DSHW-006B1
Rev. 1/98
Part 1

New Jersey Department of Environmental Protection
Solid and Hazardous Waste Management Program

Solid Waste Facility Quarterly Disposal and Materials Recovery Report

Facility Name: New Jersey Rail Carriers **Facility Registration #:** 203268

Report Submitted By: _____

Phone #: 732-271-2800 **Reporting Period:** 3rd Qtr 2011 Year

MONTHLY SUMMARY			
NOTE	WASTE TYPES	SOLIDS	TOTAL AMOUNT (IN TONS)
The filing of this report is required by New Jersey Solid Waste Regulation N.J.A.C. 7:26-2.13(e). Failure to submit this report on a monthly basis may result in the imposition of a penalty per N.J.S.A. 13:1E-9 et seq. and/or revocation of license. A complete monthly report consists of one page each of Form DWM-006B-1, 2, and 3, (Part 1, Part 2, and Part 3). Additional "Part 2" forms must be filed for each final disposal facility and/or county of waste origin. All forms (Parts 1, 2, and 3) must be submitted to the NJDEP (address below) within 20 days after the last day of each month.	10	Household & Municipal	248,414.20
	13	Bulky Waste	
	13C	Construction & Demolition	30,028.66
	23	Vegetative Waste	
	25	Animal & Food Processing	
	27 Non Fri	Dry Industrial	
	27A	Asbestos	
	27I	Incinerator Ash	
	Other:	Identify: Sludge	72,477.60
		Total Disposed (From Part 2)	
	27R	Soil	3,211.03
		Total Recycled (From Part 3)	

I certify that the information entered above is true to the best of my knowledge.

Signature: _____ Title: Office Manager Date: 2/17/12

6.15.12

THIS FORM MUST BE SUBMITTED WITHIN 20 DAYS AFTER THE LAST DAY OF EVERY MONTH TO:

NJ Department of Environment Protection
Solid and Hazardous Waste Management Program
Bureau of Recycling and Planning
401 East State Street
PO BOX 0414
Trenton, NJ 08625
Attn: Pat Elias (609) 984-3438

and

County Solid Waste Department where facility is located (See Division Web Page at:

http:/www.state.nj.us/dep
Attn: County SW Coordinator

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 3rd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN:	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
New York 7/2011	53410.50		1564.77						2168.17	76643.44
8/2011	40704.25		2103.14						23902.97	66710.36
9/2011	32975.63		866.60						17726.59	51568.82
TOTAL TONS										194,922.62

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ (Town/County/State) **Reporting Period:** 3rd (Qtr) 2011 (Year)

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Essex	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
Cardella 7/2011			4239.21							4239.21
8/2011			7901.53							7901.53
9/2011			7910.57							7910.57
Lemcor 7/2011	1858.13									1858.13
8/2011	1699.62									1699.62
9/2011	3850.72									3850.72
TOTAL TONS										27,459.78

I certify that the information entered above is true to the best of my knowledge.

Signed _____ 6.15.12 **Title** Office Manager **Date** _____

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 3rd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Hudson	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
ESI 7/2011			1026.23							1026.23
8/2011			7184.53							7184.53
9/2011			2846.33							2846.33
IWS JerseyCity 7/2011	23840.01									23840.01
8/2011	27214.45									27214.45
9/2011	25487.09									25487.09
Spectra Serv 7/2011									3133.49	3133.49
8/2011									3474.57	3474.57
9/2011									2571.81	2571.81
TOTAL TONS										96,778.51

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** _____

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 3rd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Middlesex	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
S. Plainfield 8/2011			38.34							38.34
9/2011			532.24							532.24
TOTAL TONS										570.58

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 3rd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Bergen	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
ELS Transfer 7/2011	8954.87									8954.87
8/2011	8925.51									8925.51
9/2011	8373.14									8373.14
Eagle Recy 8/2011			1927.86							1927.86
9/2011			2944.40							2944.40
TOTAL TONS										31,125.78

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Vice Manager **Date** 6.15.11

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 3rd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Somerset	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
BRI 9/2011	63.19									63.19
TOTAL TONS										63.19

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 3rd Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Bergen	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Lodi 7/2011						547.26				547.26
8/2011						549.01				549.01
TOTAL TONS										

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers,Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, Noncontaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 3rd Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Hudson	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Clean Earth 8/2011						773.28				773.28
9/2011						548.42				548.42
TOTAL TONS										

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers,Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, No contaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** _____

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 3rd Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Middlesex	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Ford 8/2011						68.81				68.81
TOTAL TONS										68.81

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers,Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, No contaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

certify that the information entered above is true to the best of my knowledge.

