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7 BEFORE THE WASHINGTON STATE
8 UTILITIES AND TRANSPORTATION COMMISSION

9 HAROLD LeMAY ENTERPRISES, INC.,
10 ET AL

Docket No. TS-040221

11 For an Extension of Certificate No.
12 G-98 for a Certificate of Public
13 Convenience and Necessity

14
15 In re Application No. GA-079254 of

Docket No. TG-040248

16 KLEEN ENVIRONMENTAL
17 TECHNOLOGIES, INC.

18 For a Certificate of Public Convenience
19 and Necessity

20
21 In re Application No. GA-079226 of

Docket No. TG-040553

22 RUBATINO REFUSE REMOVAL, INC.

23 For an Extension of Certificate No.
24 G-58 for a Certificate of Public
25 Convenience and Necessity to Operate
26 Motor Vehicles in Furnishing Solid
Waste Collection Service

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TESTIMONY OF LARRY MEANY

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Q. State your name and business address.

A. Larry Meany; 13502 Pacific Ave., Tacoma, Washington.

Q. What is your employment?

A. Commercial Division Manager, Harold LeMay Enterprises.

Q. Have you prepared a written summary of your educational and employment history?

A. Yes, please see Exhibit _____ (LM-1).

Q. What are your duties and responsibilities at Harold LeMay Enterprises?

A. I oversee the Commercial Division, including the medical waste program.

Q. What is the business of Harold LeMay Enterprises?

A. We are a solid waste and recycling company. We collect and transport residential and commercial solid waste and recyclable materials pursuant to our Certificate of Public Convenience and Necessity and various city contracts.

Q. What territory does your certificate cover?

A. Our certificate (G-98) in general provides for service in portions of Pierce County, Thurston County, Grays Harbor County, and all of Lewis and Mason Counties.

Q. Do you have a copy of G-98?

A. Yes, please see Exhibit _____ (LM-2).

1 **Q. How long has Harold LeMay Enterprises been in business?**

2 A. For over 60 years.

3 **Q. Does Harold LeMay Enterprises currently offer medical waste**
4 **service in its certificated territory?**

5 A. Yes.

6 **Q. Do you have a medical waste tariff currently in place?**

7 A. Yes, please see Exhibit ____ (LM-3).

8 **Q. Do you provide customers with these rates and other information**
9 **regarding the service?**

10 A. Yes, please see Exhibit ____ (LM-4).

11 **Q. Do you advertise in local publications?**

12 A. Yes, please see Exhibit ____ (LM-5), which is from the Pierce County
13 phone book.

14 **Q. Is this typical of the ads in other phone books?**

15 A. Yes.

16 **Q. Other than yourself, are there employees who are involved in the**
17 **medical service? If so, please state their positions and percentage**
18 **of time devoted to medical waste.**

19 A. Yes, we have one route driver who is full time, four other drivers who
20 devote between 10% and 20% of their time to medical waste, three
21 customer service/dispatch people about 10% of their time, and the
22 corporate officers who devote such time as is needed.

23 **Q. Do you have equipment devoted to medical waste?**

24 A. Yes.

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Q. Please describe the equipment.

A. 2002 Isuzu Cube Van (9514)
1995 Cube Van (9580)
1992 Great Dane Dry Van Trailer (8197)
1984 Timppte Trailer (8172)

Q. What are the capacities of the equipment?

A. 9514: 784 cu. ft.
9850: 1,024 cu. ft.
8197: 3,876 cu. ft.
8172: 3,648 cu. ft

Q. How is the equipment maintained?

A. Our equipment is serviced and repaired in our own shop. All servicing is done at the recommended schedule by our own mechanics, and regular service records are kept.

Q. Are there regular safety inspections?

A. Yes, the drivers do a daily visual check, and the mechanics do regular safety checks and service as needed.

Q. Do you have a drug testing program in place?

A. Yes.

Q. Do you have regular safety meetings?

A. Yes.

Q. Do you have an "Infectious Waste Procedures and Management Plan"?

A. Yes, please see Exhibit ____ (LM-6).

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Q. Describe your method of collection and disposal.

A. We provide "red bags," cardboard boxes and plastic containers (for liquid or very wet material). The full bag or container is deposited into the box which is sealed and transported for disposal. The full bag or container never leaves the sealed box. The route truck transports the boxes to the trailer which then is transported to the disposal site. The box goes directly into the incinerator and a certificate of destruction is issued. Please see Exhibit ____ (LM-7) for an example.

