



Pinewood Trustee, Inc. as Trustee of the  
Pinewood Site Custodial Trust  
78 Wentworth Street  
Charleston, SC 29401  
Phone: (843) 579-7000

October 20, 2017

South Carolina Department of Health and Environmental Control  
Bureau of Land and Waste Management  
Division of Compliance and Enforcement  
2600 Bull Street  
Columbia, South Carolina 29201

**Subject: Quarterly Hazardous Waste Activities Report  
Third Quarter 2017  
Pinewood Site Custodial Trust  
EPA ID No: SCD 070 375 985  
Sumter County, South Carolina**

To whom it may concern:

Enclosed please find a copy of the above-referenced Third Quarter 2017 Hazardous Waste Report. The quarterly report contains forms 1962 and 1963.

If you have any questions concerning this information, please do not hesitate to contact me at (843) 579-7000.

Yours very truly,

**Pinewood Site Custodial Trust**

**By Pinewood Trustee, Inc.**

A South Carolina Non Profit Corporation,  
As Trustee of the Pinewood Site Custodial Trust under  
Trust Instrument Dated December 24, 2003:

A handwritten signature in blue ink, reading "Robert A. Kerr, Jr.", is written over a horizontal line.

By: Robert A. Kerr, Jr.  
Its: President

cc: Mr. Keith Lane (w/o enc) - SCDHEC-Wateree District  
Brian Burgess – Pinewood Site (w/enclosures)



**Quarterly Hazardous Waste Report  
Generation and On-Site Treatment, Storage, Disposal, and Recovery**

I.

SCD 070375985  
 Pinewood Site Custodial Trust (PSCT)  
 Pinewood Trustee, Inc.  
 As Trustee of the PSCT  
 c/o Moore & Van Allen, PLLC  
 - 78 Wentworth Street  
 Charleston, SC 29401  
 Robert A. Kerr, Jr.

3 / 1, 7  
 Quarter & Year

II.

Enter 'X' here if no hazardous waste generated, treated, stored, disposed, recovered, or shipped off site during this quarter.

III.

**Generated Waste**

Waste Index Line #	Amount Generated (in lbs)
0, 7, 4	2, 4, 3, 1, 4, 2, 6
0, 7, 5	1, 4, 1, 5
0, 7, 6	0
0, 7, 7	2, 7, 2, 1, 0
0, 7, 8	2, 6, 2, 1, 3, 9

**IV. On-Site Treatment, Storage, Disposal & Recovery**

Waste Index Line #	Management Code	Amount T,S,D,R, On-Site (in lbs)
0, 7, 4	H, 1, 4, 1	5, 3, 6, 3, 1, 2
0, 7, 4	H, 1, 2, 2	2, 3, 0, 0, 0, 7, 2
0, 7, 5	H, 1, 4, 1	3, 7, 5
0, 7, 6	H, 1, 2, 2	0
0, 7, 7	H, 1, 2, 0	1, 2, 0, 0, 0
0, 7, 8	H, 1, 2, 2	2, 2, 5, 9, 9

V. List below the name, and EPA/DHEC ID# of all the hazardous waste transporters used this quarter.

S, C, D, 9, 8, 7, 5, 8, 4, 7, 7, 8      Sumter Transport Company  
 Transporter EPA/DHEC ID #      Transporter's Name

N, J, D, 0, 8, 0, 6, 3, 1, 3, 6, 9      Veolia ES Technical Solutions  
 Transporter EPA/DHEC ID #      Transporter's Name

N, J, D, 0, 5, 4, 1, 2, 6, 1, 6, 4      Freehold Cartage Inc.  
 Transporter EPA/DHEC ID #      Transporter's Name

\_\_\_\_\_  
 Transporter EPA/DHEC ID #      Transporter's Name

**VI. Certification**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimized the present and future threat to human health and the environment.

I also certify the out-of-state generators utilizing this facility have programs in place to reduce the volume or quantity and toxicity of waste using a method currently available which minimizes the present and future threat to human health and the environment.

*Robert A. Kerr Jr.*      Robert A. Kerr Jr.      20 Oct 2017  
 Signature of Authorized Representative      Print/Type Name & Telephone Number      843-579-7000      Date



**Quarterly Hazardous Waste Report  
Generation and On-Site Treatment, Storage, Disposal, and Recovery**

I.

