6113               |                      |  |  |  |
|                                      | Savannah, GA 31419   |  | 12.0   | Containers                     | 13. Total  | 14. Unit                     |                            |                      |  |  |  |
| G                                    | 11. Description of Waste Materials   |  | No.  | Туре                           | Quantity   | Wt./Vol.                     | I. Misc. Con               | nments               |  |  |  |
| E<br>N<br>E                          | a. COAL ASH& COAL CONTAMINATED WASTE   | £  | 10   | DT                             | 18   |                              |                            |                      |  |  |  |
| R                                    | WM Profile # 375200GAKR  | A  |  |                                |  |                              |                            |                      |  |  |  |
| A T                                  | b.   |  |  | 1,500                          | 1 T-KX   | 11.7                         |                            |                      |  |  |  |
| 0                                    | WM Profile #   |  | GHOLDING IN                                      |                                |  |                              |                            |                      |  |  |  |
| R –                                  | C. Wivi Profile #  |  |  |                                |  |                              |                            |                      |  |  |  |
|                                      |  |  |  |                                | 1  | 11-11-20                     |                            |                      |  |  |  |
|                                      | WM Profile #   |  |  |                                |  |                              |                            |                      |  |  |  |
|                                      | d.   |  |  |                                |  |                              |                            |                      |  |  |  |
|                                      | WM Profile #   |  | 1.41   |                                |  |                              |                            |                      |  |  |  |
|                                      | J. Additional Descriptions for Materials Listed Above  |  | K. Disp  | osal Location                  | 1  |                              |                            |                      |  |  |  |
|                                      |  |  | Cell<br>Grid                                     | 1320                           | 129  | W811                         | Level (                    | 154                  |  |  |  |
|                                      | 15. Special Handling Instructions and Additional Information   |  |  |                                |  |                              |                            |                      |  |  |  |
|                                      |  |  |  |                                |  |                              |                            |                      |  |  |  |
|                                      | Purchase Order # GPC10760293   | EMERGENCY CO   | NTACT / P  | PHONE NO.:                     |  |                              |                            |                      |  |  |  |
|                                      | Purchase Order # GPC10760293   | EMERGENCY CO   | NTACT / P  | PHONE NO.:                     |  |                              |                            |                      |  |  |  |
|                                      | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are no accurately described, classified and packaged and are in packaged.   | ot hazardous wastes as defin   | ned by CFF                                       | R Part 261 or                  | any applicab   | le state law, h<br>ulations. | nave been fully an         | d                    |  |  |  |
|                                      | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are no accurately described, classified and packaged and are in perinted Name   | ot hazardous wastes as defin   | ned by CFF<br>ortation ac                        | R Part 261 or                  | any applicab<br>oplicable regu   | le state law, h<br>ulations. | nave been fully an         | -19                  |  |  |  |
|                                      | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are no accurately described, classified and packaged and are in perinted Name   | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature *On beha   | ned by CFF<br>ortation ac                        | R Part 261 or                  | any applicab<br>oplicable regu   | le state law, h<br>Jlations. |                            | -19                  |  |  |  |
| 5-04                                 | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are no accurately described, classified and packaged and are in perinted Name  Brill pound  17. Transporter 1 Acknowledgement of Receipt of Mater   | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>ials   | ned by CFF<br>ortation ac                        | R Part 261 or                  | any applicab<br>oplicable regu   | le state law, h<br>ulations. | Month Da                   | y Year               |  |  |  |
| A<br>N<br>S<br>P                     | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are no accurately described, classified and packaged and are in perinted Name  17. Transporter 1 Acknowledgement of Receipt of Mater  Printed Name  On the second seco | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>ials   | ned by CFF<br>ortation ac                        | R Part 261 or                  | any applicab   | le state law, h<br>ılations. |                            | y Year               |  |  |  |
| A<br>N<br>S<br>P<br>O<br>R           | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are no accurately described, classified and packaged and are in perinted Name  17. Transporter 1 Acknowledgement of Receipt of Mater  Printed Name  18. Transporter 2 Acknowledgement of Receipt of Mater   | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature *On beha<br>ials   | ned by CFF<br>ortation ac                        | R Part 261 or                  | any applicab<br>oplicable regu   | le state law, h<br>Jlations. | Month Da                   | y Year               |  |  |  |
| A<br>N<br>S<br>P<br>O<br>R<br>T<br>E | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are no accurately described, classified and packaged and are in perinted Name  17. Transporter 1 Acknowledgement of Receipt of Mater  Printed Name  On the second seco | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature "On beha<br>ials   | ned by CFF<br>ortation ac                        | R Part 261 or                  | any applicab<br>oplicable regu   | le state law, h<br>ulations. | Month Da                   | y Year               |  |  |  |
| A<br>N<br>S<br>P<br>O<br>R           | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not accurately described, classified and packaged and are in perinted Name  17. Transporter 1 Acknowledgement of Receipt of Mater Printed Name  18. Transporter 2 Acknowledgement of Receipt of Mater Printed Name  | ot hazardous wastes as defin<br>proper condition for transpo<br>Signature *On beha<br>ials   | ned by CFF<br>ortation ac                        | R Part 261 or                  | any applicab<br>oplicable regu   | le state law, h<br>ulations. | Month Da                   | y Year               |  |  |  |
| A<br>N<br>S<br>P<br>O<br>R<br>T<br>E | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not accurately described, classified and packaged and are in perinted Name  17. Transporter 1 Acknowledgement of Receipt of Mater Printed Name  18. Transporter 2 Acknowledgement of Receipt of Mater Printed Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, to   | ot hazardous wastes as definoroper condition for transpo Signature "On beha ials Signature sials Signature that to the best of my knowledges               | ned by CFF<br>ortation ac<br>alf of"             | R Part 261 or<br>cording to ap | oplicable regu   | llations.                    | Month Da Month Da Month Da | y Year               |  |  |  |
| A<br>N<br>S<br>P<br>O<br>R<br>T<br>E | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not accurately described, classified and packaged and are in perinted Name  17. Transporter 1 Acknowledgement of Receipt of Mater Printed Name  18. Transporter 2 Acknowledgement of Receipt of Mater Printed Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, the applicable laws, regulations, permits and licenses on the  | ot hazardous wastes as definoroper condition for transpo Signature "On beha ials Signature rials Signature that to the best of my knowldates listed above. | ned by CFF<br>ortation ac<br>alf of"             | R Part 261 or<br>cording to ap | pplicable regulation of the second se | llations.                    | Month Da Month Da Month Da | y Year               |  |  |  |
| N<br>S<br>P<br>O<br>R<br>T<br>E      | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not accurately described, classified and packaged and are in perinted Name  17. Transporter 1 Acknowledgement of Receipt of Mater Printed Name  18. Transporter 2 Acknowledgement of Receipt of Mater Printed Name  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, to   | ot hazardous wastes as definoroper condition for transpo Signature "On beha ials Signature rials Signature that to the best of my knowldates listed above. | ned by CFF<br>ortation ac<br>alf of"             | R Part 261 or<br>cording to ap | pplicable regulation of the second se | llations.                    | Month Da Month Da Month Da | y Year y Year y Year |  |  |  |

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Original Ticket# 1253909

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Vehicle# L07

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route State Waste Code

Manifest 6739506

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/17/2018 07:59:07 In

Out 05/17/2018 07:59:07

Scale Inbound 1

RB

RB

Uperator

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Gross Tare

54700 16 25240 lb 29460 1b

Net 14.73 Tons

Comments

Product LD% Qty MOU Rate Tax Amount Origin COAL ASH & COAL CO 100 14.73 Tons PORTW



| WASTE MANAGEMENT  |   |                               |                           |              |                  |   |   |              |              |         |  |
|---|---|-------------------------------|---------------------------|--------------|------------------|---|---|--------------|--------------|---------|--|
| NON-HAZARDOUS MANIFEST  | EPA ID No.  | Mar                           | ifest Doc N               | lo.          | 2. Page 1        | of  | 7:22  |              |              |         |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                              | A POWER  PH MCGILL BLVD NE, BIN#10221  A, GA 30308-3374  GEORGIA POWER PLANT KRAFT  155 CROSSGATE RD.  PORT WENTWORTH, GA 31407 |                               |                           |              |                  |   | st Number<br>MNA  | 6739506      |              |         |  |
| ATLANTA, GA 30308-3374  |   |                               |                           |              |                  |   | B. State Generator's ID   |              |              |         |  |
| 5 Transporter 1 Company Name 6. US EPA I                                      |   |                               |                           |              | is a sure        | C. State T  | ransporter's ID   |              |              |         |  |
| 7. Transporter 2 Company Name   | DOING   | 8.                            | US EPA ID                 | Number       |                  | D. Transporter's Phone  E. State Transporter's ID |   |              |              |         |  |
| 9. Designated Facility Name and Site  | e Address   | 10. US EPA ID Number          |                           |              |                  | A CAN SERVING PARTY                               | orter's Phone   |              |              |         |  |
| SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD                                    |   |                               |                           |              |                  | G. State F  | acility ID<br>acility Phone   | 912-92       | 27-6113      |         |  |
| Savannah, GA 31419  |   |                               |                           |              |                  |   |   |              |              |         |  |
| 11. Description of Waste Materials  |   |                               |                           | No.          | ntainers<br>Type | 13. Total<br>Quantity                             | 14. Unit<br>Wt./Vol.  | l. Mis       | sc. Comments |         |  |
| a. COAL ASH& COAL CONTAN  |   |                               | 7                         | 2-07         | DT               | 18  |   |              |              |         |  |
| b. WM Profile   | e# 375200GAK  | .KA                           |                           |              |                  |   | AND REPORT OF THE PARTY OF THE |              |              | Habite  |  |
|   | WM Profile #  |                               |                           |              |                  |   |   |              |              |         |  |
| c.  |   |                               |                           |              |                  |   |   |              | 4.77         |         |  |
|   | WM Profile #  |                               |                           |              |                  |   |   |              |              |         |  |
| d.  | 1   |                               |                           |              |                  |   |   |              |              |         |  |
|   | WM Profile #  | (E. W                         |                           | V Diene      | eal Legation     |   |   |              |              | distant |  |
| J. Additional Descriptions for Mat  | erials Listed Above   |                               |                           | Cell<br>Grid | sal Location     | NS2.  | 119   | Levet        |              |         |  |
| 15. Special Handling Instructions ar  | nd Additional Inform  | ation                         |                           |              |                  |   |   |              |              |         |  |
| Purchase Order # GPC107602  | 293   | EMER                          | RGENCY COI                | NTACT / PH   | IONE NO.:        |   |   |              |              |         |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-desc             | ribed materials are   | not hazardous was             | tes as defin              | ed by CFR    | Part 261 or      | any applicat                                      | ole state law, h  | ave been ful | lly and      |         |  |
| accurately described, classified and Printed Name                             | packaged and are in   | n proper condition            | for transpo<br>e "On beha | tation acc   | ording to a      | pplicable reg                                     | ulations.   | Month        | Day          | Yea     |  |
| 17. Transporter 1 Acknowledgeme   | nt of Receipt of Mat  | erials                        |                           | Λ            |                  |   |   |              | 1 1          | •       |  |
| Printed Name Leek   | W   | V                             | Signature LLL             |              |                  |   |   | Month        | Day 7        | /Yea    |  |
| 18. Transporter 2 Acknowledgeme   | nt of Receipt of Mat  | 4 1 2 2 4 1                   | 70                        |              |                  |   |   | Month        | Day          | Ye      |  |
| Printed Name  |   | Signatui                      |                           |              |                  | N. Y.   |   |              |              |         |  |
| 19. Certificate of Final Treatment/<br>I certify, on behalf of the above list | ed treatment facility   | y, that to the best o         | of my knowl               | edge, the a  | above-desc       | ribed waste                                       | was managed   | in complian  | ce with all  |         |  |
| applicable laws, regulations, permi   | ts and licenses on th   | ne dates listed abov          | e.                        | 1            |                  |   |   |              |              |         |  |
| 20. Eacility Owner or Operator: Co  | ertification of receipt   | t of non-hazardous            | materials o               | overed by    | this manife      | est.  |   |              | 4 10         |         |  |
| 20. Facility Owner or Operator: Co  | ertification of receip  | t of non-hazardous<br>Signatu | materials o               | overed by    | this manife      | est.  |   | Month        | Day          | / Ye    |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253913

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739507

Destination PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

lime

05/17/2018 08:03:39 Out 05/17/2018 08:03:39

Scale Inbound 1

Operator

Vehicle# 34

Billing # 0001037

Gen EPA ID NR

Container

Driver

Check#

RB RE

Gross Tare

59560 1b 25280 15

Net 34280 1b Tons 17.14

Comments

Product LD% Qty HON Rate Tax Amount Origin

COAL ASH & COAL CO 100

17.14 Tons

PORTW



|                       | NON-HAZARDOUS MANIFEST  1. Generator's U  | Mai                                       | nifest Doc I               | No.                        | 2. Page 1                               | L of   | 7'26                      |                       |  |  |  |
|-----------------------|---|---|----------------------------|----------------------------|---|--|---------------------------|-----------------------|--|--|--|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365  | PLANT<br>D.                               | Ferent than m. KRAFT 31407 | ailing):                   | 200000000000000000000000000000000000000 | est Number VMNA  B. State  | 6739507<br>Generator's ID |                       |  |  |  |
|                       | 5: Transporter 1 Company Name  7: Transporter 2 Company Name  |   |                            |                            |   |  |                           | ID<br>9<br>D          |  |  |  |
|                       | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419   | 10. US                                    | S EPA IC                   | ) Number                   |   | F. Transporter's Phone  G. State Facility ID  H. State Facility Phone 912-927-6113 |                           |                       |  |  |  |
| G                     | 11. Description of Waste Materials  |   |                            | 12, Cor<br>No.             | ntainers                                | 13. Total  | 14. Unit                  | I. Misc. Comments     |  |  |  |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAMINATED WASTE  |   | E                          | J34                        | Туре                                    | Quantity   | Wt./Vol.                  |                       |  |  |  |
| R<br>A<br>T<br>O<br>R | b. WM Profile #   | NIVA                                      |                            |                            |   |  |                           |                       |  |  |  |
|                       | WM Profile #  |   |                            |                            |   |  |                           |                       |  |  |  |
| 1                     | WM Profile #  |   |                            |                            |   |  |                           |                       |  |  |  |
|                       | J. Additional Descriptions for Materials Listed Above   |   |                            | K. Disposa<br>Cell<br>Grid | al Location                             | V320   | 125                       | Level 6               |  |  |  |
|                       | 15. Special Handling Instructions and Additional Information  | ation                                     |                            |                            | l                                       | 2116   | 50                        |                       |  |  |  |
|                       | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE:  | EMERGENC                                  |                            |                            |   | 77 7-1   |                           |                       |  |  |  |
|                       | I hereby certify that the above-described materials are n accurately described, classified and packaged and are in Printed Name   | proper condition for tra<br>Signature "On | nsport                     | ation accor                | ort 261 o<br>ding to a                  | r any applicabl<br>applicable regu   | e state law, h            | Month Day Year        |  |  |  |
| T R A N S P O         | 17. Transporter 1 Acknowledgement of Receipt of Mate Printed Name BLAC VAC 4/ WOCK  18. Transporter 2 Acknowledgement of Receipt of Mate  | n   | 72                         | -2                         |   |  | Month Day Year            |                       |  |  |  |
| R<br>T<br>E<br>R      | Printed Name  | Signature                                 |                            |                            |   |  |                           | Month Day Year        |  |  |  |
| F A C I L I T V       | 19. Certificate of Final Treatment/Disposal     I certify, on behalf of the above listed treatment facility, applicable laws, regulations, permits and licenses on the     20. Facility Owner or Operator: Certification of receipt of Printed Name | dates listed above.                       |                            |                            |   |  | ras managed i             | n compliance with all |  |  |  |
| 1                     | White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY   | Ye  | llow- GENERA               | 1///                       |   |  |                           |                       |  |  |  |