Q. Do you also receive a delivery receipt?

A. Yes, please see Exhibit ____ (LM-8) for an example.

Q. Do you also use a bill of lading?

A. Yes, please see Exhibit ____ (LM-9).

Q. Where is your disposal site?

A. We use the Covanta Marion incinerator located in Brooks, Oregon as our primary disposal option.

Q. How does the material get there?

A. It is transferred directly from the route truck to the trailer which then goes non-stop to the incinerator.

Q. Do you have a backup facility?

A. Yes, an autoclave located at Land Recovery, Inc. in Puyallup.

Q. Why do you want to expand into King County?

A. We believe that King County can easily support more than the one medical waste company currently doing business there. We have found that many customers prefer to have a choice in service providers for

1 medical waste, and in some cases a choice of disposal options. We have
2 been approached by potential customers, specifically the Veterans
3 Hospital, who want to try our service. We did a survey which indicated
4 others were also interested.

5 **Q. Do you have copies of the survey?**

6 A. Yes, please see Exhibit ____ (LM-10).

7
8 **Q. What service benefits do you believe you could provide to King
County customers?**

9 A. We are a local family-owned company that provides on-time service, we
10 can respond quickly to urgent requests, we have uniformed, courteous,
11 well-trained drivers, and our medical waste division operates very
12 efficiently with only one complaint that I am aware of in the past several
13 years. Also, we can provide a comprehensive service to customers
14 which have facilities in our current service area as well as in King
15 County. Generally this type of customer prefers to use a provider who
16 can serve all their facilities.

17 **Q. Do you have the ability to add equipment and/or more personnel if
necessary?**

18 A. Yes.

19
20 **Q. What about Kitsap County?**

21 A. Kitsap County is a rapidly growing area with significant military
22 presence. This results in veterans and military hospitals being primary
23 fixtures in the area. Like King County, Kitsap has only one medical
24 waste carrier, Stericycle. We believe the area can easily support two
25 carriers. Also we serve Mason County and much of Pierce County, both
26 of which border on Kitsap County, making extension of our service even
more practical and attractive.

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2 **Q. Do you believe all areas of the state should be open to more**
3 **medical waste haulers?**

4 A. Not necessarily. In many areas, for example Everett, there are two
5 carriers already operating, Stericycle and the local hauler. In all of our
6 areas, Stericycle also provides service via its statewide permit. In the
7 rural areas where the local hauler does not provide service, Stericycle is
8 the only provider, and probably there is not sufficient business for
9 another to enter the market. That certainly is not the case in King or
10 Kitsap counties.

11 **Q. If granted this authority, would you advertise and actively seek**
12 **business in King and Kitsap Counties?**

13 A. Yes.

14 **Q. If granted this authority, would you provide service to all those**
15 **who wanted service in King and Kitsap Counties?**

16 A. Yes.

17 **Q. Are you familiar with the laws and regulations of the Washington**
18 **Utilities and Transportation Commission?**

19 A. Yes.

20 **Q. Do you have a copy of the laws and regulations in the office?**

21 A. Yes.

22 **Q. Has LeMay received any citations from the WUTC for failure to**
23 **adhere to these rules?**

24 A. To the best of my knowledge we have not. I know there have been no
25 such citations directed at the medical waste division.

1
2 CERTIFICATE OF SERVICE

3 I hereby certify that on August 12th, 2004, I caused to be served the
4 original and six (6) copies of the foregoing document to the following address
via first class mail, postage prepaid to:

5 Carole Washburn, WUTC Executive Secretary
6 Washington Utilities and Transportation Commission
7 1300 S. Evergreen Park Dr. S.W.
P.O. Box 47250
8 Olympia, WA 98504-7250

9 I certify I have also provided to the Washington Utilities and Transportation
Commission's Secretary an official electronic file containing the foregoing
10 document via email to: records@wutc.wa.gov

11 I certify I have electronically sent a PDF version of the foregoing document to:

12 The Honorable Ann E. Rendahl
13 Administrative Law Judge
arendahl@wutc.wa.gov

14 Greg W. Haffner
15 Curran Mendoza, P.S.
16 555 W. Smith Street
PO Box 140
17 Kent, WA 98035-0140
Attorney for Kleen Environmental Technologies, Inc.
gwh@curranmendoza.com

18 Stephen B. Johnson
19 Garvey Schubert Barer
20 1191 - 2nd Ave., Floor 18
Seattle, WA 98101-2939
21 Attorney for Stericycle of Washington, Inc.
sjohnson@gsblaw.com

22 Gregory J. Trautman
23 Assistant Attorney General
24 1400 S. Evergreen Park Dr. SW
PO Box 40128
25 Olympia, WA 98504-0128
gtrautman@wutc.wa.gov

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I swear under the penalty of perjury of the laws of the State of Washington that the foregoing is true and correct.

DATED and signed at Silverdale, Washington on August 12th, 2004.


Cheryl L. Sinclair

TESTIMONY OF LARRY MEANY
Harold LeMay Enterprises, Inc.