Signed _____ 6.15.12 **Title** Office Manager **Date** _____

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 3rd Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Middlesex	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
7/2011						652.73				652.73
8/2011						71.52				71.52
TOTAL TONS										724.25

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers,Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, No contaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

MONTHLY SUMMARY REPORT

DATE: 7/01/2011 - 7/31/2011

WASTE TYPE	TONS	DESTINATION
10	89089.74	APEX LANDFILL, OH
13C	5803.98	APEX LANDFILL, OH
27		APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	1199.99	APEX LANDFILL, OH
SLUDGE	24801.66	APEX LANDFILL, OH
TOTAL TONS	**120895.37**	

MONTHLY SUMMARY REPORT

DATE: 8/01/2011 - 8/31/2011

WASTE TYPE	TONS	DESTINATION
10	85728.36	APEX LANDFILL, OH
13C	11970.87	APEX LANDFILL, OH
27		APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	1462.62	APEX LANDFILL, OH
SLUDGE	27377.54	APEX LANDFILL, OH
TOTAL TONS	**126539.39**	

MONTHLY SUMMARY REPORT

DATE: 9/01/2011 - 9/30/2011

WASTE TYPE	TONS	DESTINATION
10	73596.1	APEX LANDFILL, OH
13C	12253.81	APEX LANDFILL, OH
27		APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	548.42	APEX LANDFILL, OH
SLUDGE	20298.4	APEX LANDFILL, OH
TOTAL TONS	**106696.73**	

DSHW-006B1
Rev. 1/98
Part 1

New Jersey Department of Environmental Protection
Solid and Hazardous Waste Management Program

Solid Waste Facility Quarterly Disposal and Materials Recovery Report

Facility Name: New Jersey Rail Carriers **Facility Registration #:** 2032268

Report Submitted By: _____

Phone #: 732-271-2800 **Reporting Period:** 2nd Qtr 2011 Year

MONTHLY SUMMARY			
NOTE	WASTE TYPES	SOLIDS	TOTAL AMOUNT (IN TONS)
The filing of this report is required by New Jersey Solid Waste Regulation N.J.A.C. 7:26-2.13(e). Failure to submit this report on a monthly basis may result in the imposition of a penalty per N.J.S.A. 13:1E-9 et seq. and/or revocation of license. A complete monthly report consists of one page each of Form DWM-006B-1, 2, and 3, (Part 1, Part 2, and Part 3). Additional "Part 2" forms must be filed for each final disposal facility and/or county of waste origin. All forms (Parts 1, 2, and 3) must be submitted to the NJDEP (address below) within 20 days after the last day of each month.	10	Household & Municipal	274,249.07
	13	Bulky Waste	
	13C	Construction & Demolition	21,060.47
	23	Vegetative Waste	
	25	Animal & Food Processing	
	27 Non Fri	Dry Industrial	359.88
	27A	Asbestos	
	27I	Incinerator Ash	
	Other:	Identify: Sludge	73,922.66
		Total Disposed (From Part 2)	
	27R	Soil	4,400.37
		Total Recycled (From Part 3)	

I certify that the information entered above is true to the best of my knowledge.

Signature: _____ Title: Office Manager Date: 2-17-12

THIS FORM MUST BE SUBMITTED WITHIN 20 DAYS AFTER THE LAST DAY OF EVERY MONTH TO:

NJ Department of Environment Protection
Solid and Hazardous Waste Management Program
Bureau of Recycling and Planning
401 East State Street
PO BOX 0414
Trenton, NJ 08625
Attn: Pat Elias (609) 984-3438

and

County Solid Waste Department where facility is located (See Division Web Page at:

http:/www.state.nj.us/dep
Attn: County SW Coordinator

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 2nd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN:	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
New York 4/2011	48676.02		1550.88						11839.93	62066.83
5/2011	56353.95		1539.30						26966.32	84859.57
6/2011	55502.44		1248.57						23445.83	80196.84
TOTAL TONS										227,123.24

I certify that the information entered above is true to the best of my knowledge.