Pink- FACILITY USE ONLY



3/ 1/2

Original Ticket# 1253917

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# bn25

Ticket Date 05/17/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6739508

Time

Dut 05/17/2018 08:08:06

Destination

PO

Profile 3752006AKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale In 05/17/2018 08:08:06 Inbound 1

RB RB

Gross Tare

58300 lb 22840 lb 35460 1b

Net 17.73 Tons

Comments

Operator

Container Driver

Billing # 0001037

Gen EPA ID NR

Check#

LD% Oty UOM Rate Tax Amount Origin Product PORTW 1 COAL ASH & COAL CO 100 17.73 Tons



|                            | NON-HAZARDOUS MANIFEST   | 1. Generator's US EP N /   |                           | 2. Page 1  | of                           | 7:30  |                      |             |             |        |  |
|----------------------------|--|----------------------------|---------------------------|--|------------------------------|---|----------------------|-------------|-------------|--------|--|
|                            | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, I  | Ger<br>GE<br>BIN#10221 15: |                           | est Number                                       | 6739508<br>te Generator's ID |   |                      |             |             |        |  |
|                            | ATLANTA, GA 30308-3374  4. Generator's Phone 404-50  |                            | S. State                  | Serierator                                       | 3.10                         |   |                      |             |             |        |  |
|                            | 5. Transporter 1 Company Name  | 6. US EPA II               | ) Number                  | C. State Transporter's ID D. Transporter's Phone |                              |   |                      |             |             |        |  |
|                            | 7. Transporter 2 Company Name  | 8. US EPA IE               | E. State Transporter's ID |  |                              |   |                      |             |             |        |  |
|                            | 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD   | Address                    | 10. US EPA                | D Number   |                              | F. Transporter's Phone G. State Facility ID |                      |             |             |        |  |
|                            | Savannah, GA 31419   |                            |                           | H. State Facility Phone 912-927-61:              |                              |   |                      |             |             |        |  |
| G                          | 11. Description of Waste Materials   |                            |                           | No.  | tainers<br>Type              | 13. Total<br>Quantity                       | 14. Unit<br>Wt./Vol. | 1. 1        | Aisc. Comme | nts    |  |
| E<br>N<br>E                | a. COAL ASH& COAL CONTAM   | I                          | 31125                     | Ta   | 17                           |   |                      |             |             |        |  |
| R<br>A                     | b. WM Profile  | # 375200GAKRA              |                           |  |                              |   |                      |             |             |        |  |
| T                          |  |                            |                           |  |                              | +   |                      |             |             |        |  |
| O<br>R                     | w  |                            |                           | artineet   |                              |   |                      |             |             |        |  |
|                            | c.   |                            |                           |  |                              | us midhanasis sa                            |                      |             |             |        |  |
|                            | d.   |                            |                           |  |                              |   |                      |             |             |        |  |
|                            |  |                            |                           |  |                              |   |                      | 11          |             |        |  |
|                            |  | M Profile #                |                           |  |                              |   |                      |             |             | Mar .  |  |
|                            | J. Additional Descriptions for Mater   | als Listed Above           |                           | Cell   | al Location                  | 131017                                      | 1                    | Level       | 65          |        |  |
|                            | 15. Special Handling Instructions and  | Additional Information     |                           | Grid   |                              | Will  | 36                   |             |             |        |  |
|                            |  | Association and the        |                           | 5  |                              |   | 1                    | N.          |             |        |  |
| W                          | Purchase Order # GPC1076029  | 3                          | EMERGENCY COI             | NTACT / PHO                                      | NE NO.:                      |   |                      |             |             |        |  |
|                            | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-describ accurately described, classified and page 1.   |                            |                           |  |                              |   |                      | ave been fu | ılly and    |        |  |
|                            | Printed Name   |                            | Signature "On behal       |  | unig to up                   | piicabie rega                               | ideons.              | Month       | Day         | Year   |  |
| т.                         | 17. Transporter 1 Acknowledgement  | BR                         |                           |  |                              | 3000  | 5                    | 17          | 1/ (        |        |  |
| T<br>R<br>A                | / Printed Name   | H waterials                | Signature /               | 7 700  | 1                            |   |                      | Month       | Day         | Year   |  |
| A<br>N<br>S<br>P<br>O<br>R | XXN (9X1777)   | Affel .                    | 1                         |  |                              | 6   | 17                   | 1/4         |             |        |  |
| O<br>R                     | 18. Transporter 2 Acknowledgement Printed Name   | Signature                  | //                        |  |                              | *   | Month                | Day         | Year        |        |  |
| T<br>E<br>R                |  |                            | Jigilatare                |  |                              |   |                      | Worth       | Duy         | rear   |  |
| F<br>A<br>C                | 19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all |                            |                           |  |                              |   |                      |             |             |        |  |
| L                          | applicable laws, regulations, permits a 20. Facility Owner or Operator: Certi  |                            |                           | wered by th                                      | is manifes                   | t   |                      |             |             |        |  |
| T<br>Y                     | Printed Name   | Cadon of receipt of the    | Signature                 | / Nereu by th                                    | is maimes                    |   |                      | Month       | Day         | / Xear |  |
|                            | White- TREATMENT, STORAGE, DISPO   | SAL FACILITY COPY          | Blue- GENERATOR           | #2 COPY  |                              | Ye  | llow- GENERA         | TOR #1 CO   | PY PY       | YU     |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253963

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# 34

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739509

Destination

PO

Profile 3752006AKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/17/2018 09:35:27 Inbound 1 Out 05/17/2018 09:35:27

Scale

Operator LBEJARAN LBEJARAN

Container Driver

Check#

Billing # 0001037

Gen EPA ID NR

Gross Tare Net

57280 15 25280 16 32000 lb

16.00 Tons

Comments

LD% Oty UOM Rate Origin Tax Amount Product PORTW 1 COAL ASH & COAL CO 100 16.00 Tons



| _             | WASTE MANAGEMENT   |                                     |                  |              |                |  |                               |                    |          |  |  |
|---------------|--|-------------------------------------|------------------|--------------|----------------|--|-------------------------------|--------------------|----------|--|--|
|               | NON-HAZARDOUS MANIFEST  1. Generator                                 | r's US EPA ID No. N / A             | Ma               | nifest Doc N | No.            | 2. Page 1  | of                            | 7. 6               | 56       |  |  |
|               | 3. Generator's Mailing Address:<br>GEORGIA POWER                     | Generator's Site Ad<br>GEORGIA POWI |                  |              | ailing):       | 200  | est Number                    | 6739509            |          |  |  |
|               | 241 RALPH MCGILL BLVD NE, BIN#10221                                  | 155 CROSSGATI                       | E RD.            |              |                |  |                               |                    |          |  |  |
|               | ATLANTA, GA 30308-3374   | PORT WENTWO                         | ORTH, GA         | 31407        |                | B. State Generator's ID  |                               |                    |          |  |  |
| 74            | 4. Generator's Phone 404-506-1365                                    |                                     |                  |              |                |  |                               |                    |          |  |  |
|               | 5. Transporter 1 Company Name  | 6.                                  | US EPA ID        | Number       |                |  |                               |                    |          |  |  |
|               | 110001-11/2-11   | ~ ^                                 |                  |              |                | C. State T   | ransporter's                  | ID                 |          |  |  |
|               | CULAGI DIVAI   | 119                                 |                  |              |                | D. Transp  | orter's Phon                  | e                  |          |  |  |
|               | 7. Transporter 2 Company Name  | 8.                                  | US EPA ID        | Number       |                |  |                               |                    |          |  |  |
| H             |  |                                     |                  |              |                |  | ransporter's<br>orter's Phone |                    |          |  |  |
|               | 9. Designated Facility Name and Site Address                         | 10.                                 | US EPA II        | Number 1     |                | 1. ITalisp   | orter 3 mone                  |                    |          |  |  |
|               | SUPERIOR LANDFILL  |                                     |                  |              |                | G. State F   | acility ID                    |                    |          |  |  |
|               | 3001 LITTLE NECK ROAD  |                                     |                  |              |                |  | acility Phone                 | 912-927-           | 6113     |  |  |
|               | Savannah, GA 31419   |                                     |                  |              |                | Ti. State I  | delirey i none                | 312 327            | 0113     |  |  |
|               |  |                                     |                  |              |                |  |                               |                    |          |  |  |
| G             | 11. Description of Waste Materials                                   |                                     |                  |              | ntainers       | 13. Total  | 14. Unit                      | I. Misc. Co        | mments   |  |  |
| E             | a. COAL ASH& COAL CONTAMINATED WA                                    | STE                                 |                  | No.          | Туре           | Quantity   | Wt./Vol.                      |                    |          |  |  |
| N             | ar continue continuent in the way                                    | 312                                 | R                | holl         | M              | 18   |                               | ALC: N             |          |  |  |
| E<br>R        | WM Profile # 3752000   | GAKRA                               | 4                | 1            | 71             | Control of the   |                               |                    |          |  |  |
| A             | b.   |                                     |                  |              |                |  |                               |                    |          |  |  |
| Т             |  |                                     |                  | 1            |                | 4-   |                               |                    | - 11     |  |  |
| 0             | WM Profile #   |                                     |                  |              |                | The state of the s |                               |                    |          |  |  |
| R             | c.   |                                     |                  |              |                |  |                               |                    |          |  |  |
|               |  |                                     |                  |              |                |  | Philips .                     | 1                  |          |  |  |
|               | WM Profile #   |                                     |                  |              | eanda          |  |                               |                    |          |  |  |
|               | d,   |                                     |                  |              | 7              | XXX III I  | 1 3                           |                    |          |  |  |
|               |  |                                     |                  |              |                |  |                               |                    |          |  |  |
|               | WM Profile #   |                                     |                  |              |                |  |                               |                    |          |  |  |
|               | J. Additional Descriptions for Materials Listed Abo                  | ove                                 |                  | K. Dispos    | al Location    | 00   | 22                            | 7                  | -        |  |  |
| Ø.            |  |                                     |                  | Cell         | - I N          | 15601  | 701                           | Level /            |          |  |  |
| X             |  |                                     |                  | Grid         |                | wa [1]   | SL                            | 20.0               |          |  |  |
|               | 15. Special Handling Instructions and Additional Info                | ormation                            |                  |              | 1              | 19/11/   | /                             |                    | TV TV    |  |  |
|               |  |                                     |                  |              |                |  |                               |                    |          |  |  |
|               |  |                                     | - 6-0            | - 38-4       |                |  |                               | No Service         | 1. h1/   |  |  |
|               | Purchase Order # GPC10760293   | EMERG                               | ENCY CON         | TACT / PHO   | ONE NO.:       | 4.169  |                               |                    |          |  |  |
|               | 16. GENERATOR'S CERTIFICATE:   |                                     |                  |              |                | *  |                               |                    |          |  |  |
|               | I hereby certify that the above-described materials a                | are not hazardous waste             | s as define      | d by CFR Pa  | art 261 or a   | ny applicabl   | e state law, h                | nave been fully ar | nd       |  |  |
|               | accurately described, classified and packaged and ar<br>Printed Name | Signature                           |                  |              | raing to app   | olicable regu  | lations.                      | Month D            | ay Year  |  |  |
| M             | B+ILLDOUICH  | Signature                           | Pinacriaii       | OI.          |                |  |                               | R I                | 7 17     |  |  |
| т             | 17. Transporter 1 Acknowledgement of Receipt of N                    | Materials                           | 9                |              |                |  |                               |                    | 111      |  |  |
| T R A N S P O | Printed Name   | Şignature                           | 1 -              | 1            | 100-           | 2-2  | 7                             | Month D            | ay Year  |  |  |
| N<br>S        | JOHN CHOW OUT  |                                     | 12               | ne b         | ne             |  | 1                             | 51                 | 7 11     |  |  |
| P<br>0        | 18. Transporter 2 Acknowledgement of Receipt of N                    | Materials                           |                  |              |                |  |                               |                    |          |  |  |
| R<br>T<br>E   | Printed Name   | Signature                           |                  |              |                |  | 1                             | Month D            | ay Year  |  |  |
| E<br>R        |  |                                     |                  |              |                |  |                               |                    |          |  |  |
|               | 19. Certificate of Final Treatment/Disposal                          |                                     |                  |              | -              |  |                               |                    | THE TANK |  |  |
| F<br>A<br>C   | I certify, on behalf of the above listed treatment faci              | ility, that to the best of r        | my knowle        | dge, the ab  | ove-describ    | ed waste w   | as managed                    | in compliance wi   | th all   |  |  |
| C             | applicable laws, regulations, permits and licenses on                | the dates listed above.             |                  |              |                |  |                               | •                  |          |  |  |
| L             | 20. Facility Owner or Operator: Certification of rece                | eipt of non-hazardous m             | aterials co      | vered by th  | is manifest    |  |                               |                    |          |  |  |
| T<br>Y        | Printed Name   | Signature                           | 1                |              |                |  |                               | Month / D          | ay /Year |  |  |
|               | 4  |                                     |                  | -            | Carried States |  |                               | ) 1                |          |  |  |
|               | White-TREATMENT, STORAGE, DISPOSAL FACILITY O                        | COPY Blue- GEN                      | <b>NERATOR #</b> | 2 COPY       |                | Ye   | llow- GENER.                  | ATOR #1 COPY       |          |  |  |

Gold-TRANSPORTER #1 COPY

Pink- FACILITY USE ONLY



Original Ticket# 1253964

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest

6739510

Destination PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/17/2018 09:37:19 Out 05/17/2018 09:37:19

Scale

Inbound i

Operator

Vehicle# L10

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

LBEJARAN LBEJARAN

Gross Tare Net

57740 15 25340 lb 32400 16

Tons

15.20

Comments

Product Qty LD% MOU Rate Tax Amount Origin COAL ASH & COAL CO 100 16.20 Tons PORTW