EXHIBIT 1

**Professional Resume of
Larry Meany**

**Harold LeMay Enterprises
Tacoma, WA**

11/02 - present

Commercial Division Manager

- Report to Vice President with full P&L accountability.
- Supervise 25 people which includes drivers, recycle station attendants, and administrative people.
- Improve sales growth by cultivating new markets / opportunities and maintaining strong customer relationships.
- Improve profitability by insuring efficient use of assets and selecting appropriate business that fits our current needs.

**DiPietro Trucking Co.
Kent, WA**

08/02 - 11/02

Driver

- Attend classes to obtain CDL-A drivers license
- Temporary driver to gain first hand "behind the wheel" experience

**Gensco Inc.
Tacoma, WA**

12/99 - 08/02

Corporate Operations Manager

- Privately held regional HVAC distributor with annual sales of \$200mm
- Report to President with P&L accountability for Operations activities
- Manage all distribution and transportation activities for the corporation
- Manage physical assets (facilities, vehicles, equipment) to include specifying, procuring, maintenance, and divestiture.
- Manage loss prevention functions
- Manage safety processes and compliance to OSHA, WSHA, DOT, etc.

**The Sherwin Williams Company
Various Locations**

04/85 - 12/99

Sherwin Williams is a Fortune 200 company with annual sales over 5 billion dollars. I held a variety of positions with progressively increasing levels of responsibility.

- **Regional Director of Distribution** **Waco, TX** **10/97 - 12/99**
 - Manage distribution and transportation activities for the Southwest region of US and had full P&L accountability for Southwest region
 - Report to Vice President in Cleveland, OH
 - Managed a high volume, 24hr per day, 500,000 sq ft distribution center for paint and related items.
 - Managed an fleet of over 90 tractors and 220 trailers
 - Personnel included over 100 warehouse employees, over 90 drivers, and approx 20 administrative employees in a non-union environment.

- **Plant Manager** **Newark, NJ 09/96 – 10/97**
 - Manage manufacturing and supply chain activities for mid-volume plant with selected product lines with full P&L accountability.
 - Report to Regional Director of Operations.
 - Plant produced over 10mm gallons of paint per year
 - Personnel included approx 100 manufacturing employees in a union environment.

- **Distribution Center Manager** **Sparks, NV 01/95 – 09/96**
 - Manage Pacific region distribution center with full P&L accountability.
 - Report to Regional Director of Distribution.
 - Managed a high volume, 24hr per day, 400,000 sq ft distribution center for paint and related items.
 - Personnel included approx 75 warehouse employees and 14 administrative employees in a non-union environment.

- **Distribution Center Manager** **Waco, TX 09/93 – 01/95**
 - Manage Southwest region distribution center with full P&L accountability.
 - Report to Regional Director of Distribution.
 - Managed a high volume, 24hr per day, 500,000 sq ft distribution center for paint and related items.
 - Personnel included approx. 100 warehouse employees in a non-union environment.

- **Administrative Manager** **Waco, TX 03/92 – 09-93**
 - Manage administrative activities for the Southwest region to include customer service, accounting, inventory control, payroll, and transportation planning.
 - Develop and administer annual budgets for distribution and transportation activities within the region

- **Unit Manager** **Waco, TX 04/90 – 03/92**
 - Front line management responsibilities for a team of 40 employees
 - Key member of team to open new facility.

- **Unit Manager** **Garland, TX 11/89 – 04/90**
 - Front line management responsibilities for a team of 30 employees.
 - Key member of team to open new facility and close existing facility in Garland, TX

- **Terminal Manager** **Detroit, MI 05/89 – 11/89**
 - Sales and operations responsibilities with full P&L accountability for unionized LTL freight terminal.

- **Terminal Manager** **Ft.Wayne, IN 02/88 – 05/89**
 - Sales and operations responsibilities with full P&L accountability for unionized LTL freight terminal.

- **Various Assignments** **04/85 – 02/88**

TESTIMONY OF LARRY MEANY
Harold LeMay Enterprises, Inc.

EXHIBIT 2

For the Operation of Motor Propelled Vehicles

pursuant to the provisions of Chapter 81 RCW

THIS IS TO CERTIFY that authority is granted to operate as a MOTOR CARRIER in the transportation of the commodities and in the territory described herein to

Harold LeMay Enterprises, Inc.
d/b/a Pierce County Refuse Co., et al
13502 Pacific Avenue
P. O. Box 44459,
Tacoma, WA 98444