Signed _____ 6.15.12 **Title** Office Manager **Date** _____

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 2nd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Essex	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
ESI 4/2011	1270.74									1270.74
5/2011	1373.63									1373.63
6/2011	1636.02									1636.02
Lemcor 4/2011	4383.83									4383.83
5/2011	2730.59									2730.59
6/2011	1962.39									1962.39
TOTAL TONS										13,357.20

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6/15/12

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ (Town/County/State) **Reporting Period:** 2nd (Qtr) 2011 (Year)

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Hudson	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
Cardella 4/2011			7309.89							7309.89
5/2011			3899.76							3899.76
6/2011			5097.39							5097.39
IWS JerseyCity 4/2011	29079.99									29079.99
5/2011	26827.77									26827.77
6/2011	24857.44									24857.44
Spectra Serv 4/2011									4142.45	4142.45
5/2011									3845.06	3845.06
6/2011									3683.07	3683.07
TOTAL TONS										108,742.82

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ (Town/County/State) **Reporting Period:** 2nd (Qtr) 2011 (Year)

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Middlesex	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
S. Plainfield 4/2011			18.09							18.09
TOTAL TONS										18.09

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** _____

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 2nd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Bergen	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
4/2011			295.48							295.48
TOTAL TONS										295.48

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** _____

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ (Town/County/State) **Reporting Period:** 2nd (Qtr) 2011 (Year)

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Bergen	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
ELS Transfer 4/2011	5938.58									5938.58
5/2011	5524.22									5524.22
6/2011	8123.03									8123.03
Secaucus 5/2011			83.14							83.14
6/2011			17.97							17.97
TOTAL TONS										

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 2nd Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Union	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
4/2011						90.01				90.01
5/2011						247.13				247.13
6/2011						22.74				22.74
TOTAL TONS										359.88

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ (Town/County/State) **Reporting Period:** 2nd (Qtr) 2011 (Year)

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Bergen	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
	8.43									8.43
TOTAL TONS										8.43

I certify that the information entered above is true to the best of my knowledge.

Signed _____ 6.15.12 **Title** Office Manager **Date** _____

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 2nd Qtr 2011 Year

COUNTY OF WASTE ORIGIN:	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
New York 4/2011						856.11				856.11
5/2011						1212.57				1212.57
6/2011						286.80				286.80
TOTAL TONS										2,355.48

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers,Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, Noncontaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** _____

6/15/11

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 2nd Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Hudson	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Clean Earth 4/2011						512.77				512.77
5/2011						743.24				743.24
6/2011						788.88				788.88
										2,044.89

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers,Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, No contaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

MONTHLY SUMMARY REPORT

DATE: 4/1/2011 - 4/30/2011

WASTE TYPE	TONS	DESTINATION
10	89349.16	APEX LANDFILL, OH
13C	9174.34	APEX LANDFILL, OH
27	90.01	APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	704.23 664.65	APEX LANDFILL, OH HERITAGE, IN
SLUDGE	15982.38	APEX LANDFILL, OH
TOTAL TONS	115964.77	

MONTHLY SUMMARY REPORT

DATE: 05/01/2011 - 05/31/2011

WASTE TYPE	TONS	DESTINATION
10	92818.59	APEX LANDFILL, OH
13C	5522.2	APEX LANDFILL, OH
27	247.13	APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	743.24 1212.57	APEX LANDFILL, OH HERITAGE, IN
SLUDGE	30811.38	APEX LANDFILL, OH
TOTAL TONS	**131355.11**	

MONTHLY SUMMARY REPORT

DATE: 6/01/2011 - 6/30/2011

WASTE TYPE	TONS	DESTINATION
10	92081.32	APEX LANDFILL, OH
13C	6363.93	APEX LANDFILL, OH
27	22.74	APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	788.88 286.8	APEX LANDFILL, OH HERITAGE, IN
SLUDGE	27128.9	APEX LANDFILL, OH
TOTAL TONS	**126672.57**	

DSHW-006B1
Rev. 1/98
Part 1

New Jersey Department of Environmental Protection
Solid and Hazardous Waste Management Program
Solid Waste Facility Quarterly Disposal and Materials Recovery Report