# WASTE MANAGEMENT NON-HAZARDOUS MANIFEST

| WASTE MANAGEMENT  |                            |  |                 |                  |  |                      |               | ***           |  |  |
|---|----------------------------|--|-----------------|------------------|--|----------------------|---------------|---------------|--|--|
| NON-HAZARDOUS MANIFEST  | 1. Generator's US EP.  N / |  | nifest Doc N    | lo.              | 2. Page 1  | of                   | 9             | 60:           |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER                        |                            | erator's Site Address (If dif<br>ORGIA POWER PLANT |                 | iling):          | 100  | st Number            | 67395         | 510           |  |  |
| 241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374                     | PO                         | 5 CROSSGATE RD.<br>RT WENTWORTH, GA                | 31407           |                  | B. State Generator's ID                          |                      |               |               |  |  |
|   | 506-1365                   | 1,5 504.15   | •1              |                  |  |                      |               |               |  |  |
| 5: Transporter 1 Company Name   |                            | 6. US EPA ID                                       | Number          |                  | C. State Transporter's ID                        |                      |               |               |  |  |
| 19999141  | -aling                     |  |                 | Jee Jyan         | D. Transporter's Phone                           |                      |               |               |  |  |
| 7. Transporter 2 Company Name   |                            | 8. US EPA ID                                       | F. C. I. T.     |                  |  |                      |               |               |  |  |
|   |                            |  |                 |                  | E. State Transporter's ID F. Transporter's Phone |                      |               |               |  |  |
| 9. Designated Facility Name and Sit                                     | e Address                  | 10. US EPA II                                      |                 |                  | name da  |                      |               |               |  |  |
| SUPERIOR LANDFILL   |                            |  | G. State F      | acility ID       | 197  | 110                  |               |               |  |  |
| 3001 LITTLE NECK ROAD   |                            |  |                 |                  | H. State F                                       | acility Phone        | 912-92        | 7-6113        |  |  |
| Savannah, GA 31419  |                            |  |                 |                  | l filipie intere<br>Class en en                  |                      |               |               |  |  |
| 11. Description of Waste Materials                                      |                            |  | 12. Coi<br>No.  | ntainers<br>Type | 13. Total<br>Quantity                            | 14. Unit<br>Wt./Vol. | I. Miso       | c. Comments   |  |  |
| a. COAL ASH& COAL CONTAIN   | MINATED WASTE              | 4  | 2-10            | DT               | R  |                      |               |               |  |  |
| WM Profile  | # 375200GAKRA              |  |                 |                  |  |                      |               |               |  |  |
| b.  |                            | NAME OF THE PARTY OF                               |                 |                  |  |                      |               |               |  |  |
|   |                            |  |                 |                  |  |                      |               | 0.0           |  |  |
|   | WM Profile #               |  |                 |                  |  |                      |               |               |  |  |
| C.  |                            |  |                 |                  | -1   |                      |               |               |  |  |
|   | WM Profile #               |  | 1119            |                  |  |                      |               |               |  |  |
| d.  |                            |  |                 |                  |  |                      |               |               |  |  |
|   |                            |  |                 |                  |  |                      |               |               |  |  |
| The second second   | WM Profile #               |  | Policy (Politic |                  |  |                      |               | production in |  |  |
| J. Additional Descriptions for Mat                                      | erials Listed Above        |  | K. Dispos       | al Location      |  |                      |               |               |  |  |
|   |                            |  | Cell            | 1777             | 111  | 91 12                | /Level        | 711           |  |  |
|   |                            |  | Grid /          | 1)6              | 012  | 100                  | (10)          | cla           |  |  |
| 15. Special Handling Instructions ar                                    | d Additional Informatio    | n  | - 1             |                  |  |                      |               |               |  |  |
|   |                            |  |                 |                  |  |                      |               |               |  |  |
| Purchase Order # GPC107602  | 03                         | EMERGENCY CON                                      | NTACT / PH      | ONE NO.:         |  |                      |               |               |  |  |
| 16. GENERATOR'S CERTIFICATE:  |                            |  |                 |                  |  |                      |               |               |  |  |
| I hereby certify that the above-desc                                    | ribed materials are not    | hazardous wastes as defin                          | ed by CFR F     | art 261 or       | any applicabl                                    | e state law, ha      | ave been full | y and         |  |  |
| accurately described, classified and                                    | packaged and are in pro    | per condition for transpor                         | tation acco     | rding to ap      | plicable regu                                    | lations.             | 1             |               |  |  |
| Printed Name  |                            | Signature "On behal                                | f of"           |                  |  |                      | Month         | Day Y         |  |  |
| 17. Transporter 1 Acknowledgemen  | nt of Receipt of Material  | S  |                 | 1.0              |  |                      | 10            |               |  |  |
| Printed Name  |                            | Signature  | 1               |                  | 7  |                      | Month         | Day Y         |  |  |
| X III. Champ  |                            | Y CINX   | Ita.            | mple             |  |                      | 5             | 17/           |  |  |
| 18. Transporter 2 Acknowledgeme   | nt of Receipt of Material  |  |                 | /                | <u> </u>   |                      |               |               |  |  |
| Printed Name  |                            | Signature  |                 |                  |  |                      | Month         | Day Y         |  |  |
|   |                            |  |                 |                  |  |                      |               |               |  |  |
| 19. Certificate of Final Treatment/I                                    |                            |  |                 |                  |  | **                   | P             |               |  |  |
| I certify, on behalf of the above list                                  | ed treatment facility, the | at to the best of my knowledge listed above        | edge, the a     | oove-descr       | ibed waste v                                     | vas managed i        | n compliance  | e with all    |  |  |
| applicable laws, regulations, permit 20. Facility Owner or Operator: Ce |                            |  | overed by t     | his manifes      | it.  |                      |               |               |  |  |
| Printed Name  | ranication of receipt of t | Signature  | 7               |                  |  |                      | Month         | Day y         |  |  |
| 100   |                            | 1119   |                 |                  |  |                      | 5             | 1/1           |  |  |
| White- TREATMENT, STORAGE, DIS  | POSAL FACILITY COPY        | Blue- GENERATOR                                    | #2 COPY         |                  | Ye   | ellow- GENERA        | ATOR #1 COP   | Ý             |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253968

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Haulino Ticket# Route

State Waste Code

Manifest 6739511

Destination

PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/17/2018 09:42:51

Out 05/17/2018 09:42:51

Inbound 1

Scale Operator LBEJARAN LBEJARAN

0001037

Vehicle# L07

Gen EPA ID NR

Container

Billing #

Driver

Check#

Gross 56520 lb Tare 25240 15 Net 31280 16 Tons 15.64

Comments

Product LD% Qty MOU Rate Tax Amount Origin COAL ASH & COAL CO 100 15.64 Tons PORTW



| -1               | WASTE MANAGEMENT  |  |  |                         | 17 C S 2 C S 2 C S 1 C S 1 C S 2 C S |  |                           |  |  |  |
|------------------|---|--|--|-------------------------|--|--|---------------------------|--|--|--|
|                  | NON-HAZARDOUS MANIFEST  | 1. Generator's US EP N /   |  | nifest Doc No.          | 2. Page 1  | of   | 9:04                      |  |  |  |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE, I                           | GE0<br>BIN#10221 155   | nerator's Site Address (If dif<br>ORGIA POWER PLAN <sup>-</sup><br>5 CROSSGATE RD. | T KRAFT                 |  | st Number  MNA  B. State (                       | 6739511<br>Generator's ID |  |  |  |
|                  | ATLANTA, GA 30308-3374 4. Generator's Phone 404-5   | PO<br>06-1365  | RT WENTWORTH, GA   | 31407                   |  |  |                           |  |  |  |
|                  | 5. Fransporter 1 Company Name   | radina   | 6. US EPA ID   | Number                  |  | C. State Transporter's ID D. Transporter's Phone |                           |  |  |  |
|                  | 7. Transporter 2 Company Name   |  | 8. US EPA ID   | Number                  | E. State Transporter's ID F. Transporter's Phone   |  |                           |  |  |  |
|                  | 9. Designated Facility Name and Site SUPERIOR LANDFILL 3001 LITTLE NECK ROAD                              | e Address  | 10. US EPA I   | D Number                | G. State Facility ID  H. State Facility Phone 912-927-6113   |  |                           |  |  |  |
|                  | Savannah, GA 31419  |  |  |                         |  |  | 312-327-0113              |  |  |  |
| G                | 11. Description of Waste Materials  |  |  | 12. Containers No. Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.                             | I. Misc. Comments         |  |  |  |
| E<br>N<br>E      | a. COAL ASH& COAL CONTAM  |  | 7  | 18 M                    | 18   |  |                           |  |  |  |
| R                | WM Profile<br>b.  | # 375200GAKRA  | <u> </u>   |                         |  |  |                           |  |  |  |
| A                |   |  |  | 4-17                    |  |  |                           |  |  |  |
| O<br>R           |   | VM Profile #   |  |                         | and didiness   |  |                           |  |  |  |
|                  | C.  |  |  |                         |  |  |                           |  |  |  |
|                  | v   | VM Profile #   |  |                         |  |  |                           |  |  |  |
|                  | d.  |  |  |                         |  |  |                           |  |  |  |
|                  | V   | VM Profile #   |  |                         |  |  |                           |  |  |  |
|                  | J. Additional Descriptions for Mate   | America de La Carta de Carta d |  | K. Disposal Locatio     | n  |  |                           |  |  |  |
|                  |   |  |  | Cell 1/7                | 0100   | V 1/1  | Level 2 1 1 C             |  |  |  |
|                  |   |  |  | Grid (V)                | 0/29   | wa   | 1625 FOR                  |  |  |  |
|                  | 15. Special Handling Instructions and   | d Additional Informatio  | n  |                         |  |  |                           |  |  |  |
|                  | Purchase Order # GPC1076029   | 93   | EMERGENCY COI  | NTACT / PHONE NO.:      |  |  |                           |  |  |  |
|                  | 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr accurately described, classified and p | ibed materials are not loackaged and are in pro  | hazardous wastes as defin  | ed by CFR Part 261 or   | any applicabl  | le state law, h<br>Ilations.                     | ave been fully and        |  |  |  |
|                  | Printed Name B + 111 pourch   |  | Signature "On beha   | f of"                   |  |  | Month Day Year            |  |  |  |
| TRAN             | 17. Transporter 1 Acknowledgement   | t of Receipt of Material   | Signature  | Lee Al                  |  |  | Month Day Year            |  |  |  |
| PO               | 18. Transporter 2 Acknowledgemen  | t of Receipt of Material   | ls N   | V .                     | 1-196  |  | - 110                     |  |  |  |
| R<br>T<br>E<br>R | Printed Name  |  | Signature  |                         |  | 1  | Month Day Year            |  |  |  |
| F<br>A<br>C      | 19. Certificate of Final Treatment/Di   | d treatment facility, the  | at to the best of my knowl   | edge, the above-desc    | ribed waste v  | vas managed                                      | in compliance with all    |  |  |  |
| I<br>L           | applicable laws, regulations, permits 20. Facility Owner or Operator: Cer                                 |  |  | overed by this manife   | st.  |  |                           |  |  |  |
| T                | Printed Name  |  | Signature  | )                       | The Mark   |  | Month Day Year            |  |  |  |
|                  | White- TREATMENT, STORAGE, DISP   | POSAL FACILITY COPY  | Blue- GENERATOR  | #2 COPY                 | Ye   | ellow- GENER                                     | ATOR #1 COPY              |  |  |  |
|                  | Pink- FACILITY USE O  |  | Gold- TRANSPORTE   | R #1 COPY               |  |  |                           |  |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1253970

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/17/2018 Vehicle# bn25

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739512

Destination PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time
In 05/17/2018 09:45:59
Out 05/17/2018 09:45:59

Scale Inbound 1 Operator LBEJARAN LBEJARAN

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Gross Tare Net Tons 57700 1b 22840 1b 34860 1b 17.43

Comments

WASTE WANAGEMENT

Product LD% Gty UOM Rate Tax Amount Origin

1 COAL ASH & COAL CO 100

17.43 Tons

PORTW



|                  | WASTE MANAGEMENT   |   |                      |            |   |                             |                        |  |  |  |  |
|------------------|--|---|----------------------|------------|---|-----------------------------|------------------------|--|--|--|--|
|                  | NON-HAZARDOUS MANIFEST  1. Generator's   | US EPA ID No. Mai<br>N / A                              | nifest Doc No.       |            | 2. Page 1 o                                       | of                          | 9:07                   |  |  |  |  |
|                  | 3. Generator's Mailing Address:<br>GEORGIA POWER   | Generator's Site Address (If dif<br>GEORGIA POWER PLANT | Andrew Commenced No. | g):        | A. Manifes  | 6739512                     |                        |  |  |  |  |
| ) i              | 241 RALPH MCGILL BLVD NE, BIN#10221<br>ATLANTA, GA 30308-3374  | 155 CROSSGATE RD.<br>PORT WENTWORTH, GA                 | 31407                |            | B. State Generator's ID                           |                             |                        |  |  |  |  |
|                  | 4. Generator's Phone 404-506-1365 5. Transporter 1 Company Name  | 6. US EPA ID  | Number               |            | C. State Transporter's ID                         |                             |                        |  |  |  |  |
|                  | 7. Transporter 2 Company Name  | 8. US EPA ID  | Number               | 7          | D. Transporter's Phone  E. State Transporter's ID |                             |                        |  |  |  |  |
|                  | 9. Designated Facility Name and Site Address   | 10. US EPA II   | 10. US EPA ID Number |            |   |                             | F. Transporter's Phone |  |  |  |  |
|                  | SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419   |   | now shakesikimi      |            | G. State F  | acility ID<br>acility Phone | 912-927-6113           |  |  |  |  |
| G                | 11. Description of Waste Materials   |   | 12. Contain          |            | 13. Total<br>Quantity                             | 14. Unit<br>Wt./Vol.        | I. Misc. Comments      |  |  |  |  |
| E<br>N           | a. COAL ASH& COAL CONTAMINATED WAST  | TR  | 7 25 n               | Туре       | 18  | Wt., VOI.                   |                        |  |  |  |  |
| E<br>R<br>A      | WM Profile # 375200GA  | KRA   |                      |            |   |                             |                        |  |  |  |  |
| T<br>O<br>R      | WM Profile #   |   |                      | <b>M</b>   |   |                             |                        |  |  |  |  |
|                  | C.  WM Profile #   |   |                      |            |   |                             |                        |  |  |  |  |
|                  | d.   | No. 4 To 6  |                      |            |   |                             | AR III                 |  |  |  |  |
|                  | WM Profile #   |   |                      |            |   | History I was               |                        |  |  |  |  |
|                  | J. Additional Descriptions for Materials Listed Above  |   | K. Disposal I        | Location   | r w.o.e.u.sysuesse yest                           |                             |                        |  |  |  |  |
|                  |  |   | Cell -               | 720        | 129   | 2311                        | Level 7                |  |  |  |  |
|                  | 15. Special Handling Instructions and Additional Inform  | mation  |                      |            |   |                             | 1                      |  |  |  |  |
|                  | Purchase Order # GPC10760293   | EMERGENCY CON   | NTACT / PHON         | E NO.:     |   |                             |                        |  |  |  |  |
|                  | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are accurately described, classified and packaged and are  | e not hazardous wastes as define                        | ed by CFR Part       | : 261 or a | iny applicabl                                     | e state law, h              | nave been fully and    |  |  |  |  |
|                  | Printed Name 8 + 11 povich   | Signature "On behal                                     |                      |            | 8   |                             | Month Day Year         |  |  |  |  |
| T<br>R           | 17. Transporter 1 Acknowledgement of Receipt of Ma   | nterials  |                      | 1          |   |                             |                        |  |  |  |  |
| A<br>N<br>S<br>P | Printed Name  A GRIFFITH  Printed Name  A GR | Signature   | Effet                | 2          |   |                             | Month Day Year         |  |  |  |  |
| O R T E          | 18. Transporter 2 Acknowledgement of Receipt of Ma<br>Printed Name   | Signature   |                      |            |   |                             | Month Day Year         |  |  |  |  |
| R                | 19. Certificate of Final Treatment/Disposal  |   |                      |            |   | 1 6                         |                        |  |  |  |  |
| F<br>A<br>C      | I certify, on behalf of the above listed treatment facility applicable laws, regulations, permits and licenses on t  | he dates listed above.                                  |                      |            |   | vas managed                 | in compliance with all |  |  |  |  |
| L                | 20. Facility Owner or Operator: Certification of receip  | ot of non-hazardous materials co                        | overed by this       | manifest   |   |                             |                        |  |  |  |  |
| Y                | Printed Name   | Signature   | )                    |            | O. C.   |                             | Month Day Year         |  |  |  |  |
|                  | White TREATMENT STORAGE DISPOSAL FACILITY CO   | DPY Blue- GENERATOR                                     | #2 COPY              |            | Ye  | llow- GENER                 | ATOR #1 COPY           |  |  |  |  |

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Original Ticket# 1253976

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# BN24

Ticket Date 05/17/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code Manifest 6739513