CERT. NO.
G-98

D-5

GARBAGE COLLECTION SERVICE In That portion of Pierce County beginning in Section 30, Township 21 North, Range 4 E.W.M. at the point of intersection of the northeast boundary of the Tacoma city limits and the Pierce County-King County line; thence southerly along the Tacoma city limits as of April 1, 1974, to its point of intersection with 72nd Street East known herein as the point of beginning; thence east on the centerline of 72nd Street East to Waller Road; thence south on the centerline of Waller Road to 112th Street; thence east on the centerline of 112th Street to Meridian Street; thence south on the centerline of Meridian Street to the Kapowsin Highway; thence east on the centerline of Kapowsin Highway to its point of intersection with Electron County Road; thence east along the centerline of Electron County Road to the southwest corner of Section 33, Township 18 North, Range 5 E.W.M.; thence continuing east along the centerline of the Section line between Township 17 North and 18 North, to its intersection with the East boundary line of Mt. Rainier National Park; thence south along said boundary to its intersection with the Pierce County-Yakima County boundary line; thence south along the Pierce County-Yakima County line to the intersection of said line with the Pierce County-Lewis County line; thence west along the Pierce County-Lewis County line to the intersection of the Thurston County-Pierce County-Lewis County line; thence northerly along the Thurston County-Pierce County line to Puget Sound; thence northerly along the east shoreline of Puget Sound including Anderson Island, McNeil Island and Ketron Island to the intersection with the south shoreline of Chambers Bay; thence east along the south shoreline of Chambers Bay, including the property of West Tacoma Newsprint Co. as of April 1, 1974, to the intersection with the projected west property line of Western State Hospital; thence south along the west property line projected to the intersection of Steilacoom Boulevard (State Historical Road No. 1); thence east along centerline of Steilacoom Boulevard to the northerly

WASHINGTON UTILITIES AND TRANSPORTATION
COMMISSION

By Kathy Bault
Paul Curl, Secretary



projected centerline of Water Street (99th Avenue S.W.); thence south along projected centerline of Water Street to the intersection of Clara Boulevard; thence southerly and easterly along Clara Boulevard including easterly and southerly side to the rear property line of those addresses fronting on Clara Boulevard and Lake Louise Drive to intersection with centerline of Lake Louise Drive; thence southerly and westerly along said centerline to the intersection with centerline of Holden Road; thence south along Holden Road including those addresses fronting on east side of said road from Lake Louise Drive to 112th Street S.W., to the intersection with centerline of Military Road; thence southeasterly along said centerline to the intersection with Washington Boulevard S.W. (120th Street); thence west along centerline of Washington Boulevard to the intersection with Nottingham Avenue; thence south along centerline of Nottingham Avenue to the intersection with Fort Lewis military reservation boundary; thence along said boundary to the shoreline of American Lake; thence easterly and southerly along American Lake shoreline to southwesterly property line to Tacoma Country Club; thence south and east along said property line to the intersection of old Highway 99 extended; thence north along the centerline of old Highway 99 to the intersection of 112th Street S.W. (Airport Road); thence north along the centerline of old Highway 99 (South Tacoma Way) excluding the east side of the highway for business and dwellings fronting on and having a Highway 99 address, to the south city limits of the City of Tacoma as of April 1, 1974; thence west along southerly boundary of City of Tacoma (80th Street extended) to the intersection with Orchard Street extended; thence north along centerline of Orchard Street extended to the intersection with South 19th Street; thence west along centerline of South 19th Street to the intersection with Day Island Waterway (east side of The Narrows); thence following the shoreline of Puget sound in a northerly direction to Point Defiance and Commencement Bay; thence following the shoreline of Commencement Bay to its intersection with the west city limits of Tacoma located in Section 21, Township 21 North, Range 3 E.W.M.; thence following the city limits of Tacoma in a clockwise direction to its intersection with 72nd Street East, the point of beginning.

Also, all areas within the boundaries of Pierce County occupied by United States Government Installations.

GARBAGE COLLECTION SERVICE In Hoquiam and Aberdeen, both city limits as of September 6, 1960, and in that portion of Grays Harbor County east of Aberdeen described as follows: Starting at the S.E. corner of Sec. 13, T. 17 N., R. 9 W.; thence west on the south line of said



section projected to the east limits of Aberdeen as of September 6, 1960; thence following the east limits of Aberdeen in a northerly direction to the N.W. corner of Sec. 2, T. 17 N., R. 9 W.; thence east on the north line of said section projected to the N.E. corner of Sec. 1, T. 17 N., R. 9 W.; thence south on the east line of said section projected to the S.E. corner of Sec. 13, T. 17 N., R. 9 W., the place of beginning.

In Lewis County.

In Mason County restricted to drop box service only.

In Olympia as of September 6, 1960, and in that portion of Thurston County described as follows: Starting at the point where the south bank of Alder Lake intersects with the south line of Sec. 19, T. 15 N., R. 5 E. (Thurston-Lewis County Line); thence following said county line west to the north south centerline of Section 21, T. 15 N. R. 1 E.; thence north along centerline to the north line of Section 9, T. 16 N., R. 1 E.; thence west along north line of said section to the southwest corner of Section 6, T. 16 N., R. 1 E.; thence north along west line of said section to the N.W. corner of Sec. 6, T. 16 N., R. 1 E.; thence east on the north line of said section projected to the S.W. corner of Sec. 33, T. 17 N., R. 1 E.; thence north on the west line of said section projected to the westerly bank of the Nisqually River (Sec. 9, T. 18 N., R. 1 E.); thence following the westerly bank of said river in a southeasterly direction to Alder Lake; thence following the south bank of Alder Lake easterly to the point of intersection with the south line of Sec. 19, T. 15 N., R. 5 E., the place of beginning.