Facility Name: New Jersey Rail Carriers **Facility Registration #:** 203268

Report Submitted By: _____

Phone #: 732-271-2800 **Reporting Period:** 1st Qtr 2011 Year

MONTHLY SUMMARY			
NOTE	WASTE TYPES	SOLIDS	TOTAL AMOUNT (IN TONS)
The filing of this report is required by New Jersey Solid Waste Regulation N.J.A.C. 7:26-2.13(e). Failure to submit this report on a monthly basis may result in the imposition of a penalty per N.J.S.A. 13:1E-9 et seq. and/or revocation of license. A complete monthly report consists of one page each of Form DWM-006B-1, 2, and 3, (Part 1, Part 2, and Part 3). Additional "Part 2" forms must be filed for each final disposal facility and/or county of waste origin. All forms (Parts 1, 2, and 3) must be submitted to the NJDEP (address below) within 20 days after the last day of each month.	10	Household & Municipal	203,711.17
	13	Bulky Waste	
	13C	Construction & Demolition	33,716.08
	23	Vegetative Waste	
	25	Animal & Food Processing	
	27 Non Fri	Dry Industrial	
	27A	Asbestos	
	27I	Incinerator Ash	
	Other:	Identify: Sludge	18,505.21
		Total Disposed (From Part 2)	
	27R	Soil	17,372.12
		Total Recycled (From Part 3)	

I certify that the information entered above is true to the best of my knowledge.

Signature: _____ Title: Office Manager Date: 2.17.12

6.15.12

THIS FORM MUST BE SUBMITTED WITHIN 20 DAYS AFTER THE LAST DAY OF EVERY MONTH TO:

NJ Department of Environment Protection
Solid and Hazardous Waste Management Program
Bureau of Recycling and Planning
401 East State Street
PO BOX 0414
Trenton, NJ 08625
Attn: Pat Elias (609) 984-3438

and

County Solid Waste Department where facility is located (See Division Web Page at:

http://www.state.nj.us/dep
Attn: County SW Coordinator

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 1st Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN:	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
New York 1/2011	34315.47		744.77						1806.47	36866.71
2/2011	30062.07		521.77						1534.11	32117.95
3/2011	42945.70		1988.40						2861.63	47795.73
TOTAL TONS										116,780.39

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.11

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 1st Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN:	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
New Haven CT									18.63	18.63
TOTAL TONS										18.63

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

(Duplicate this form as necessary

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 4th Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Bergen	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
ELS Transfer 1/2011	7106.97									7106.97
2/2011	6424.61									6424.61
3/2011	8104.45									8104.45
TOTAL TONS										21,636.03

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manage **Date** 6.15.12

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 1st Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Essex		WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY		10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
EPIC	1/2011									1883.34	1883.34
	2/2011									689.08	689.08
ESI	1/2011	1417.80									1417.80
	2/2011	480.69									480.69
	3/2011	569.82									569.82
Lemcor	1/2011	4690.75									4690.75
	2/2011	983.80									983.80
	3/2011	2281.69									2281.69
TOTAL TONS											12,996.97

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

(Duplicate this form as necessary)

DSHW-006B-2
Rev. 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

SOLID WASTE FACILITY QUARTERLY DISPOSAL REPORT

Final Disposal
Facility Name: New Jersey Rail Carriers

Final Disposal
Facility Location: _____ **Reporting Period:** 1st Qtr 2011 Year
Town/County/State

Note: A separate (Part 2) page must be completed for each different "Final Disposal" Facility, and/or County of waste origin. Report on Part 1 the totals of each waste type from all Part 2 forms submitted. Report all waste in TONS. (3.3 cubic yards per ton)

COUNTY OF WASTE ORIGIN: Hudson	WASTE TYPES Note: Do not include any computer printout attachments. All Part 2 information must be included here.									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	OTHER Sludge	TOTAL TONS
Cardella 1/2011			7927.74							7927.74
2/2011			12004.18							12004.18
3/2011			10095.15							10095.15
IWS Jersey City 1/2011	15000.27									15000.27
2/2011	21427.53									21427.53
3/2011	27899.55									27899.55
Spectra Serv 1/2011									2777.53	2777.53
2/2011									2733.97	2733.97
3/2011									4200.45	4200.45
TOTAL TONS										104,066.37

I certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6.15.12

(Duplicate this form as necessary)

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 1st Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Hudson	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Clean Earth 1/2011						6402.27				6402.27
2/2011						1316.55				1316.55
3/2011						1827.36				1827.36
Newark 1/2011						308.40				308.40
TOTAL TONS										9,854.58

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers,Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, Noncontaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** 6-15-12

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 1st Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Bergen	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Westwood 1/2011						3331.57				3331.57
TOTAL TONS										3,331.57

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers, Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, No contaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

certify that the information entered above is true to the best of my knowledge.