Destination

PO Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Generator

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/17/2018 09:57:13 Out 05/17/2018 09:57:13 Scale

Inbound 1

Operator LBEJARAN LBEJARAN

Container

Driver

Check#

Billing # 0001037

Gen EPA ID NR

Gross Tare Net Tons

56080 1b 21800 15 34280 1b 17.14

Comments

In

| Proc              | Juct  | LD% | Qty                                      | UOM  | Rate   | Tax | Amount | Origin   |
|-------------------|---|-----|--|------|--|-----|--------|--|
| - 1100 MIN 1000 V | and, being some your some your some page some some your your some some your place when place your |     | the representative and the same here and |      | II. AFFIC AT OF THE THE THE LAND THE STOR WHEN COMP SAME AND THE |     |        | AND SHOW SHIP YOUR DOOR STORE STORE SHOW MADE BOOK STORE STORE |
| 1                 | COAL ASH & COAL CO  | 100 | 17.14                                    | Tons |  |     |        | PORTW  |





|                            | NON-HAZARDOUS MANIFEST  1. Generator's US N  | S EPA ID No.   | Manifest Doc   | No.          | 2. Page 1                  | of                               | 9:          | / )         |        |
|----------------------------|--|--|----------------|--------------|----------------------------|----------------------------------|-------------|-------------|--------|
|                            | GEORGIA POWER  | Generator's Site Address<br>GEORGIA POWER PL/<br>155 CROSSGATE RD. |                | nailing):    | 4000                       | est Number                       | 6739        | 9513        |        |
|                            | ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365   | PORT WENTWORTH,  | GA 31407       |              |                            | B. State G                       | Generator's | s ID        |        |
|                            | 5. Transporter 1 Company Name  |  | A ID Number    |              | C. Activization of the Co. | ransporter's IE<br>orter's Phone | ).          |             |        |
|                            | 7. Transporter 2 Company Name  | 8. US EPA  | A ID Number    | 11           | the Astronomy Control      | ransporter's ID<br>orter's Phone |             |             |        |
|                            | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD   | 10. US EF  | A ID Number    |              | G. State F                 |                                  | 012.0       | 927-611     |        |
|                            | Savannah, GA 31419   |  |                |              | m. state                   | acility Phone                    |             | 927-011     |        |
| G                          | 11. Description of Waste Materials   |  | 12. Co<br>No.  | Type         | 13. Total<br>Quantity      | 14. Unit<br>Wt./Vol.             | 1. N        | lisc. Comme | nts    |
| E<br>N<br>E                | a. COAL ASH& COAL CONTAMINATED WASTE   | T  | 3024           | D7           | 18                         |                                  |             |             |        |
| R                          | WM Profile # 375200GAK   | RA   |                |              |                            |                                  |             |             |        |
| A<br>T<br>O<br>R           | WM Profile #   |  |                |              |                            |                                  |             | A Res       |        |
|                            | c.<br>WM Profile #   |  |                |              |                            |                                  |             |             |        |
|                            | d.   |  |                |              |                            |                                  |             |             |        |
|                            | J. Additional Descriptions for Materials Listed Above  |  | K. Dispos      | al Location  | 2 0                        | (3 × (1                          | Levēl a     |             | - 1    |
|                            | 15. Special Handling Instructions and Additional Informa   | tion   | Grid           | 5/61         | 296                        | 8/14                             | 52          | 66          | 54+    |
|                            | Purchase Order # GPC10760293   | EMERGENCY (  | CONTACT / PH   | ONE NO.:     |                            |                                  |             |             |        |
|                            | 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are no accurately described, classified and packaged and are in packaged.        | ot hazardous wastes as de  | fined by CFR P | art 261 or a | ny applicable              | e state law, ha                  | ve been fu  | lly and     |        |
|                            | Printed Name   | Signature "On be   |                | rung to app  | nicable regu               | iations.                         | Month       | Day         | Year   |
|                            | Btilipovich  | 1B/K   |                |              |                            |                                  | K           | 7           | 18     |
| T<br>R<br>A                | 17. Transporter 1 Acknowledgement of Receipt of Mater  | R 1  |                |              |                            |                                  | - 1         | - 1         | , 4    |
| N                          | Printed Name   | Signature  | W.             |              |                            |                                  | Month       | Day         | Year   |
| S<br>P                     | 18. Transporter 2 Acknowledgement of Receipt of Mater  | ials W   | W              |              |                            |                                  | <b>b</b>    | 17          | 1      |
| P<br>O<br>R<br>T<br>E<br>R | Printed Name   | Signature  |                |              |                            |                                  | Month       | Day         | Year   |
| F A C I L                  | 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, applicable laws, regulations, permits and licenses on the | dates listed above.  |                |              |                            | as managed in                    | complianc   | e with all  |        |
| 1                          | 20. Facility Owner or Operator: Certification of receipt of Printed Name   |  | covered by th  | ns manifest. |                            |                                  | T           |             |        |
| Y                          | Frinced Ivalite  | Signature  | 12             |              |                            |                                  | Month       | Day         | Year / |
|                            | White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   | Blue- GENERATO   | R #2 COPY      |              | Ye                         | llow- GENERAT                    | FOR#1 COL   | PY /        | 110    |

Pink- FACILITY USE ONLY



Original Ticket# 1254016

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# 34

Ticket Date 05/17/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739514

Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

Out 05/17/2018 11:12:50

In 05/17/2018 11:12:50

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Gross Tare Net Tons

58840 lb 25280 1b 33560 lb 16.78

Comments

Origin Rate Tax Amount Product LD% Qty MOU PORTW 16.78 Tons COAL ASH & COAL CO 100



| WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Grid  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Month Day Year  17. Transporter † Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  Month Day Year  Signature  Month Day Year  Signature  Month Day Year   |        | NON-HAZARDOUS MANIFEST                      | 1. Generator's US  |                      | Ma           | anifest Doc  | No.          | 2. Page  | l of  |            |               |                               |
|--|--------|---|--|----------------------|--------------|--------------|--------------|--|---|------------|---------------|-------------------------------|
| GEORGIA POWER PLANT KARF  241 RAIPH MCGILL BLVO NE, BINH10221 ATLANTA, GA 30308-3374  A. Generator's Phone  404-506-1365  5. Georgoter's Company Name  6. US EPAID Number  C. State Transporter's D.  D. Transporter's Phone  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD SAVANIAR, GA 31419  10. US EPAID Number  C. State Transporter's D.  D. Transporter's Phone  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD SAVANIAR, GA 31419  11. Description of Waste Materials  a. COAL ASH8. COAL CONTAMINATED WASTE  WM Profile #  d.  WM Profile #  d.  WM Profile #  d.  WM Profile #  A. Memiest Mumber  C. State Transporter's D.  D. Transporter's Phone  10. US EPAID Number  C. State Transporter's D.  D. Transporter's Phone  11. Gate Commonts  12. Gate Facility ID  H. State Facility ID  A. J. Will Additional Descriptions for Materials Listed Above  C. Gell  Grid  15. Special Handling instructions and Additional Information  Furchase Order # GPC10760293  EMERCENCY CONTACT / PHONE NO:  16. GENERATOR'S CERTIFICATE:  Hereby certify that the above discribed materials are not hazardous waster as defined by CFT Part 2610 or any applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and according to applicable state law, have been fully and accordin |        | 2 Congression 84-11: A LL                   |  | -                    |              |              | MARY S       |  |   | 10         | 120           |                               |
| 241 RALPH MCGIL BUVD NE, BINNI1021 ATLANTA, GA 30308-3374 A. Generator's Thome 404-506-1365 5. Transporter I Company Name C. State Transporter's 10 D. Transporter's Phone 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK CROAD Savannah, GA 31419 10. US EPA ID Number C. State Transporter's 10 D. Transporter's Phone 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 301 LITTLE NECK CROAD Savannah, GA 31419 11. Description of Waste Materials 12. COAL ASH& COAL CONTAMINATED WASTE WMM Profile # 375200GAKRA D. WM Profile # 375200GAKRA D. WM Profile # 375200GAKRA D. WMM Profile # 375 |        |   |  |                      |              |              | ailing):     | A. Manif   | est Number  | 670        |               | THE                           |
| ATLANTA, GA 30308-3374  A. Generator's Phone  404-506-1365  5. Transporter I Company Name  D. Transporter I Company Name  A. Separatory Company Name  D. Transporter I Company Name  E. State Transporter's ID  D. Transporter's Phone  E. State Transporter's ID  D. Transporter's Phone  Superior Landfill Interest Cross Superior Landfill Interest Superior Landfill Interest La |        |   |  |                      |              | TKRAFT       |              | V  | VMNA  | 6/3        | 9514          |                               |
| A. Generator's Phone 404-506-1365 5. Tensporter's Company Name 6. US EPA ID Number C. State Transporter's ID D. Transporter's Phone 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 300 LITTLE NECK ROAD Savannah, G. A 31419 6. US EPA ID Number 6. State Transporter's ID D. Transporter's Phone 912-927-6113 6. US EPA ID Number 6. State Transporter's ID D. Transporter's Phone 912-927-6113 9. H. State Facility Phone 912-927-6113 9. WM Profile # D. Transporter's Phone 912-92 |        |   | The state of the s |                      |              |              |              | 1 23   | B. State C  | enerator'  | s ID          |                               |
| 5. Transporter 1 Company Name  D. Transporter 2 Company Name  D. Transporter 3 Company Name  D. Transporter 3 Company Name  E. State Transporter's 1D  D. Transporter's 1D  D. Transporter's 1D  E. State Transporter's 1D  E. State Transporter's 1D  D. Transporter's 1D  E. State Transporter's 1D  E. State Transporter's 1D  E. State Transporter's 1D  D. Transporter's 1D  E. State Transporter's 1D  E. |        |   |  | ORT WENTWO           | ORTH, G      | 4 31407      |              | Distance dentification 3 (b)   |   |            |               |                               |
| T.Trahsporter 2 Company Name  8. US EPA ID Number  9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LUTTER PICKE ROAD Savannah, GA 31419  10. US EPA ID Number  11. State Transporter's ID 12. State Transporter's ID 13. Savannah, GA 31419  11. Description of Waste Materials  12. Consume 13. Transporter State Transporter's ID 14. State Facility ID 15. State Transporter's Phone 15. State Transporter's Phone 16. State Transporter's ID 17. Transporter State Transporter's ID 18. State Transporter's ID 19. Consider In State Transporter's ID 19. |        |   | 06-1365  |                      |              |              |              |  |   |            |               |                               |
| 8. US EPA ID Number 9. Designated Facility Name and Site Address SUPERIOR LANDRILL 3001 LITTLE NECK ROAD SAVANNAH, G. State Facility D H. State Facility Phone 912-927-6113  10. US EPA ID Number  G. State Facility D H. State Facility Phone 912-927-6113  11. Description of Waste Materials  MM Profile #  WM Profile #  375200GAKRA  D MM Profile #  1. Additional Descriptions for Materials Listed Above  WM Profile #  1. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials Listed Above  WM Profile #  I. Additional Descriptions for Materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accordictly described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Senature  Senature  Signature  Maccin  Maccin  Signature  Maccin  Maccin  Signature  Maccin  Maccin  Signature  While - TREATMENT, STOMAGE, DISPOSAL PACIUM PCORY  Blue GENERATOR #Z COPY  Yellow. GENERATOR #Z COPY  While - TREATMENT, STOMAGE, DISPOSAL PACIUM PCORY  Blue GENERATOR #Z COPY  Yellow. GENERATOR #Z COPY  While - TREATMENT, STOMAGE, DISPOSAL PACIUM PCORY  While - TREATMENT, STOMAGE, DISPOSAL PACIUM PCORY  Blue GENERATOR #Z COPY  Yellow. GENERATOR #Z COPY  Ye |        | 3. Hansporter 1 Company Name                |  | 6.                   | US EPA IE    | Number       |              |  |   |            |               |                               |
| 8. US EPA ID Number  E. Slutte Transporter's ID  F. Transporter's ID  G. State Facility ID  H. State Facility ID   |        | 112001112                                   | whind  |                      |              |              |              | The second second  | CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE | )          |               |                               |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  6. State Facility ID F. Transporter's ID F. Transporter's Mone 912-927-6113  8. State Facility IB H. State Facility Phone 912-927-6113  9. 1. Description of Waste Maritin's 13 Social Maritin's 14 Junit 15 Social Maritin's 14 Junit 16 Social Maritin's 14 Junit 17 Social Maritin's 14 Junit 17 Social Maritin's 15 Social Ma |        | 7. Transporter 2 Company Name               | 901119   | 8                    | IIS EDA IF   | Number       | 100          | D. Trans   | porter's Phone  |            |               |                               |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. Description of Waste Materials 2 a. COAL ASH& COAL CONTAMINATED WASTE  8 wm Profile # 375200GAKRA 2 b.  12. Cersimors 3 is foad is 1. Just 4 list is 1. Just 4 list is 1. Just 5 is 1. Additional Descriptions for Materials Listed Above  15. Special Handling Instructions and Additional Information  WM Profile #  16. GRINGATOR'S CERIFICATE: 16. GRINGATOR'S CERIFICATE: 17. Transporter I Acknowledgement of Receipt of Materials  Printed Name 19. Certificate of Final Treatment/Disposal 19. Certificate of Pinal Treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above. 20. Facility Owner or Operator (Certification of receipt of non hazardous materials covered by this manifest.  White-TREATMENT, STORAGE, DISPOSALPACILITY-COPY  Vellow-CENERATOR #I COPY  Vellow-CENERATOR #I COPY  Vellow-CENERATOR #I COPY  Vellow-CENERATOR #I COPY   |        |   |  |                      | OJ LFA IL    | ivuilibei    |              | F State 3  | Franchortor's IF  |            |               |                               |
| SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  11. State Facility ID H. State Fa |        |   | 7  |                      |              |              |              | 1  |   |            |               |                               |
| Savannah, GA 31419  II. Description of Waste Materials  II. Description of Waste Materials  III. Description of Waste Materials III. Description of Wasterials III.  |        |   | Address  | 10. US EPA ID Number |              |              |              |  | 410   | 314        | ra e sevi ini |                               |
| Savannah, GA 31419  II. Description of Waste Materials  II. Contamers  III. Description of Waste Materials  III. Description of Waster Materials  III. De |        |   |  |                      |              |              |              | G. State   | Facility ID   |            |               |                               |
| Savannan, GA 31419  11. Description of Waste Materials  12. Contensers:  13. Transporter I Acknowledgement of Receipt of Materials  14. Disposal Location  Cell Grid Level  Grid Level  Grid Level  Grid Level  Grid Level  15. Special Handling Instructions and Additional Information  EMERGENCY CONTACT / PHONE NO.:  16. GRNERATOR'S CERTIFICATE:  17. Transporter I Acknowledgement of Receipt of Materials  Signature On behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  Signature  Note of the above described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  Signature  Signature  Note of the above described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  Signature  Signature  Note of the above described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  Signature  Note of the above described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  Signature  Note of the above described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  Signature  Note of Final Treatment, Disposal licenses on the dates listed above.  Signature  Signature  Note of Signa |        |   |  |                      |              |              |              | H. State   | acility Phone   | 912-9      | 727-611       | 3                             |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell  Grid  Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature Con behalf of " Month Dry Year  12. Transporter 7 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Dry Year  19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above disted treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  D. Facility Owner or Operator' Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  White- TREATMENT, STORAGE, DISPOSAL*FACILITY-COPY  White- TREATMENT, STORAGE, DISPOSAL*FACILITY-COPY  Blue- GENERATOR #2 COPY  Yellow- GENERATOR #2 COPY  Yellow- GENERATOR #2 COPY  Yellow- GENERATOR #2 COPY   |        | Savannah, GA 31419                          |  |                      |              | 44.4         |              |  |   |            |               |                               |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell  Grid  Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature Con behalf of " Month Dry Year  12. Transporter 7 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Dry Year  19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above disted treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  D. Facility Owner or Operator' Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  White- TREATMENT, STORAGE, DISPOSAL*FACILITY-COPY  White- TREATMENT, STORAGE, DISPOSAL*FACILITY-COPY  Blue- GENERATOR #2 COPY  Yellow- GENERATOR #2 COPY  Yellow- GENERATOR #2 COPY  Yellow- GENERATOR #2 COPY   |        |   |  |                      |              |              |              | 116  |   |            |               |                               |
| a. COAL ASH& COAL CONTAMINATED WASTE  WM Profile # 375200GAKRA  b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  Septial Handling Instructions and Additional Information  EMERGENCY CONTACT / PHONE NO.:  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATORS CERTIFICATE: I hereby certify that the above described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, dassified and packaged and are in proper condition for transportation according to applicable regulations. Printed Name  Signature Company of the special formation of the spec | G      | 11. Description of Waste Materials          |  |                      |              |              | 100          | The second secon |   | I. N       | Aisc. Comme   | nts                           |
| WM Profile #  C.  WM Profile #  1. Additional Descriptions for Materials Listed Above  WM Profile #  1. Additional Descriptions for Materials Listed Above  E. Disposal Location  Cell Grid Lovel  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  1 hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Month Day Vest  12. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Vest  Signature  19. Certificate of Final Treatment/Disposal  10. Certificate of Final Treatment/Disposal  11. Transporter 2 Acknowledgement for Receipt of Materials  Printed Name  Signature  Month Day Vest  Month Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Month Day Vest  Month Day Vest  Signature  Month D |        | a. COAL ASH& COAL CONTAMI                   | NATED WASTE  |                      | 100          | NO.          | туре         | Quantity   | Wt./Vol.  |            | 0.200 - 0.000 |                               |
| MM Profile # 375200GAKRA  b.  WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  WM Profile #  J. Additional Descriptions for Materials Listed Above  EMERGENCY CONTACT / PHONE NO.:  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Pound of Poun |        |   |  |                      | PA           | 241          | M            | 18   |   |            |               |                               |
| MM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Grid Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GREERATOR'S CERTIFICATE:  I hereby certify that the above described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature On behalf of Materials  Printed Name Signature Month Day Year  12. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  14. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed reatment facility, that to the best of my knowledge, the above described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator's Certification of receipt of non-hazardous materials covered by this manifest.  White-TREATMENT, STORAGE, DISPOSAL-FACILITY-COPY Blue-GENERATOR #I COPY  Yellow-GENERATOR #I COPY  Yellow-GENERATOR #I COPY  |        | WM Profile #                                | 375200GAKR   | Α                    | DI           |              |              |  |   |            |               |                               |
| WM Profile #  d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Grid Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature On behalf of Materials  Printed Name Signature On behalf of Materials  Printed Name Signature Menth Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  Month Day Year  Month Day Year  Month Day Year  19. Certificate of Final Treatment/Disposal Level  Month Day Year  Month Day Year  Month Day Year  Month Day Year  Month Day Year | Α      | b,  | 10   |                      |              |              | 12065        |  |   |            |               |                               |
| The composition of the above described materials are not hazardous wastes as defined by CFR Part 261 or any applicable regulations.  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  Ihereby certify that the above described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Pinal Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal  Lecrity, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator's Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Nonth Day Year  Month Day Year  Month Day Year  Month Day Year  19. Certificate of Final Treatment/Disposal  Lecrity, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator's Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  Month Day Year  Month Day Year  Signature  Month Day Year  Month Day Year  Signature Month Day Year  19. Certificate of Final Treatment/Disposal  Lecrity, on behalf of the above described waste was managed in compliance with all applicable laws, and the properties of non-hazardous materials covered by this manifest.  | T      |   |  |                      |              |              |              |  | A CANCELLY  |            |               |                               |
| d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  EMERGENCY CONTACT / PHONE NO.:  15. Special Handling Instructions and Additional Information  EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:  I hereby certify that the above described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature "On behalf of"  Month Day Year  19. Certificate of Final Treatment/Disposal  Level  19. Certificate of Final Treatment/Disposal  Level  Month Day Year  19. Certificate of Final Treatment/Disposal  Level  Month Day Year  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal  Level  Month Day Year  Signature  Month Day Year  19. Certificate of Pinal Treatment/Disposal  Level  Month Day Year  Signature  Month Day Year  19. Certificate of Pinal Treatment/Disposal  Level  Month Day Year  Signature  Month Day Year  19. Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Micro Part Oppy Yellow-GENERATOR #T COPY  Yellow-GENERATOR #T COPY  White-TREATMENT, STORAGE, DISPOSAL FACILITY-COPY  Blue-GENERATOR #T COPY  Yellow-GENERATOR #T COPY  |        | WI  | M Profile #  |                      |              |              |              |  |   |            |               | and the state of the state of |
| WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Month Day Vest  12. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Signature  Month Day Vest  Bignature  Month Day Vest  Signature  Month Day Vest  The Control of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator, Certificition of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Nonth Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Month Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Signature Month Day  | 1,     | <b>C.</b>                                   | TALEBA   |                      |              |              |              |  |   |            |               |                               |
| WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Month Day Vest  12. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Signature  Month Day Vest  Bignature  Month Day Vest  Signature  Month Day Vest  The Control of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator, Certificition of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Nonth Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Month Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Signature  Month Day Vest  Signature Month Day  |        |   |  |                      |              |              | 10 - 0       | TL-X   |   |            |               |                               |
| WM Profile #  J. Additional Descriptions for Materials Listed Above  K. Disposal Location  Cell Level  15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:    Ihereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name   Signature On behalf of P   Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name   Signature   Signature   Signature   Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name   Signature   Signature   Month Day Year  19. Certificate of Final Treatment/Disposal    19. Certificate of Final Treatment/Disposal    19. Certificate or Final Treatment/Disposal    10. Facility Owner or Operator; Certificition of receipt of non-hazardous materials covered by this manifest.  Printed Name   Signature   Month Day Year  Nonth Day Year  Nonth Day Year  Nonth Day Year  Printed Name   Signature   Month Day Year  Nonth Day Year  Nonth Day Year  Nonth Day Year  Printed Name   Signature   Month Day Year  Nonth Day Year  Printed Name   Signature   Month Day Year  Nonth Day Year  Printed Name   Signature   Month Day Year  Printed Name   Signature   Mo | 1      | 11/0  | VI Profile #   |                      | × .          |              |              |  |   |            |               |                               |
| Special Handling Instructions and Additional Information   Cell   Grid   Level   |        | d.  |  |                      |              |              |              |  |   |            |               |                               |
| Special Handling Instructions and Additional Information   Cell   Grid   Level   | 8      |   |  |                      |              |              | -            |  | Figure 1  |            |               |                               |
| Cell   Grid   Level  |        |   |  |                      |              |              |              |  |   | Programmes |               |                               |
| 15. Special Handling Instructions and Additional Information  Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature On behalf of Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Mismanifest.  Printed Name Month Day Year  Month Day Year  Month Day Year  19. Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Mismanifest.  Printed Name Month Day Year  Month Day Year  19. Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Month Day Year  Month Day Year  19. Certification of receipt of non-hazardous materials covered by this manifest.   |        | J. Additional Descriptions for Materia      | als Listed Above   |                      | 1            | K. Disposa   | al Location  |  |   |            |               |                               |
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| Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE:   hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name   Signature On behalf of   Month   Day   Year    17. Transporter 1 Acknowledgement of Receipt of Materials   Printed Name   Signature   Month   Day   Year    18. Transporter 2 Acknowledgement of Receipt of Materials   Signature   Month   Day   Year    19. Certificate of Final Treatment/Disposal   I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operators Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name   Signature   Month   Day   Year    White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   Signature   Month   Day   Year    White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   Signature   Month   Day   Year    White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   Signature   Month   Day   Year    White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   Signature   Month   Day   Year    White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   Signature   Month   Day   Year    White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY   Yellow-GENERATOR #1 COPY   |        |   |  |                      |              | 1774         | N            | 36011  | -1-11   | Level      | 7             |                               |
| Purchase Order # GPC10760293 EMERGENCY CONTACT / PHONE NO.:  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name Signature "On behalf of" Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name Signature Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator's Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Year  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue-GENERATOR #2 COPY Yellow-GENERATOR #1 COPY   |        | 15. Special Handling Instructions and A     | Additional Informati   | on                   |              | Grid         |              | 201  | 36  |            |               |                               |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Mignith Day Year  Wear  Wear  Mignith Day Year  Wear  Wear  Wear  Wear  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue-GENERATOR #2 COPY  Yellow-GENERATOR #1 COPY   |        |   |  |                      |              |              | 0            | - 0 · u  |   |            |               |                               |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Mignith Day Year  Wear  Wear  Mignith Day Year  Wear  Wear  Wear  Wear  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue-GENERATOR #2 COPY  Yellow-GENERATOR #1 COPY   |        |   |  |                      |              |              |              |  |   |            |               |                               |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature "On behalf of"  Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Signature  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal  I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Mignth Day Year  Mignth Day Year  Mignth Day Year  Mignth Day Year  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue-GENERATOR #2 COPY  Yellow-GENERATOR #1 COPY  |        | Purchase Order # GPC10760293                |  | EMERG                | ENCY CON     | TACT / PHO   | NE NO ·      |  |   |            |               |                               |
| I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.  Printed Name  Signature On behalf of Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operators Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  Winth Day Year   |        | 16. GENERATOR'S CERTIFICATE:                |  |                      |              |              |              |  |   |            |               |                               |
| Printed Name Signature "On behalf of" Month Day Year  17. Transporter 1 Acknowledgement of Receipt of Materials Printed Name Signature Signature Signature Signature Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name Signature Signature Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator; Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Month Day Year  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY. Blue-GENERATOR #2 COPY Yellow-GENERATOR #1 COPY   |        |   | ed materials are not   | hazardous waste      | s as define  | d by CER Da  | rt 261 or ar | ay applicable  | a stata law. haw  |            | 0.000.00      |                               |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  White-TREATMENT, STORAGE, DISPOSAL-FACILITY COPY Blue-GENERATOR #2 COPY Yellow-GENERATOR #1 COPY   |        | accurately described, classified and pac    | kaged and are in pr  | oper condition fo    | r transport  | ation accor  | ding to app  | licable regu   | e state law, hav<br>lations   | e been lui | iy and        |                               |
| 17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue-GENERATOR #2 COPY  Yellow-GENERATOR #1 COPY   |        | Printed Name                                |  |                      |              |              |              |  |   | Month      | Day           | Year                          |
| Printed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  Wenth Day Year  Wenth Day Year  |        | the latter of the                           |  | 134                  |              |              |              |  |   | 5          | 17            | IX                            |
| 18. Transporter 2 Acknowledgement of Receipt of Materials  Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue- GENERATOR #2 COPY  Yellow- GENERATOR #1 COPY   | T<br>R |   | f Receipt of Materia   | ıls                  |              |              |              | 1 - 1 -  | ,   |            | 1 '           |                               |
| 18. Transporter 2 Acknowledgement of Receipt of Materials Printed Name Signature Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY  | A<br>N | 16  | ad 1   | Signature            | 200          | - 1 . 1      |              |  |   | Month      | Day           | Year                          |
| Printed Name  Signature  Month Day Year  19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  Month Day Year  White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY  | S  -   | X 4 2 7 1 2 7 1 2 7 1                       | - 0  |                      | e Ce Suns    | - Cri        |              |  |   | 5          | 11            | M                             |
| 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator; Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name Signature Signature White-TREATMENT, STORAGE, DISPOSAL-FACILITY COPY Blue-GENERATOR #2 COPY Yellow-GENERATOR #1 COPY  | O<br>R |   | r Receipt of Materia   | - 1                  |              |              |              |  |   |            |               |                               |
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| I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  White-TREATMENT, STORAGE, DISPOSAL PACILITY COPY  Blue-GENERATOR #2 COPY  Yellow-GENERATOR #1 COPY  | R      |   |  |                      |              |              |              |  | T. V.L.   | N S        |               |                               |
| applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator; Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue-GENERATOR #2 COPY  Yellow-GENERATOR #1 COPY  |        |   |  |                      |              | DATE:        |              |  | 17,111  |            |               |                               |
| applicable laws, regulations, permits and licenses on the dates listed above.  20. Facility Owner or Operator; Certification of receipt of non-hazardous materials covered by this manifest.  Printed Name  Signature  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue-GENERATOR #2 COPY  Yellow-GENERATOR #1 COPY  | A      | I certify, on behalf of the above listed tr | reatment facility, th  | at to the best of n  | ny knowled   | lge, the abo | ve-describe  | ed waste w   | as managed in   | complianc  | e with all    |                               |
| Printed Name Signature Signature White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY   |        | applicable laws, regulations, permits an    | d licenses on the da   | ites listed above.   |              |              |              |  |   |            | 794 755       |                               |
| White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  Blue- GENERATOR #2 COPY  Yellow- GENERATOR #1 COPY   |        |   | cation of receipt of r   |                      | aterials cov | ered by thi  | s manifest.  |  |   |            |               |                               |
| Tellow General Corp  | Y      | Printed Name                                | VA   | Signature            |              |              |              |  |   | Month      | Day           | Year                          |
| Tellow General Corp  | 1      | White TREATMENT STORAGE DISCOS              | ALEXCULTY CONT   |                      |              | ^            | 1            |  |   | 1/         | 1             | 10                            |
|  |        |   |  |                      |              |              |              | Yel  | low- GENERATO   | OR #1 COP  | Y             |                               |



Original Ticket# 1254024

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739515

Destination

FO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/17/2018 11:36:18 Out 05/17/2018 11:36:18