Also, beginning in the northwest corner of Section 2, T. 16 N., R. 4 W.; thence east along north line of said section projected to the northeast corner of Section 5, T. 16 N., R. 3 W.; thence south along west line of said section to the southeast corner of said Section 5; thence west along south line of said section projected to the southeast corner of Section 2, T. 16 N., R. 4 W.; thence north along west line of said section to the north west corner of Section 2, T. 16 N., R. 4 W.; the point of beginning.

REFUSE AND TRADE WASTE COLLECTION SERVICE From the Puget Sound Navy Yard at Bremerton to dumps in Kitsap County. Garbage and Refuse Collection Service at U.S. Naval Supply Depot, Seattle, Washington, under contract with the DEPARTMENT OF THE NAVY.



GARBAGE AND REFUSE COLLECTION SERVICE in that portion of Thurston and Lewis Counties described as follows: Beginning at the point where the north-south centerline of Section 21, T. 15 N., R. 1 E. intersects the Thurston-Lewis County Line; thence west on said line to the north-south centerline of Section 19, T. 15 N., R. 2 W.; thence south along said centerline to the south line of Section 7, T. 14 N., R. 2 W.; thence west along said south line extended to the southwest corner of Section 9, T. 14 N., R. 3 W.; thence north along the west line of said Section 9 extended to the southeast corner of Section 20, T. 15 N., R. 3 W.; thence west along the south line of said Section 20 extended to the southwest corner of Section 23, T. 15 N., R. 4 W.; thence north along the west line of said Section 23 extended to the northwest corner of Section 14, T. 16 N., R. 4 W.; thence east along the north line of said Section 14 extended to the southwest corner of Section 7, T. 16 N., R. 1 E.; thence north along the west line of said Section 7 to the northwest corner of said Section 7; thence east along the north line of said Section 7 extended to the north-south centerline of Section 9, T. 16 N., R., 1 E.; thence south along said north-south centerline extended to the south line of Section 21, T. 15 N., R. 1 E., the Thurston-Lewis County Line, the point of beginning.

LIMITATION: No service to be rendered to or from the Cedar Creek Youth Camp located in Sections 11 and 12, T. 16 N., R. 4 W., Thurston County, Washington.

The following authority was obtained by transfer from Enar Shoblom, d/b/a Butlers Cove Refuse Service, holder of Certificate No. G-4:

GARBAGE COLLECTION SERVICE in the following described territory within Thurston County: Starting at the southeast corner of the southwest quarter of the southwest quarter of Section 27, T. 18 N., R. 2 W.; thence west on the south line of said section extended to the southwest corner of Section 28, T. 18 N., R. 3 W.; thence north on the west line of said section extended to the shore line of Totten Inlet (Oyster Bay); thence northeasterly along the southeasterly shore of said Inlet to the north end of Steamboat Island; thence easterly and southerly along the west shore of Squaxin Passage and Budd Inlet to the point where it intersects with the north line of Section 10, T. 18 N., R. 2 W.; thence west along said line to the northeast corner of the northwest quarter of the northwest quarter of said Section 10; thence south on said quarter section line extended to the south line of Section 27, T. 18 N., R. 2 W., the place of beginning.

M. V. G. No. 1403

8-16-89



TESTIMONY OF LARRY MEANY
Harold LeMay Enterprises, Inc.

EXHIBIT 3

INFECTIOUS WASTE

Rates per Gallon (Collector-provided containers) Per Pick-up

<u>Quantity</u>	<u>Rate</u>	<u>Quantity</u>	<u>Rate</u>	<u>Quantity</u>	<u>Rate</u>	<u>Quantity</u>	<u>Rate</u>
0-10	1.90	251-260	.78	501-510	.60	751-760	.48
11-20	1.65	261-270	.76	511-520	.59	761-770	.47
21-30	1.64	271-280	.75	521-530	.59	771-780	.47
31-40	1.62	281-290	.74	531-540	.59	781-790	.46
41-50	1.60	291-300	.74	541-550	.58	791-800	.46
51-60	1.56	301-310	.73	551-560	.57	801-810	.45
61-70	1.47	311-320	.72	561-570	.57	811-820	.45
71-80	1.40	321-330	.71	571-580	.56	821-830	.45
81-90	1.32	331-340	.70	581-590	.56	831-840	.44
91-100	1.25	341-350	.70	591-600	.55	841-850	.44
101-110	1.18	351-360	.69	601-610	.55	851-860	.43
111-120	1.15	361-370	.67	611-620	.54	861-870	.43
121-130	1.10	371-380	.66	621-630	.54	871-880	.42
131-140	1.05	381-390	.65	631-640	.53	881-890	.42
141-150	1.00	391-400	.65	641-650	.53	891-900	.42
151-160	.98	401-410	.64	651-660	.53	901-910	.41
161-170	.96	411-420	.64	661-670	.52	911-920	.41
171-180	.94	421-430	.63	671-680	.52	921-930	.40
181-190	.92	431-440	.63	681-690	.51	931-940	.40
191-200	.90	441-450	.62	691-700	.51	941-950	.40
201-210	.88	451-460	.62	701-710	.50	951-960	.39
211-220	.85	461-470	.61	711-720	.50	961-970	.39
221-230	.82	471-480	.61	721-730	.49	971-980	.39
231-240	.80	481-490	.60	731-740	.49	981-990	.38
241-250	.79	491-500	.60	741-750	.48	991-1000	.38
1001 gallons to 1700 gallons			.37	1701 gallons and over		.31	