SCD 070375985  
Pinewood Site Custodial Trust (PSCT)  
Pinewood Trustee, Inc.  
As Trustee of the PSCT  
c/o Moore & Van Allen, PLLC  
78 Wentworth Street  
Charleston, SC 29401  
Robert A. Kerr, Jr.

3 / 17  
Quarter & Year

II.

Enter 'X' here if no hazardous waste generated, treated, stored, disposed, recovered, or shipped off site during this quarter.

III.

**Generated Waste**

Waste Index Line #	Amount Generated (in lbs)
079	44500

**IV. On-Site Treatment, Storage, Disposal & Recovery**

Waste Index Line #	Management Code	Amount T,S,D,R, On-Site (in lbs)
079	H120	0

V. List below the name, and EPA/DHEC ID# of all the hazardous waste transporters used this quarter.

S C D 9 8 7 5 8 4 7 7 8 Transporter EPA/DHEC ID #	Sumter Transport Company Transporter's Name
N J D 0 8 0 6 3 1 3 6 9 Transporter EPA/DHEC ID #	Veolia ES Technical Solutions Transporter's Name
N J D 0 5 4 1 2 6 1 6 4 Transporter EPA/DHEC ID #	Freehold Cartage Inc. Transporter's Name
 Transporter EPA/DHEC ID #	 Transporter's Name

**VI. Certification**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimized the present and future threat to human health and the environment.

I also certify the out-of-state generators utilizing this facility have programs in place to reduce the volume or quantity and toxicity of waste using a method currently available which minimizes the present and future threat to human health and the environment.

*Robert A. Kerr, Jr.*  
Signature of Authorized Representative      Robert A. Kerr, Jr. 843-579-7000      20 OCT 2017  
Print/Type Name & Telephone Number      Date



### Quarterly Hazardous Waste Report Waste Shipped Off-Site for Treatment, Storage, Disposal, Recovery

VII. S C D 0 7 0 3 7 5 9 8 5 | Pinewood Site Custodial Trust | 3 / 1 7 Quarter & Year  
EPA/DHEC ID# Company Name

VIII. 0 7 8 | 0 7 / 0 5 / 1 7 | M D D 9 8 0 5 5 5 1 8 9  
Waste Index MM DD YY Facility EPA/DHEC ID #  
Line # Date Shipped

0 0 9 7 5 4 7 0 1 F L E | 4 5 3 6 0  
Manifest Document Number Amount (lbs.)

VIII. 0 7 9 | 0 7 / 1 0 / 1 7 | M D D 9 8 0 5 5 5 1 8 9  
Waste Index MM DD YY Facility EPA/DHEC ID #  
Line # Date Shipped

0 1 0 4 6 4 9 9 5 F L E | 4 4 5 0 0  
Manifest Document Number Amount (lbs.)

VIII. 0 7 8 | 0 7 / 2 4 / 1 7 | M D D 9 8 0 5 5 5 1 8 9  
Waste Index MM DD YY Facility EPA/DHEC ID #  
Line # Date Shipped

0 0 9 7 5 4 7 0 2 F L E | 4 7 4 6 0  
Manifest Document Number Amount (lbs.)

VIII. 0 7 5 | 0 8 / 0 2 / 1 7 | T X D 0 0 0 8 3 8 8 9 6  
Waste Index MM DD YY Facility EPA/DHEC ID #  
Line # Date Shipped

0 0 0 8 7 2 4 1 7 V E S | 2 0 4 0  
Manifest Document Number Amount (lbs.)

VIII. 0 7 8 | 0 8 / 0 7 / 1 7 | M D D 9 8 0 5 5 5 1 8 9  
Waste Index MM DD YY Facility EPA/DHEC ID #  
Line # Date Shipped

0 1 0 4 6 5 1 7 0 F L E | 4 5 9 2 0  
Manifest Document Number Amount (lbs.)



### Quarterly Hazardous Waste Report Waste Shipped Off-Site for Treatment, Storage, Disposal, Recovery

VII.    /  Quarter & Year  
EPA/DHEC ID# Company Name

VIII.   /  /    
Waste Index MM DD YY Facility EPA/DHEC ID #  
Line # Date Shipped

Manifest Document Number Amount (lbs.)

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Waste Index MM DD YY Facility EPA/DHEC ID #  
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