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Vehicle# L10

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net Tons

56840 16 25340 lb 31500 16 15.75

Comments

| Pro | oduct   | LD% | Qty  | LIOM | Rate | Tax | Amount | Origin  |
|-----|---|-----|--|------|------|-----|--------|---|
|     | with both their print area over 1000 lines alon dates when their sold over their sold sold lines and sever of |     | THE PARTY COURT START ARREST ARREST START START ARREST ARR |      |      |     |        | Non-levin Arm ratio inter-rate state trade was some year rates as |
| 1   | COAL ASH & COAL CO  | 100 | 15.75  | Tons |      |     |        | PORTW   |



|                            | NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA                               |   | nifest Doc              | No.               | 2. Page 1  | of  | 10'3        | (/             |  |  |
|----------------------------|--|---|---|-------------------------|-------------------|--|---|-------------|----------------|--|--|
|                            | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374  | GEC<br>BIN#10221 155                                | erator's Site Address (If dif<br>DRGIA POWER PLANT<br>5 CROSSGATE RD.<br>RT WENTWORTH, GA | KRAFT                   | ailing):          | Of GARAGES AND | st Number  MNA  B. State G                          | 6739515     | 5              |  |  |
|                            | 4. Generator's Phone 404-5  5. Transporter 1 Company Name  7. Transporter 2 Company Name   | 06-1365   | 6. US EPA ID  8. US EPA ID  |                         |                   | D. Transpo   | ransporter's ID<br>orter's Phone<br>ransporter's ID |             |                |  |  |
|                            | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419   | Address   | 10. US EPA II   | O Number                |                   | G. State F   | acility ID acility Phone                            | 912-927-    | 6113           |  |  |
| G                          | 11. Description of Waste Materials   |   |   | 12. Co<br>No.           | ontainers<br>Type | 13. Total<br>Quantity                              | 14. Unit<br>Wt./Vol.                                | I. Misc. Co | mments         |  |  |
| E<br>N<br>E                | a. COAL ASH& COAL CONTAM   | # 375200GAKRA                                       | L   | 10                      | DI                | 18   |   |             |                |  |  |
| R<br>A<br>T<br>O<br>R      | <b>b.</b>  | VM Profile #  |   |                         |                   |  |   |             |                |  |  |
|                            |  | VM Profile #  |   |                         |                   |  |   |             |                |  |  |
|                            | d.  V  J. Additional Descriptions for Mate   |   | K. Dispo  | sal Location            | 87019             | 74   | Level C   | 5           |                |  |  |
|                            | 15. Special Handling Instructions and  | d Additional Information                            | n   | Grid Grid 32            |                   |  |   |             |                |  |  |
|                            | Purchase Order # GPC1076029  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-descr accurately described, classified and printed Name                                | ibed materials are not h                            | nazardous wastes as define<br>per condition for transpor<br>Signature "On behal           | ed by CFR<br>tation acc | Part 261 or a     | any applicabl<br>plicable regu                     | le state law, ha<br>Ilations.                       | 1           | nd<br>Day Year |  |  |
| T<br>R<br>A<br>N<br>S<br>P | 17. Transporter 1 Acknowledgemen Printed Name  18. Transporter 2 Acknowledgemen  | pen   | Signature   | (h                      | am                | uer.   |   | 1511        | Day Year       |  |  |
| R<br>T<br>E<br>R           | Printed Name   |   | Signature   |                         |                   |  |   | Month [     | Day Year       |  |  |
| F A C I L I T v            | 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above lister<br>applicable laws, regulations, permits<br>20. Facility Owner or Operator: Cer<br>Printed Name | d treatment facility, tha<br>and licenses on the da | tes listed above.   |                         |                   |  | vas managed i                                       |             | oay Year       |  |  |
| Υ                          | White TREATMENT STORAGE DISP   | OCAL FACILITY CORY                                  | Blue- GENERATOR   | #3 COBY                 |                   | V  | ellow- GENERA                                       | TOR #1 COPY | 110            |  |  |

Pink- FACILITY USE ONLY



Original Ticket# 1254025

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739516

Destination

PO

Profile Generator 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

05/17/2018 11:38:07 In

Out 05/17/2018 11:38:07

Scale Inbound 1

Operator

LBEJARAN LBEJARAN

Vehicle# L07

Gen EPA ID NR

Billing # 0001037

Container

Driver

Check#

Gross Tare Net

55580 1b 25240 lb 30340 1b

15.17 Tons

Comments

| Pro           | duct   | LD%  | Qty   | UOM  | Rate | Tax | Amount  | Origin   |
|---------------|--|--|-------|------|------|-----|---|--|
| NOT SEED BASE | make where sales make trade have been determined make under easie make more where easies easies easies | tress made, which productions arrive arrive made production to the |       |      |      |     | to alone driver, where drives result, should prove broke arrive, each process above | year ann) have now been place order near pasts over arms bette most even |
| 1             | COAL ASH & COAL  | CO 100   | 15.17 | Tons |      |     |   | PORTW  |



|        | 1. Generator's US E   | EPA ID No. Ma                                      | nifest Doc No.          | 2. Page 1 of          |                      | 17/2 1   | ~ ~         |         |
|--------|---|--|-------------------------|-----------------------|----------------------|--|-------------|---------|
|        | NON-HAZARDOUS MANIFEST N  | / A  |                         |                       | 2.3                  | 10.  | 39          |         |
|        | GEORGIA POWER G   | enerator's Site Address (If d<br>EORGIA POWER PLAN |                         | A. Manifest I         |                      | 6739   | 516         |         |
|        |   | 55 CROSSGATE RD.                                   |                         |                       | B. State G           | enerator's   | ID          |         |
|        |   | ORT WENTWORTH, G                                   | 4 31407                 |                       |                      |  |             | 7       |
| X.     | 4. Generator's Phone 404-506-1365   |  |                         |                       |                      |  |             |         |
|        | 5. Transporter 1 Company Name   | 6. US EPA II                                       | ) Number                | C. State Tran         | eportor's ID         |  |             |         |
|        | l'hastal Gradiac  |  |                         | D. Transport          |                      |  |             |         |
|        | 7. Transporter 2 Company Name   | 8. US EPA II                                       | Number                  |                       |                      |  |             |         |
|        |   |  |                         | E. State Tran         |                      |  |             |         |
|        | 9. Designated Facility Name and Site Address  | 10. US EPA   | ID Number               | F. Transporte         | er's Phone           |  |             |         |
|        | SUPERIOR LANDFILL   |  |                         | G. State Faci         | lity ID              |  |             |         |
|        | 3001 LITTLE NECK ROAD   |  |                         | H. State Faci         | lity Phone           | 912-9  | 27-6113     | 3       |
|        | Savannah, GA 31419  |  |                         |                       |                      |  |             |         |
| 22     |   | THE HITCH BY IES                                   |                         |                       |                      | propress and   |             |         |
| G      | 11. Description of Waste Materials  |  | 12. Containers No. Type | 13. Total<br>Quantity | 14. Unit<br>Wt./Vol. | I. M   | isc. Commen | ts      |
| E      | a. COAL ASH& COAL CONTAMINATED WASTE  | THE THE STATE                                      |                         | 17                    |                      |  | 8 218       |         |
| N<br>E |   | 1  | 7-0 1 101               | 16                    |                      |  |             |         |
| R      | WM Profile # 375200GAKR   | A  |                         |                       |                      |  |             |         |
| Α      | b.  |  |                         |                       |                      |  |             |         |
| T<br>0 |   |  |                         |                       |                      |  |             |         |
| R      | WM Profile #  |  |                         |                       |                      |  |             |         |
|        | C.  |  |                         |                       | Van 1                |  |             | 11 - 10 |
|        | WM Profile #  |  | 20 Maria                |                       |                      |  |             |         |
|        | d.  |  |                         |                       |                      |  |             |         |
|        |   |  |                         |                       |                      |  |             | 11      |
|        | WM Profile #  |  |                         |                       |                      |  |             |         |
|        | J. Additional Descriptions for Materials Listed Above   |  | K. Disposal Locati      | on 7                  | 75                   | T Tally  |             |         |
|        |   |  | Cell                    | 56011                 | / )                  | Level  | (0)         |         |
|        |   |  | Grid                    | 001                   | 32                   | Level  |             |         |
|        | 15. Special Handling Instructions and Additional Informat   | ion  |                         | 1001 a                |                      |  | -           | -175    |
|        |   |  |                         |                       |                      |  |             |         |
|        |   |  |                         |                       |                      |  |             |         |
|        | Purchase Order # GPC10760293  | EMERGENCY CO                                       | NTACT / PHONE NO.       | 3                     |                      |  |             |         |
|        | 16. GENERATOR'S CERTIFICATE:  |  |                         |                       |                      |  |             |         |
|        | I hereby certify that the above-described materials are no accurately described, classified and packaged and are in p       | t hazardous wastes as defir                        | ned by CFR Part 261     | or any applicable s   | itate law, ha        | ive been tu  | lly and     |         |
|        | Printed Name  | Signature "On beha                                 |                         | applicable regulati   | JOHS.                | Month  | Day         | Year    |
|        | B+Mipovich  | 38   |                         |                       |                      | 5  | 17          | 18      |
| T      | 17. Transporter 1 Acknowledgement of Receipt of Mater   | ials   | 0                       |                       |                      |  |             |         |
| A      | /Printed Name   | Signature  | on the                  |                       |                      | Month  | Day         | Year    |
| S      | J. J  | X  |                         |                       |                      | 5  | 11          | 1/0     |
| O<br>R | 18. Transporter 2 Acknowledgement of Receipt of Mater   | Signature  |                         |                       |                      | Month  | Day         | Year    |
| T      | Printed Name  | Signature  |                         |                       |                      | THE STATE OF THE S |             |         |
| R      |   |  |                         |                       |                      |  |             |         |
| F      | 19. Certificate of Final Treatment/Disposal   |  |                         |                       | 1.                   |  |             | W6- 1   |
| A      | I certify, on behalf of the above listed treatment facility, t<br>applicable laws, regulations, permits and licenses on the | hat to the best of my know<br>dates listed above   | ledge, the above-des    | scribed waste was     | managed II           | n compilan   | ce with ai  |         |
| I<br>L | 20. Facility Owner or Operator: Certification of receipt o  |  | covered by this mani    | fest.                 |                      |  |             | - T-    |
| T.     | Printed Name  | Signature  |                         |                       | F-34-7.              | Month  | Day         | /Year   |
| Y      |   |  | 1                       |                       | -                    | 2  | 1/          | 10      |
|        | White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY  | Blue- GENERATOR                                    | #2 COPY                 | Yello                 | w- GENERA            | TOR #1 CO  | PY          |         |

Blue- GLINENATON #2 COLT

----

Pink- FACILITY USE ONLY



Original Ticket# 1254021

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# bn25

Ticket Date 05/17/2018
Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739517 Destination

PO

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)
Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

Out 05/17/2018 11:22:10

Scale Operator

In 05/17/2018 11:22:10 Inbound 1 LBEJARAN LBEJARAN

Container Driver

Billing # 0001037

Gen EPA ID NR

Check#

Gross Tare Net Tons

57240 1b 22840 lb 34400 15 17.20

Comments

Amount Origin Rate Tax LD% Qty UOM Product PORTW 1 COAL ASH & COAL CO 100 17.20 Tons



| NON-HAZARDOUS MANIFEST  | rator's US EPA ID No. N / A  | Manifest Doc  | No.          | 2. Page 1                     | of  | 10.4              |        |
|---|------------------------------|---|--------------|-------------------------------|---|-------------------|--------|
| 3. Generator's Mailing Address: GEORGIA POWER   | Generator's Site Add         | R PLANT KRAFT   | ailing):     |                               | est Number  | 6739517           |        |
| 241 RALPH MCGILL BLVD NE, BIN#102<br>ATLANTA, GA 30308-3374<br>4. Generator's Phone 404-506-1365  | PORT WENTWO                  |   |              |                               | B. State (  | Generator's ID    |        |
| 5. Transporter 1 Company Name 7. Transporter 2 Company Name   | ina                          | JS EPA ID Number<br>JS EPA ID Number                              |              | D. Transp                     | ransporter's IC<br>orter's Phone<br>ransporter's IC |                   |        |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419   | 10.                          | US EPA ID Number  |              | F. Transpo                    | orter's Phone                                       | 912-927-61        | 13     |
| 11. Description of Waste Materials  |                              |   | ntainers     | 13. Total                     | 14. Unit  | I. Misc. Comm     | nents  |
| a. COAL ASH& COAL CONTAMINATED  WM Profile # 3752 b.  |                              | Bhas.   | Туре         | Quantity                      | Wt./Vol.  |                   |        |
| WM Profile c.   | #                            |   |              |                               |   |                   |        |
| WM Profile  | #                            |   |              |                               |   |                   |        |
| d. WM Profile   | #                            |   |              |                               |   |                   |        |
| J. Additional Descriptions for Materials Listed   | Above                        | K. Dispos  Cell  Grid   | al Location  | 132                           | 127   | Level             | 5      |
| 15. Special Handling Instructions and Additional  | Information                  |   | U            | MI                            | , 5 (   |                   |        |
| Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materi accurately described, classified and packaged and   | als are not hazardous wastes | NCY CONTACT / PHO<br>as defined by CFR Pa<br>transportation accor | art 261 or a | ny applicable<br>licable regu | e state law, ha                                     | ve been fully and |        |
| Printed Name  17. Transporter 1 Acknowledgement of Receipt.   | 865                          | On behalf of"   |              |                               |   | Month Day         | Year   |
| Printed Name  | Signature /                  | GRIFFIL   | 7            |                               |   | Month Day         | Year / |
| 18. Transporter 2 Acknowledgement of Receipt Printed Name   | of Materials Signature       |   |              |                               |   | Month Day         | Year   |
| 19. Certificate of Final Treatment/Disposal     I certify, on behalf of the above listed treatment applicable laws, regulations, permits and license     20. Facility Owner or Operator: Certification of | s on the dates listed above. |   | 10           |                               | as managed in                                       | compliance with a | II     |
| 20. Facility Owner or Operator: Certification of Printed Name White- TREATMENT, STORAGE, DISPOSAL FACILI  | Signature                    | RATOR #2 COPY   | is manifest. |                               | low- GENERAT  | Month Day         | Year   |

Pink- FACILITY USE ONLY



21 - 12

Original Ticket# 1254027

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# BN24

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739518

Destination

PO

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In Ø5/17/2018 11:41:26 Out 05/17/2019 11:41:26

Scale Inbound 1

Operator LBEJARAN

Container

Driver . Check#

LBEJARAN

Billing # 0001037

Gen EPA ID NR

Gross Tare Net Tons

58240 16 21800 lb 36440 lb 18.22

Comments

#### WASTE MANAGEMENT

| Pro | duct              | LD%  | Gty  | LIOM | Rate | Tax | Amount | Origin  |
|-----|-------------------|--|--|------|------|-----|--------|---|
|     |                   | a aqual harder winds winds you've storm now no | AN ACRES CHANGE SERVICE CHANGE SCHOOL |      |      |     |        | and the state of the second state and sects of the sects |
| 1   | COAL ASH & COAL C | 0 100  | 18.22  | Tons |      |     |        | PORTW   |





|                            | NON-HAZARDOUS MANIFEST  | 1. Generator's US EPA  |   | ifest Doc N   | 0.              | 2. Page 1                     | of                            | 10                    | 'KC         | 5            |
|----------------------------|---|--|---|---|-----------------|-------------------------------|-------------------------------|-----------------------|-------------|--------------|
|                            | 3. Generator's Mailing Address:<br>GEORGIA POWER<br>241 RALPH MCGILL BLVD NE,<br>ATLANTA, GA 30308-3374   | GEORGIA POWER PLANT KRAFT 155 CROSSGATE RD. PORT WENTWORTH, GA 31407 |   |   | iling):         | 1 3 3 3 7 1 5                 | st Number  MNA  B. State G    | 6739!<br>enerator's I |             |              |
|                            | 4. Generator's Phone 404-5  5. Transporter 1 Company Name  7. Transporter 2 Company Name  | 96-1365<br>Gding   | 6. US EPA ID  8. US EPA ID  | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID |                 |                               |                               |                       |             |              |
|                            | 9. Designated Facility Name and Site<br>SUPERIOR LANDFILL<br>3001 LITTLE NECK ROAD<br>Savannah, GA 31419  | Address  | 10. US EPA II   | Number  |                 | G. State F                    | acility ID                    | 912-92                | 27-6113     |              |
| G                          | 11. Description of Waste Materials  |  | Name of the state | 12. Con   | tainers<br>Type | 13. Total<br>Quantity         | 14. Unit<br>Wt./Vol.          | I. Mis                | sc. Comment | <b>3</b> - # |
| E<br>N<br>E                | a. COAL ASH& COAL CONTAM  |  | B   | 124   | M               | 17                            |                               |                       |             |              |
| R<br>A<br>T<br>O<br>R      | <b>b.</b>   | # 375200GAKRA  VM Profile #  |   |   |                 |                               |                               |                       |             |              |
|                            | v   | VM Profile #   |   |   |                 |                               |                               |                       |             |              |
|                            | d.  V  J. Additional Descriptions for Mate  | VM Profile #<br>rials Listed Above                                   |   | K. Dispos   | al Location     | 01.2                          | 9W2                           | Leyel /               | 326         | 159          |
|                            | 15. Special Handling Instructions and   |  |   | L   |                 |                               |                               |                       |             |              |
|                            | Purchase Order # GPC107602<br>16. GENERATOR'S CERTIFICATE:<br>I hereby certify that the above-descr<br>accurately described, classified and p<br>Printed Name   | ibed materials are not h<br>packaged and are in pro                  | per condition for transpor<br>Signature "On behal   | ed by CFR P   | art 261 or      | any applicab<br>plicable regu | le state law, ha<br>ulations. | Month                 | ly and      | Year         |
| T<br>R<br>A<br>N<br>S<br>P | 17. Transporter 1 Acknowledgemen Printed Name  18. Transporter 2 Acknowledgemen   |  | Signature   | de  |                 |                               |                               | Month 5               | Day         | Year /       |
| R<br>T<br>E                | Printed Name  |  | Signature   |   |                 |                               |                               | Month                 | Day         | Year         |
| F A C I L I                | 19. Certificate of Final Treatment/D<br>I certify, on behalf of the above liste<br>applicable laws, regulations, permits<br>20. Facility Owner or Operator: Cer | d treatment facility, that<br>and licenses on the da                 | tes listed above.<br>on-hazardous materials co  | <i></i>   |                 |                               | was managed i                 | 1                     |             | 1.00         |
| Ϋ́                         | Printed Name White- TREATMENT, STORAGE, DISF  |  | Signature  Blue- GENERATOR  | 10  | )               |                               | ellow- GENERA                 | Month                 | Day.        | Year         |