APPROVED

Limitations on Service

By 9-29-91

LSN _____

LAA 76-910977

Dookst _____

Other _____

By TL

1. Transporter reserves the right to refuse pickup for the following:
 - A. Leaking container
 - B. Damaged container
 - C. Over-filled container
2. Container sizes offered are 10, 20 and 30 gal. Credit shall not be given for partially empty containers.
3. On call service-add \$5.00 charge. Special pickup-add \$5.00.
4. Maximum weight allowance is as follows:
 - 10 gallon container--25 lbs.//20 gallon container--35 lbs.//30 gallon container--50 lbs.
5. The rates named herein include all costs of transportation, disposal and containers.

Issued: August 29, 1991

Effective September 29, 1991

Issued By: Harold LeMay Enterprises, Inc.

TESTIMONY OF LARRY MEANY
Harold LeMay Enterprises, Inc.

EXHIBIT 4



13502 PACIFIC AVENUE
P.O BOX 44459 • TACOMA, WA 98444-0459
PHONE 253-539-0060

Infectious Waste Rates:

<u>Volume:</u>	<u>Rate:</u>	<u>Size:</u>	<u>Regular Service</u>	<u>On-Call Service</u>
10 GAL	\$1.90/gal	14x14x14	\$19.00	\$24.00
20 GAL	\$1.65/gal	14x14x28	\$33.00	\$38.00
30 GAL	\$1.64/gal	16x16x28	\$49.20	\$54.20

The above rates include all transportation, disposal, and lined cardboard containers. State tax of 3.6% is included at the time of billing.

Service Procedures and Limitations:

1. The transporter reserves the right to refuse pickup of leaking, damaged or overfilled containers. All red bags must be tied and the lid securely on the container for pickup.
2. Container sizes are 10, 20 and 30 gallon boxes. Credit will not be given for partially filled boxes. Maximum weight is 45 pounds. Only biomedical waste will be accepted. Radioactive materials, amalgam, x-ray fluid, etc. are hazardous wastes and cannot be accepted by LeMay Enterprises.
3. Cardboard containers and liners are provided and included in the above rates. Sharps containers must be provided by the customer.
4. On-call service must provide 48hr advance notice. However, every effort will be made to pick up your infectious waste the next business day.
5. Service may be delayed in observance of major holidays.

For pickups please contact customer service at (253)-539-0060 between the hours of 8:00am and 5:00pm.

Thank you for considering LeMay Enterprises for your infectious waste transportation and disposal needs. We appreciate your business and look forward to a long and mutually beneficial relationship!!

TESTIMONY OF LARRY MEANY
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EXHIBIT 5

