Feeney, John M - DNR

From: Manthey, Mark <Mark.Manthey@tetratech.com>
Sent: Thursday, April 01, 2021 12:10 PM
To: Feeney, John M - DNR
Subject: RE: TIF 12
Attachments: EZ Profile.pdf

Here's a copy of the unsigned Waste Profile form.

Mark A. Manthey, P.G. | Associate Hydrogeologist | Tetra Tech
Direct **(262) 207-3458** | Office **(262) 792-1282** | mark.manthey@tetratech.com

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From: Manthey, Mark
Sent: Thursday, April 1, 2021 11:55 AM
To: Feeney, John M - DNR <JohnM.Feeney@wisconsin.gov>
Subject: RE: TIF 12

I don't have copies of the paperwork from North Shore yet.

Mark A. Manthey, P.G. | Associate Hydrogeologist | Tetra Tech
Direct **(262) 207-3458** | Office **(262) 792-1282** | mark.manthey@tetratech.com

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From: Feeney, John M - DNR <JohnM.Feeney@wisconsin.gov>
Sent: Thursday, April 1, 2021 11:53 AM
To: Manthey, Mark <Mark.Manthey@tetratech.com>
Subject: RE: TIF 12

⚠ **CAUTION:** This email originated from an external sender. Verify the source before opening links or attachments. ⚠

Thanks Mark. Can you send me a copy?

We are committed to service excellence.
Visit our survey at http://dnr.wi.gov/customersurvey to evaluate how I did.

John Feeney
Phone: 262-416-8643
Johnm.feeney@wisconsin.gov

From: Manthey, Mark <Mark.Manthey@tetratech.com>
Sent: Thursday, April 01, 2021 11:52 AM
To: Feeney, John M - DNR <JohnM.Feeney@wisconsin.gov>
Subject: RE: TIF 12

The soil taken to the landfill was not characterized as hazardous waste. The contractor taking the soil to the landfill, North Environmental Construction, handled the landfill paperwork.

Mark A. Manthey, P.G. | Associate Hydrogeologist | Tetra Tech
Direct **(262) 207-3458** | Office **(262) 792-1282** | mark.manthey@tetratech.com

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From: Feeney, John M - DNR <JohnM.Feeney@wisconsin.gov>
Sent: Thursday, April 1, 2021 11:45 AM
To: Manthey, Mark <Mark.Manthey@tetratech.com>
Subject: TIF 12

⚠ **CAUTION:** This email originated from an external sender. Verify the source before opening links or attachments. ⚠

Mark one question I forgot to ask – did you do a haz waste determination on the soil to be landfilled? I remember asking you to submit the form.

We are committed to service excellence.
Visit our survey at http://dnr.wi.gov/customersurvey to evaluate how I did.

John Feeney, Wisconsin PG #750
Hydrogeologist, Remediation & Redevelopment Program
Wisconsin Department of Natural Resources
1155 Pilgrim Road, Plymouth WI 53073
Phone: 262-416-8643
johnm.feeney@wisconsin.gov

dnr.wi.gov

WASTE MANAGEMENT

EZ Profile™

Requested Facility: Orchard Ridge RDF ☐ Unsure Profile Number: _____

☐ Multiple Generator Locations (Attach Locations) ☐ Request Certificate of Disposal ☐ Renewal? Original Profile Number: _____

A. GENERATOR INFORMATION (MATERIAL ORIGIN)

1. Generator Name: Former Gehl Equipment
2. Site Address: 143 E Water Street
   (City, State, ZIP) West Bend, WI 53095
3. County: Washington
4. Contact Name: Mark Piotrowicz
5. Email: piotrowm@ci.west-bend.wi.us
6. Phone: (262) 335-5113 7. Fax: _____
8. Generator EPA ID: _____ ☑ N/A
9. State ID: _____ ☑ N/A

B. BILLING INFORMATION ☐ SAME AS GENERATOR

1. Billing Name: North Shore Environmental Construction, Inc.
2. Billing Address: N117 W18493 Fulton Drive
   (City, State, ZIP) Germantown, WI 53022
3. Contact Name: Dave Johnson
4. Email: davej@nsecinc.com
5. Phone: (262) 255-4468 6. Fax: _____
7. WM Hauled? ☐ Yes ☐ No
8. P.O. Number: _____
9. Payment Method: ☑ Credit Account ☐ Cash ☐ Credit Card

C. MATERIAL INFORMATION

1. Common Name: Dry Soil
   Describe Process(es) Generating Material: ☐ See Attached
   Stockpiled soil due to excavation at site.
2. Material Composition and Contaminants: ☐ See Attached

1. Soil	100
2.	
3.	
4.	
Total comp. must be equal to or greater than 100%	≥100%

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

D. REGULATORY INFORMATION

1. EPA Hazardous Waste? ☐ Yes* ☑ No
   Code: _____
2. State Hazardous Waste? ☐ Yes ☑ No
   Code: _____
3. Is this material non-hazardous due to Treatment, Delisting, or an Exclusion? ☐ Yes* ☑ No
4. Contains Underlying Hazardous Constituents? ☐ Yes* ☑ No
5. From an industry regulated under Benzene NESHAP? ☐ Yes* ☑ No
6. Facility remediation subject to 40 CFR 63 GGGGG? ☐ Yes* ☑ No
7. CERCLA or State-mandated clean-up? ☐ Yes* ☑ No
8. NRC or State-regulated radioactive or NORM waste? ☐ Yes* ☑ No

***If Yes, see Addendum (page 2) for additional questions and space.**

9. Contains PCBs? → If Yes, answer a, b and c. ☐ Yes ☑ No
   a. Regulated by 40 CFR 761? ☐ Yes ☑ No
   b. Remediation under 40 CFR 761.61 (a)? ☐ Yes ☑ No
   c. Were PCB imported into the US? ☐ Yes ☑ No
10. Regulated and/or Untreated Medical/Infectious Waste? ☐ Yes ☑ No
11. Contains Asbestos? ☐ Yes ☑ No
    → If Yes: ☐ Non-Friable ☐ Non-Friable – Regulated ☐ Friable

E. ANALYTICAL AND OTHER REPRESENTATIVE INFORMATION

1. Analytical attached ☑ Yes
   Please identify applicable samples and/or lab reports:
   # 40208803 and # 40219781
2. Other information attached (such as MSDS)? ☐ Yes

F. SHIPPING AND DOT INFORMATION

1. ☑ One-Time Event ☐ Repeat Event/Ongoing Business
2. Estimated Quantity/Unit of Measure: 1800
   ☐ Tons ☑ Yards ☐ Drums ☐ Gallons ☐ Other: _____
3. Container Type and Size: _____
4. USDOT Proper Shipping Name: ☑ N/A

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

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

☐ **I am an Authorized Agent signing on behalf of the Generator, and I have confirmed with the Generator that information contained in this profile, as well as supporting documents provided, are accurate and complete.**

Name (Print): _____ Date: _____

Title: _____

Company: _____

Certification Signature

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