Signed _____ 6.15.12 **Title** Office Manager **Date** _____

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 1st Qtr 2011 Year

COUNTY OF WASTE ORIGIN: New York	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Orange, NY 2/2011						827.75				827.75
3/2011						1185.15				1185.15
TOTAL TONS										2,012.90

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers, Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, No contaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here: _____

certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** _____

6.15.12

DSHW-006B-3/
Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 1st Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Morris	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Cedar Knolls						168.47				168.47
TOTAL TONS										

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers, Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, No contaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here:_____

certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** _____

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Rev 1/98

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTRECTION
SOLID AND HARZARDOUS WASTE PROGRAM

art 3

SOLID WASTE FACILITY QUARTERLY MATERIAL RECOVERY (RECYCLING) REPORT

Facility Name: New Jersey Rail Carriers

Facility ID#: _____ **Reporting Period:** 1st Qtr 2011 Year

COUNTY OF WASTE ORIGIN: Middlesex	WASTE (MATERIAL) TYPES (PLEASE CIRCLE APPLICABLE MATERIAL BELOW)									
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	OTHER		END MARKET	TOTAL TONS
Fords 3/2011						2004.60				2004.60
TOTAL TONS										2004.60

Waste (Material) Types: Please circle applicable material or materials below. Also facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

10R	Corrugated, Mixed Office Paper, Newspaper, Other Paper/Mags/Junk Mail, Glass Containers, Aluminum Cans, Steel Cans, Plastic Containers, Anti-Freeze, Batteries, Food Waste, Other Glass, Other Plastic and Textiles
13R	Furniture, Appliances, Scrap Autos, Tires, Trucks, Trailers, Large Vehicle Parts
13C-R	Concrete/Asphalt, Bricks, Block, Wood Scraps (Treated and Untreated), Tree parts, Tree Stumps/Brush, Plaster and Wall board, Roofing Materials, Corrugated Cardboard, Ferrous and Non-Ferrous Metal, Miscellaneous Paper Wrapping, Non-Asbestos Building Insulation, Plastic Scrap, No contaminated Soil, Carpets and Padding, Glass (Window and Door)
23R	Residential/Commercial Landscaping Material including Brush/Tree Parts, Grass Clippings, Leaves and Stumps
25R	Animal and Food Processing Waste
27R	Industrial Materials, Petroleum Contaminated Soil and Incinerator Ash
OTHER	Any Other Recyclable Material Indicate Here: _____

certify that the information entered above is true to the best of my knowledge.

Signed _____ **Title** Office Manager **Date** _____

MONTHLY SUMMARY REPORT

DATE: 01/01/2011 - 01/31/2011

WASTE TYPE	TONS	DESTINATION
10	62531.26	APEX LANDFILL, OH
13C	8672.51	APEX LANDFILL, OH
27		APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	10042.24	APEX LANDFILL, OH
SLUDGE	6467.34	APEX LANDFILL, OH
TOTAL TONS	87713.35	

MONTHLY SUMMARY REPORT

DATE: 02/01/2011 - 02/28/2011

WASTE TYPE	TONS	DESTINATION
10	59378.7	APEX LANDFILL, OH
13C	12525.95	APEX LANDFILL, OH
27		APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	2312.77	APEX LANDFILL, OH
SLUDGE	4957.16	APEX LANDFILL, OH
TOTAL TONS	**79174.58**	

MONTHLY SUMMARY REPORT

DATE: 03/01/2011 - 03/31/2011

WASTE TYPE	TONS	DESTINATION
10	81801.21	APEX LANDFILL, OH
13C	12517.62	APEX LANDFILL, OH
27		APEX LANDFILL, OH
27I		APEX LANDFILL, OH
27R	5017.11	APEX LANDFILL, OH
SLUDGE	7080.71	APEX LANDFILL, OH
TOTAL TONS	**106416.65**	