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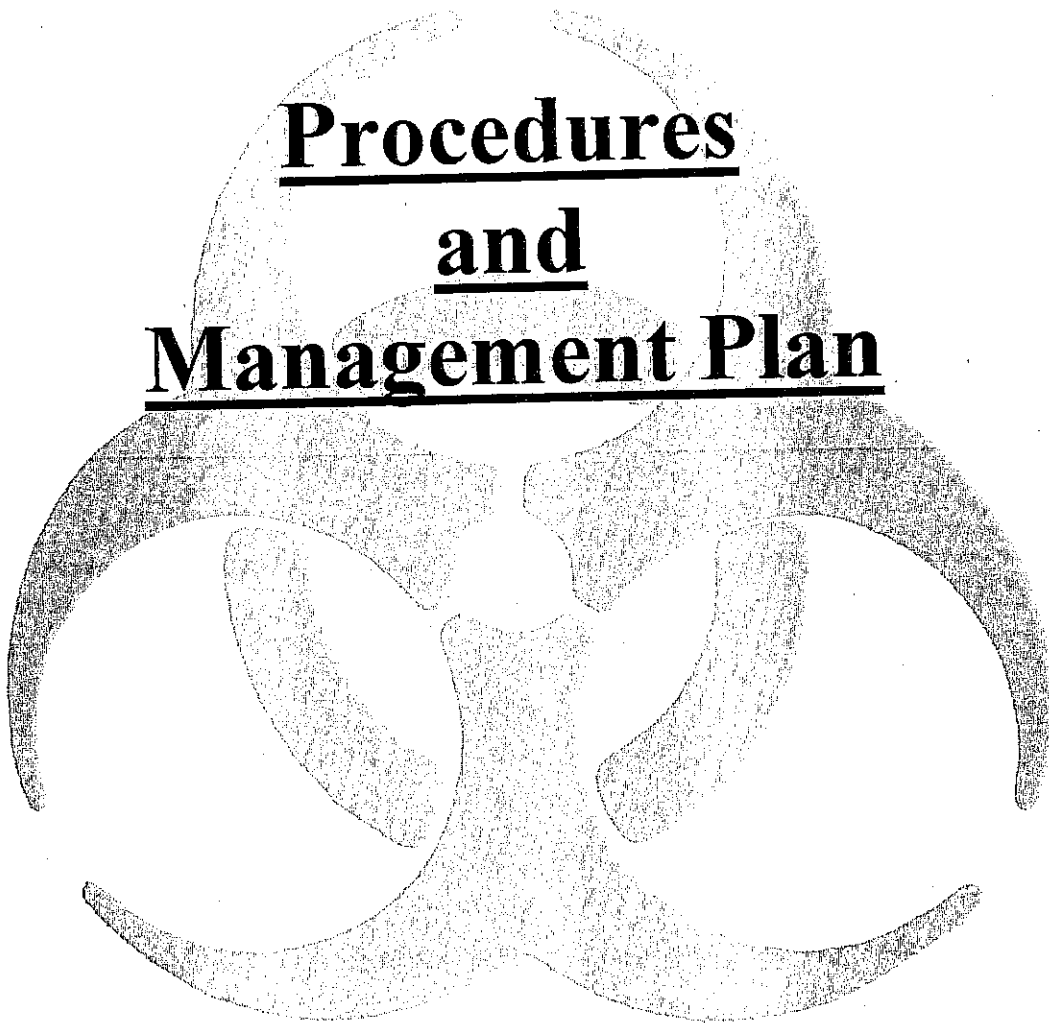
EXHIBIT 6



13502 PACIFIC AVENUE
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PHONE 253-539-0060

Infectious Waste

Procedures and Management Plan



DIVISION OF HAROLD Le MAY ENTERPRISES, INC.
Member of: National Solid Waste Management Association
Washington Waste Management Association

I. Background

The handling, transportation, disposal and treatment of medical waste presents special circumstances to employees conducting such operations related to the diversity and nature of hazards associated with such activities. The presence of varying hazards contained in the waste stream requires the implementation of measures to control the potential of occupational injuries and illness associated with these activities.

II. Scope and Purpose

This procedure applies to all activities and operations related to the treatment, packaging, transportation, temporary storage, and handling of medical waste, or otherwise involving a potential exposure to medical waste or medical contaminated materials.

III. Definitions

A. Infectious Waste – Waste capable of causing an infectious disease via exposure to a pathogenic organism of sufficient virulence and dosage, through a portal of entry in a susceptible host. Infectious waste includes the following types:

1. **Contaminated Sharps** – shall mean all discarded objects that have come into contact with infectious or potentially infectious agents during use in human or animal care, or in medical research or industrial laboratories that may inflict a puncture or laceration wound. Examples include but are not limited to needles, syringes, scalpel blades, and broken glassware.
2. **Human Blood and Blood Products** – shall mean waste human blood and blood products that may or may not contain an infectious agent. Examples include but are not limited to serum, plasma, and other blood components.

3. Cultures and Stocks of Infectious Agents and Associated Biologicals – shall mean all specimens, cultures, and stocks of infectious agents from medical, pathological, and clinical research, and industrial laboratories that may or may not contain an infectious agent. Also included are all wastes from the production of biologicals, and discarded live and attenuated vaccines.
4. Contaminated Laboratory Wastes – shall mean all wastes from medical, pathological, veterinary, research, commercial, or industrial laboratories that have come into contact with infectious agents. Examples include but are not limited to specimen containers, culture dishes, slides and cover slips, glassware, and devices used to transfer, inoculate, and mix cultures of infectious agents.
5. Human Pathological Wastes – shall mean all human tissues, organs, and body parts from surgery, obstetrical procedures, autopsy, and biopsy.
6. Contaminated Animal Carcasses, Body Substances, Parts, and Bedding – shall mean all animal carcasses, body substances, parts, and bedding that has been exposed to an infectious agent in research, production of biologicals, or in vivo pharmaceutical testing. Also included are all body substances from animals that may be contaminated with an infectious agent transmissible to humans.
7. Miscellaneous Contaminated Items – Waste items not included in the above definitions that have come into contact with human body substances or other sources which may contain pathogenic organisms of sufficient concentration that exposure to the waste directly or indirectly creates a significant risk of disease transmission.