Pink- FACILITY USE ONLY



26-1-5

Original Ticket# 1254060

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# 34

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739519

Time

Destination

In

Generator

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Scale 05/17/2018 12:48:09 Inbound 1 Out 05/17/2018 12:48:09

Operator

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

RB RB

Gross Tare

> Net Tons

61540 1b 25280 lb 36260 lb 18, 13

Comments

Product HOU Rate Tax LD% Qty Amount Origin COAL ASH & COAL CO 100 18.13 Tons PORTW



| 1. Generator's US EPA ID No. Manifest Doc No. |  |   |                      |                   | 2. Page 1 of   |                              |                                |  |
|---|--|---|----------------------|-------------------|--|------------------------------|--------------------------------|--|
|   |  |   |                      | 19:10             |  |                              |                                |  |
|   | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374 4. Generator's Phone 404-506-1365   | Generator's Site Address<br>GEORGIA POWER PL<br>155 CROSSGATE RD.<br>PORT WENTWORTH   | ANT KRAFT            | ling):            |  | est Number  /MNA  B. State ( | 6739519<br>Generator's ID      |  |
|   | 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name  7. Transporter 2 Company Name  |   | A ID Number          |                   | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID F. Transporter's Phone |                              |                                |  |
|   | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10. US E  | 10. US EPA ID Number |                   |  |                              | 912-927-6113                   |  |
| G   | 11. Description of Waste Materials   | Light state of the second | 12. Cont             | Court have been a | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol,         | I. Misc. Comments              |  |
| E<br>N<br>E                                   | a. COAL ASH& COAL CONTAMINATED WAST  |   | In34                 | Туре              | 18   | vvt./VOI.                    |                                |  |
| R<br>A<br>T<br>O<br>R                         | b. WM Profile # 375200GAF  WM Profile #  c.  | KKA   |                      |                   |  |                              |                                |  |
|   | WM Profile #   |   |                      |                   |  |                              |                                |  |
|   | WM Profile # J. Additional Descriptions for Materials Listed Above   |   | K. Disposa           | l Location        | 3201   | 79                           | Level 45                       |  |
|   | 15. Special Handling Instructions and Additional Inform  | ation   | Grid                 |                   | M  | 632                          |                                |  |
|   | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are accurately described, classified and packaged and are in Printed Name   | not hazardous wastes as d   | sportation accord    | rt 261 or a       | iny applicabl<br>olicable regu   | e state law, ha<br>lations.  | ove been fully and             |  |
| Т   | 17. Transporter 1 Acknowledgement of Receipt of Mate   | BR  |                      |                   |  | 1                            | 15/7/18                        |  |
| RANSPORTER                                    | Printed Name  18. Transporter 2 Acknowledgement of Receipt of Material Name  | Signature Signature   | ne u                 | ing               | 72   |                              | Month Day Year  Month Day Year |  |
| F A C L L T Y                                 | 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility applicable laws, regulations, permits and licenses on the 20. Facility Owner or Operator: Certification of receipt Printed Name  White-TREATMENT, STORAGE, DISPOSAL FACILITY COP | e dates listed above.  of non-hazardous materia  Signature  | ls covered by this   |                   |  | as managed ir                | Month Day Year                 |  |

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY-Pink- FACILITY USE ONLY



1 th 1 4

Original Ticket# 1254069

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Vehicle# bn25

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6739520

Time

Destination PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Generator

In 05/17/2018 12:59:22

Out 05/17/2018 12:59:22

Scale Inbound 1

LD%

RB RB

HOU

Operator

Container Driver

Billing # 0001037

Gen EPA ID NR

Rate

Deal Area

Check#

Gross Tare Net

Tons

Tax

56860 1b 22840 lb 34020 1b 17.01

Comments

Product 1 COAL ASH & COAL CO 100

17.01 Tons

Oty

Origin Amount

PORTW



| NON-HAZARDOUS MANIFEST   | 1. Generator's US EPA     |   | No.          | 2. Page 1    | of                       | 12.12           |                     |  |  |
|--|---------------------------|---|--------------|--------------|--------------------------|-----------------|---------------------|--|--|
|  | N /                       |   |              |              | 10.11                    |                 |                     |  |  |
| 3. Generator's Mailing Address:<br>GEORGIA POWER   |                           | erator's Site Address (If di            |              | ailing):     | A. Manife                | st Number       | 6739520             |  |  |
| 241 RALPH MCGILL BLVD NE, E  |                           | ORGIA POWER PLAN                        | IKKAFI       |              | W                        | MNA             | 0733320             |  |  |
| ATLANTA, GA 30308-3374   |                           | CROSSGATE RD.                           | 21407        |              | 100                      | B. State G      | Generator's ID      |  |  |
|  | 06-1365                   | RT WENTWORTH, GA                        | 4 31407      |              |                          |                 |                     |  |  |
| 5. Transporter 1 Company Name  | 70-1303                   | 6. US EPA ID                            | Number       |              |                          |                 |                     |  |  |
| 110-01-11-   | 11                        | O. USEPAIL                              | Number       |              | C State T                | ransporter's IE |                     |  |  |
| 1.00 Nal 131   | alling                    |   |              |              | a market and some second | orter's Phone   |                     |  |  |
| 7. Transporter 2 Company Name  |                           | 8. US EPA ID                            | Number       |              |                          |                 |                     |  |  |
|  |                           |   |              |              | E. State T               | ransporter's ID |                     |  |  |
| 9. Designated Facility Name and Site   | Address                   | 10. US EPA I                            | D Number     |              | F. Transpo               | orter's Phone   |                     |  |  |
| SUPERIOR LANDFILL  | Address                   | IO. USEPAT                              | D Number     |              | G. State F               | o ellitu ID     |                     |  |  |
| 3001 LITTLE NECK ROAD  |                           |   |              |              |                          |                 | 042.027.5440        |  |  |
| Savannah, GA 31419   |                           |   |              |              | H. State F               | acility Phone   | 912-927-6113        |  |  |
| , , , , , , , , , , , , ,  |                           |   |              |              |                          |                 |                     |  |  |
| G 11. Description of Waste Materials   |                           |   |              | ntainers     | 13. Total                | 14. Unit        | I. Misc. Comments   |  |  |
| a. COAL ASH& COAL CONTAM   | INIATED MACTE             |   | No.          | Туре         | Quantity                 | Wt./Vol.        | i. wisc. comments   |  |  |
| N  | INATED WASTE              | D                                       | 000          | NT           | 18                       |                 |                     |  |  |
| NAMA Profile   | # 375200GAKRA             | D                                       | HQ2          | 17           |                          |                 |                     |  |  |
| WM Profile i   | # 373200GAKKA             |   |              |              |                          |                 |                     |  |  |
| r  |                           |   | h            |              |                          |                 |                     |  |  |
| o  | M Profile #               |   |              | 25 65 65 66  |                          |                 |                     |  |  |
| c. W   | IVI Profile #             |   |              |              |                          |                 |                     |  |  |
|  |                           |   |              |              |                          |                 |                     |  |  |
| w  | M Profile #               |   |              |              |                          |                 |                     |  |  |
| d.   |                           |   |              |              |                          |                 |                     |  |  |
| The state of the s |                           |   |              |              |                          |                 |                     |  |  |
| w  | M Profile #               |   |              | Pennanc.     | and Herrich              | IF 22 MINNS     |                     |  |  |
| J. Additional Descriptions for Materi  | ials Listed Above         | K. Disposal Location                    |              |              |                          | n.              |                     |  |  |
|  |                           | 1 |              |              |                          |                 | (0)                 |  |  |
|  |                           |   | Cell<br>Grid | N            | 100                      | 12              | Level /             |  |  |
| 15. Special Handling Instructions and  | Additional Information    |   | Grid         | 1.           | 871                      | 36              |                     |  |  |
|  |                           |   |              |              | 0 1 4                    |                 |                     |  |  |
|  |                           |   |              |              |                          |                 |                     |  |  |
| Purchase Order # GPC1076029  | 3                         | EMERGENCY CON                           | ITACT / PHO  | ONE NO.:     | 7 1 - 1                  |                 |                     |  |  |
| 16. GENERATOR'S CERTIFICATE:   |                           |   |              | 14           |                          |                 |                     |  |  |
| I hereby certify that the above-describ  | ed materials are not ha   | azardous wastes as define               | ed by CFR Pa | art 261 or a | ny applicable            | e state law, ha | ve been fully and   |  |  |
| accurately described, classified and pa  | ckaged and are in prop    |   |              | rding to app | olicable regu            | lations.        |                     |  |  |
| Printed Name   |                           | Signature "On behal                     | f of"        |              |                          |                 | Month Day Year      |  |  |
| 17. Transporter 1 Acknowledgement  | of Receipt of Materials   | 01                                      |              |              |                          |                 | 31/11               |  |  |
| Printed Name   | of neceipt of iviaterials | Signature /                             | 9 -          | 1            |                          |                 | Month Day Year      |  |  |
| 1 1 19R1FF1  | 1                         | Signature /                             | 181          |              |                          |                 | S / / Y             |  |  |
| 18. Transporter 2 Acknowledgement  | of Receipt of Materials   | 104.00)                                 | Mes 1        | U            |                          |                 |                     |  |  |
| Printed Name   |                           | Signature                               |              |              |                          | FILE STEE       | Month Day Year      |  |  |
|  |                           |   |              |              |                          |                 |                     |  |  |
|  | nocal                     |   |              |              |                          |                 |                     |  |  |
| 19. Certificate of Final Treatment/Dis   |                           | to the hest of my knowle                | dge thoak    | ove-dosest   | ed wasta                 | as managed :-   | compliance with all |  |  |
| applicable laws, regulations, permits a  |                           |   | uge, trie ab | ove-describ  | eu waste W               | as managed in   | compliance with all |  |  |
| 20. Facility Owner or Operator: Certif   |                           |   | vered by th  | is manifest  | 7                        |                 |                     |  |  |
| Printed Name   | 1                         | Signature /                             | -            |              |                          |                 | Month Day Year      |  |  |
|  | 111                       | 6                                       |              |              |                          |                 | )///0               |  |  |
| White-TREATMENT, STORAGE, DISPO  | SAL FACILITY COPY         | Blue- GENERATOR #                       | 2 COPY       | The Fac      | Ye                       | llow- GENERA    | FOR #1 COPY         |  |  |
| Pink- FACILITY USE ON  | NLY                       | Gold- TRANSPORTER                       |              |              |                          |                 |                     |  |  |



Original Ticket# 1254076

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N

Ticket Date 05/17/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6739521

Destination

Generator

Vehicle# BN24 Container Driver Check#

Billing # 0001037 Gen EPA ID NR

Volume

Profile 375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/17/2018 13:13:21

Out 05/17/2018 13:13:21

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Gross 56480 1b Tare 21800 lb Net 34680 1b 17.34 Tons

Comments

Product Qty HOM Rate

1 COAL ASH & COAL CO 100 17.34 Tons

PORTW

Origin

Total Tax Total Ticket

Amount



|        |  | 1. Generator's US EP.    | A ID No. Ma                  | anifest Doc No.  | 2. Page 1 c  | f  |  |  |
|--------|--|--------------------------|------------------------------|--|--|--|--|--|
|        | NON-HAZARDOUS MANIFEST                                   | N /                      |                              | mirest bot No.   | 2. rage 10   |  | 17:30  |  |
|        | 3. Generator's Mailing Address:                          |                          | erator's Site Address (If di | (fforout then mailing)   | A. Manifes   | - N1 - 1   | 10.27  |  |
|        | GEORGIA POWER  |                          |                              | ORGIA POWER PLANT KRAFT  |  |  | 6739521  |  |
|        | 241 RALPH MCGILL BLVD NE, B                              | CROSSGATE RD.            |                              | W  | MNA  | The state of the s |  |  |
|        | ATLANTA, GA 30308-3374                                   | RT WENTWORTH, GA         | A 31407                      |  | B. State C   | Generator's ID   |  |  |
|        |  | 06-1365                  |                              |  |  |  |  |  |
|        | 5. Transporter 1 Company Name                            |                          | 6. US EPA ID                 | Number   |  |  | TO HAVE THE TOTAL  |  |
|        | 118001140  | -1'00                    |                              |  |  | ansporter's IE   |  |  |
|        | 7. Transporter 2 Company Name                            | CHILL                    | 8. US EPA ID                 | Number   | D. Transpo   | rter's Phone   |  |  |
| 3.1    |  |                          | O. OSEFAIL                   | Number   | E. State Tra   | ansporter's ID   |  |  |
|        |  | V                        |                              |  |  | rter's Phone   | and the second s |  |
| 4      | 9. Designated Facility Name and Site A SUPERIOR LANDFILL | Address                  | 10. US EPA I                 | D Number   |  |  |  |  |
| 8      | 3001 LITTLE NECK ROAD                                    |                          |                              |  | G. State Fa  | cility ID  |  |  |
| n      | Savannah, GA 31419                                       |                          |                              |  | H. State Fa  | cility Phone   | 912-927-6113   |  |
| H      | Savailiali, GA 31419                                     |                          |                              |  |  |  |  |  |
| _      | 11. Description of Waste Materials                       |                          |                              | 12. Containers   | 13. Total  | 14. Unit   |  |  |
| G<br>E | a. COAL ASH& COAL CONTAMI                                | NATED WASTE              |                              | No. Type   | Quantity   | Wt./Vol.   | I. Misc. Comments  |  |
| N      | a. COAL ASTIQ COAL CONTAINII                             | WASTE WASTE              | D                            | nould  | 18   |  |  |  |
| E<br>R | W/M Profile #  | 375200GAKRA              | P                            | 121  | 110  |  |  |  |
| A      | b.   | 3732000AKKA              |                              |  |  |  |  |  |
| Т      |  |                          |                              |  |  |  |  |  |
| O<br>R | wr   | M Profile #              |                              | Logical design of the control of the |  |  |  |  |
| _      | c,   |                          |                              | IN A PHILIPPIN CONTRACTOR  | HE SECTION OF THE SEC |  |  |  |
|        |  |                          |                              |  | -  |  |  |  |
|        | d.   | M Profile #              |                              |  |  |  |  |  |
|        | d.   |                          |                              | 1 1  |  |  |  |  |
|        |  |                          |                              |  |  | S 074 No   |  |  |
|        | J. Additional Descriptions for Materia                   | VI Profile #             |                              |  |  |  |  |  |
|        | * Additional Descriptions for Wateria                    | as Listeu Above          |                              | K. Disposal Location   | 1  |  |  |  |
|        |  |                          |                              | Cell 3   |  |  |  |  |
|        | 25 C 111 W   |                          |                              | 2511   | 6) 6 (0)+  |  |  |  |
|        | 15. Special Handling Instructions and A                  | Additional Information   |                              | 1  |  |  |  |  |
|        |  |                          |                              |  |  |  |  |  |
| 1      | Purchase Order # GPC10760293                             |                          | EMERGENCY CON                | ITACT / PHONE NO.:   |  | · Paul   |  |  |
|        | 16. GENERATOR'S CERTIFICATE:                             |                          | LIVIENGENCI CON              | TACT / PHONE NO.;  |  |  |  |  |
|        | I hereby certify that the above-describe                 | ed materials are not ha  | azardous wastes as define    | ed by CFR Part 261 or  | any applicable   | state law, ba  | ve heen fully and  |  |
|        | accurately described, classified and pac                 | kaged and are in prop    | er condition for transport   | tation according to ap   | plicable regula  | tions.   | ve been fully aftu   |  |
|        | Printed Name B + 11 pource                               | 7                        | Signature "On behalf         | of"  |  |  | Month Day Year   |  |
| т      | 17. Transporter 1 Acknowledgement o                      | f Passint of Materials   | 13,1                         |  |  |  | 51/71/8  |  |
| R -    | Printed Name   | r neceipt of iviaterials | Signature                    | 1 1  |  |  | Month Day  |  |
| N<br>S | 7 /20 / bell 8   |                          | Signature                    | Live   |  |  | Month Day Year   |  |
| PO     | 18. Transporter 2 Acknowledgement o                      | f Receipt of Materials   | 1000                         | Jerry -  |  |  | - 3 1/ / //0   |  |
| R<br>T | Printed Name   | AND THE WAR              | Signature                    |  | AVEL 1-1   |  | Month Day Year   |  |
| E<br>R |  |                          |                              |  |  |  |  |  |
|        | 19. Certificate of Final Treatment/Disp                  | osal                     |                              |  |  |  |  |  |
| F<br>A | I certify, on behalf of the above listed to              |                          | to the best of my knowle     | dge, the above-descri  | bed waste was  | s managed in   | compliance with all  |  |
| C      | applicable laws, regulations, permits ar                 | nd licenses on the date  | es listed above.             |  |  | -300 ///   |  |  |
| L      | 20. Facility Owner or Operator: Certific                 | cation of receipt of no  | n-hazardous materials co     | vered by this manifest   |  |  |  |  |
| Y      | Printed Name   |                          | Signature                    | 3)   |  |  | Month Day Year   |  |
| _      | Militar TDEATAGEN STOCKE                                 | AL FACILITY CONT         | 11/5                         | )  |  | <u> </u>   | )//(   |  |
|        | White-TREATMENT, STORAGE, DISPOS                         | AL FACILITY COPY         | Blue- GENERATOR #            | Z COPY   | Yello  | w- GENERAT   | OR #1 COPY   |  |

Pink- FACILITY USE ONLY



Original Ticket# 1254087

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS

Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket#

Route

State Waste Code

Manifest 6739522

Destination

PO

Profile

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/17/2018 13:28:17 Out 05/17/2018 13:28:17

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Gross Tare Net

59340 15 25340 1b 34000 lb

Tons

17.00

Comments

Vehicle# L10

Container Driver

Billing #

Gen EPA ID NR

Check#

LIOM LD% Qty Product

Tax Rate

0001037

Amount

Origin

COAL ASH & COAL CO 100

17.00 Tons

PORTW



|                       | NON-HAZARDOUS MANIFEST  1. Generator's US N  | EPA ID No. Ma  | nifest Doc    | No.               | 2. Page 1  | of                           | 12:50                              |  |
|-----------------------|--|--|---------------|-------------------|--|------------------------------|------------------------------------|--|
|                       | 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221  | Generator's Site Address (If di<br>GEORGIA POWER PLAN<br>155 CROSSGATE RD.<br>PORT WENTWORTH, GA | T KRAFT       | nailing):         |  | est Number  (MNA  B. State ( | 6739522<br>Generator's ID          |  |
|                       | 5. Transporter 1 Company Name 7. Transporter 2 Company Name  | 6. US EPA ID   |               |                   | C. State Transporter's ID D. Transporter's Phone  E. State Transporter's ID F. Transporter's Phone  G. State Facility ID H. State Facility Phone  912-927-6113 |                              |                                    |  |
|                       | 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10. US EPA I   | D Number      |                   |  |                              |                                    |  |
| G                     | 11. Description of Waste Materials   | Distribution desired at the little   | 12. Co<br>No. | ontainers<br>Type | 13. Total<br>Quantity  | 14. Unit<br>Wt./Vol.         | 1. Misc. Comments                  |  |
| E<br>N<br>E           | a. COAL ASH& COAL CONTAMINATED WASTE   | L.   | 10            | DT                | .18  |                              |                                    |  |
| R A T O R             | b.  WM Profile # 375200GAKF  | VA T   |               |                   |  | *                            |                                    |  |
|                       | C. WM Profile #  |  |               |                   | 2 10 2 5   |                              |                                    |  |
|                       | d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  |  | Cell          | sal Location      | 0/ 20  | ( ) ()                       | Level                              |  |
|                       | Purchase Order # GPC10760293  16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are no accurately described, classified and packaged and are in printed Name  | EMERGENCY CON  | ed by CFR F   | Part 261 or a     | any applicable   | e state law, ha              | ove been fully and  Month Day Year |  |
| T R A N S P O R T E R | 17. Transporter 1 Acknowledgement of Receipt of Mater Printed Name  18. Transporter 2 Acknowledgement of Receipt of Mater Printed Name   | Signature  | Wa            | nny               | 02   |                              | Month Day Year  Month Day Year     |  |
| F A C L L I T Y       | 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, tapplicable laws, regulations, permits and licenses on the 20. Facility Owner or Operator: Certification of receipt of Printed Name  White-TREATMENT, STORAGE, DISPOSAL FACILITY COPY | dates listed above.<br>f non-hazardous materials co<br>Signature                                 | vered by t    |                   |  | as managed ir                | Month Day Year                     |  |

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY Gold- TRANSPORTER #1 COPY



Original Ticket# 1254095

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier LEEKS Ticket Date 05/17/2018 Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code Manifest 6824109

Destination

PO Profile

Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time In 05/17/2018 13:38:09 Out 05/17/2018 13:38:09

Scale Inbound 1

Operator LBEJARAN LBEJARAN

Gross Tare Net Tons

57380 lb 25240 16 32140 lb 16.07

Comments

Vehicle# LØ7

Container

Billing #

Gen EPA ID NR

0001037

Driver

Check#

Product LD% Qty HOU Rate Tax Amount Origin

COAL ASH & COAL CO 100

16.07 Tons

PORTW



| NON-HAZARDOUS MANIFEST  1. Generator   | s US EPA ID No.  | Manife                | st Doc No.                             | 2. Page 1   | of                        | 12'                          | N3            |  |  |
|--|--|-----------------------|--|---|---------------------------|------------------------------|---------------|--|--|
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374   | Generator's Site A<br>GEORGIA POW<br>155 CROSSGA<br>PORT WENTW | VER PLANT K<br>TE RD. | RAFT                                   |   | est Number MNA B. State C | 6824109<br>te Generator's ID |               |  |  |
| 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name  7. Transporter 2 Company Name  | 6.   | US EPA ID Nu          |  | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID F. Transporter's Phone |                           |                              |               |  |  |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10.  | US EPA ID N           | umber                                  | G. State F  |                           | 912-92                       | 27-6113       |  |  |
| G 11. Description of Waste Materials   | Distribution of the second                                     |                       | 12. Containers No. Type                | 13. Total<br>Quantity   | 14. Unit<br>Wt./Vol.      | I. Mis                       | sc. Comments  |  |  |
| a. COAL ASH& COAL CONTAMINATED WAS<br>E  | STE  | L.                    | .0707                                  | 18  |                           |                              |               |  |  |
| R WM Profile # 375200G   | AKRA   |                       |  |   |                           |                              |               |  |  |
| A b. T O R c. WM Profile #   |  |                       |  |   |                           |                              |               |  |  |
| WM Profile #   |  |                       |  |   |                           |                              |               |  |  |
| d.  WM Profile #  J. Additional Descriptions for Materials Listed Above  | ve   |                       | Disposal Locatio                       | 15 15 15 15 15 15   |                           |                              |               |  |  |
| 15. Special Handling Instructions and Additional Information   |  |                       |  |   |                           |                              |               |  |  |
| Purchase Order # GPC10760293   | EME  | RGENCY CONTA          | T / PHONE NO.:                         |   |                           |                              |               |  |  |
| 16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials a accurately described, classified and packaged and are Printed Name  | re not hazardous was<br>e in proper condition                  | tes as defined b      | y CFR Part 261 or<br>on according to a |   |                           | ve been full                 | y and Day Yea |  |  |
| 17. Transporter 1 Acknowledgement of Receipt of M  | laterials  | J                     | 1                                      |   |                           | 151                          | 1/1/0         |  |  |
| Printed Name   | Signatur   | e (e                  | els                                    |   |                           | Month Day Year               |               |  |  |
| Printed Name   | Signatur   | re                    |  |   |                           | Month                        | Day Yea       |  |  |
| 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facil applicable laws, regulations, permits and licenses on 20. Facility Owner or Operator: Certification of rece | the dates listed abov  | e.<br>materials cover |  |   | vas managed ir            | ) compliance                 | e with all    |  |  |
| White-TREATMENT, STORAGE, DISPOSAL FACILITY C  | OPY Blue-G   | ENERATOR #2 C         | OPY                                    | Ye  | llow- GENERA              | TOR #1 COP                   | Y             |  |  |

Pink- FACILITY USE ONLY



01 - 10

Original Ticket# 1254121

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/17/2018

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6824110

Destination

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE) Profile Generator 126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time

In 05/17/2018 14:30:59 Out 05/17/2018 14:30:59

Scale

Inbound 1

Operator RB

RB

Vehicle# 34

Billing # 0001037 Gen EPA ID NR

Container Driver

Check#

Gross Tare Net Tons

57860 15 25280 lb 32580 lb 16.29

Comments

#### WASTE WANAGEMENT

| Pro | duct          | LD%   | Qty  | LOM  | Rate   | Tax | Amount | Origin   |
|-----|---------------|---|--|--|--|-----|--------|--|
|     |               | the trans course and when their signs acres were could be the | an artis palas salai. Unite John Male artis salai 1931 | N MANY ARREST SCHOOL ACCRES (MICH. STRAIG MANY | a ligad court many lottle plant come from these field come 5 |     |        | and many sails have been sold and their many that when their |
| 1   | COAL ASH & CO | AL CO 100   | 16,29  | Tons   |  |     |        | PORTW  |



|  | r's US EPA ID N   | ID No. Manifest Doc No.  |                |               |  | of                           |                                |  |
|--|-------------------|--|----------------|---------------|--|------------------------------|--------------------------------|--|
| NON-HAZARDOUS MANIFEST   | N/A               |  |                |               |  |                              | 1:50                           |  |
| 3. Generator's Mailing Address: GEORGIA POWER 241 RALPH MCGILL BLVD NE, BIN#10221 ATLANTA, GA 30308-3374   | GEORGI<br>155 CRO | or's Site Address (If d<br>IA POWER PLAN<br>OSSGATE RD.<br>VENTWORTH, GA | T KRAFT        | ailing):      | A. Manife  | 6824110<br>Generator's ID    |                                |  |
| 4. Generator's Phone 404-506-1365  5. Transporter 1 Company Name  7. Transporter 2 Company Name  | 8.                |  | Number  Number |               | C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID |                              |                                |  |
| 9. Designated Facility Name and Site Address SUPERIOR LANDFILL 3001 LITTLE NECK ROAD Savannah, GA 31419  | 10                | ). US EPA  | ID Number      |               | G. State F   | 912-927-6113                 |                                |  |
| 11 Description of Wester Metanicals  |                   | namikus en espiritus.  | 12. Co         | ntainers      | 13. Total  | 14. Unit                     | L Miss Comments                |  |
| G 11. Description of Waste Materials  a. COAL ASH& COAL CONTAMINATED WASH  WM Profile # 375200   |                   | 3  | no.            | Туре          | Quantity   | Wt./Vol.                     | I. Misc. Comments              |  |
| b. T O R C. WM Profile #   |                   |  |                |               |  |                              |                                |  |
| d. WM Profile #  |                   |  |                |               |  |                              |                                |  |
| WM Profile #  J. Additional Descriptions for Materials Listed Ab   |                   |  | K. Dispos      | sal Location  | 129  | 16mi                         | Level 32EGF                    |  |
| 15. Special Handling Instructions and Additional In  | formation         |  |                |               |  |                              |                                |  |
| Purchase Order # GPC10760293   | 2                 | EMERGENCY CO   | NTACT / PH     | ONE NO.:      |  |                              |                                |  |
| 16. GENERATOR'S CERTIFICATE:  I hereby certify that the above-described materials accurately described, classified and packaged and a Printed Name   | are in proper co  | dous wastes as defir<br>ondition for transpo<br>Signature "On beha       | rtation acco   | Part 261 or a | any applicabl<br>plicable regu   | le state law, h<br>llations. | Month Day Year                 |  |
| 17. Transporter 1 Acknowledgement of Receipt of Printed Name  18. Transporter 2 Acknowledgement of Receipt of Printed Name  E E CAL WALLEW COOL  |                   | Signature  |                |               |  |                              | Month Day Year  Month Day Year |  |
| 19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment fa applicable laws, regulations, permits and licenses of the certification of respect to the certification of respect to the certification of the certification of respect to the certification of the certifica | on the dates lis  | ted above.   |                |               |  | vas managed                  | in compliance with all         |  |
| White- TREATMENT, STORAGE, DISPOSAL FACILITY   |                   | Signature Blue- GENERATOR  | >)             |               |  | ellow- GENER                 | Month Day Year ATOR#1 COPY     |  |
| Pink- FACILITY USE ONLY  |                   | Gold- TRANSPORTE   | R #1 COPY      |               |  |                              |                                |  |



Original Ticket# 1254124

Volume

Customer Name GEORGIAPOWE375200GAKRA GEORGI Carrier B AND N Ticket Date 05/17/2018 Vehicle# bn25

Payment Type Credit Account

Manual Ticket# Hauling Ticket# Route

State Waste Code

Manifest 6824111

Destination PO

Profile Generator

375200GAKRA (COAL ASH & COAL CONTAMINATED WASTE)

126-GEORGIAPWRCHAT GEORGIA POWER - PLANT KRAFT

Time 05/17/2018 14:34:47 Dut 05/17/2018 14:34:47

Scale Inbound 1

Operator RB

RB

21 - 40

Container

Billing # 0001037

Gen EPA ID NR

Driver

Check#

Gross Tare

59280 1b 22840 1b 36440 1b 18.22

Net Tons

Comments

In

Product LD% Qty MOU Rate Tax Amount Origin

COAL ASH & COAL CO 100 18.22 Tons PORTW