B. Transportation Operations

1. All work activities conducted by employees and/or supervisors related to the operation of vehicles for the purpose of picking up medical waste from generators, and the transportation of waste to treatment facilities. These activities include the operation of vehicles, picking up, handling and loading of packaged waste materials at generator locations and the clean-up of spills while in transit.

IV. Procedure

A. General Requirements

1. Medical

- a. All employees assigned to activities or operations involving medical waste handling shall have completed a comprehensive physical examination within the last twelve months.
- b. In addition, all LeMay employees routinely or permanently assigned to activities or operations involving medical waste handling should receive and/or maintain current immunization for Tetanus and Heptivac.

2. Training

- a. All employees assigned to activities or operations involving medical waste handling shall have completed blood borne pathogen training annually.

3. Safety Review Meetings

- a. A Safety Review Meeting shall be conducted quarterly by the Supervisor for all employees assigned to activities or operations involving medical waste.
 - i. Job hazards
 - ii. Safety instructions on:
 1. various operations or use of equipment as it relates to safety.
 2. Emergency Procedures (i.e., contacting supervisor in the event of a spill, injury or illness.)
 3. Safety responsibility of various personnel.
- b. Meetings shall be designed to cover routine aspects of the operation (i.e., loading and unloading of vehicles, handling waste packages.)
- c. Supervisor shall be notified to review safety precautions prior to the following situations:
 - i. Repacking of waste containers.
 - ii. Operations involving opening waste containers, inspection of contents, etc.
 - iii. Handling of large quantities of pharmaceutical or contaminated laboratory chemicals.
 - iv. Clean-up of any spill contaminating greater than the surface area of a box bottom.
 - v. Any work operation, which is significantly different than the scope of work covered by the routine handling of infectious waste.

4. Personal Hygiene

- a. Employees shall thoroughly wash their hands, forearms and face before eating, drinking, smoking, applying cosmetics, taking breaks outside the work area and at the end of shift. Hand washing shall consist of use of an approved disinfectant soap and hot water. Employees shall wet their hands, apply a generous amount of soap, work up a full lather, clean under fingernails and then use the grip method to lather all surface of the hands and fingers. Turn off faucets with paper towel. A similarly thorough process shall be used to wash the forearms and face.
- b. Employees with open sores, serious cuts or abrasions on the hands, forearms or face shall not be assigned duties involving handling medical waste unless approved by a physician. Employees with these conditions must report them to their Supervisor prior to beginning work.

5. Safe Work Practices

- a. When handling medical waste boxes, employees shall insure that :
 - i. Boxes are inspected before they are picked up, moved, handled, etc.
 - ii. The inside plastic liner (red bags) shall be closed up and sealed.
 - iii. Box lids shall be firmly in place.
 - iv. No sharps shall be visibly penetrating through box exteriors.
 - v. There shall be no visible contamination on the exterior of boxes (including the bottom).
 - vi. Boxes that are damaged or leaking shall not be handled as is. If possible they may be over-packed into a larger double lined container after notifying Supervisor.
 - vii. Boxes suspected or known to be leaking, damaged, contaminated (exterior), punctured (protruding sharps) or improperly packaged should not be handled. Employees shall contact their Supervisor when these conditions are identified.

viii. Safe lifting practices are used when lifting and carrying boxes.

1. Lift with the legs.
2. Use a firm hand grip.
3. Keep a low center of gravity (keep weight close to body).
4. Handle and touch boxes only while wearing protective gloves.

b. When handling sharps, employees shall:

- i. Avoid any and all contact with any sharps during any and all work operations.
- ii. Sharps shall be assumed to be present when inspecting, handling, lifting or repackaging of any boxes or containers.
- iii. Visually inspected prior to being touched or gripped.

c. For prevention of cross contamination employees shall:

- i. Identify work activities and situations that may result in the spread of contamination.
- ii. Identify visible contamination, spills, leaks.
- iii. Assume and treat general work surfaces as contaminated until they have been cleaned and surface disinfected.
- iv. Avoid walking through any visible contamination, spills or spill areas that have not been surface disinfected.
- v. Avoid touching any surfaces other than boxes and known contaminated tools or controls while wearing gloves that have previously been used to handle or manipulate boxes, tools or controls.
- vi. Gloves shall be removed before handling any clean surfaces (door handles, telephone, steering wheel, etc.).

6. Reporting Incidents

- a. Employees shall report all work related injuries to the supervisor immediately. Supervisors shall complete a "Supervisor's Report of Employee injury" form and notify proper agencies.
- b. Employees shall report all leaking boxes, spills, and/or emergencies to the supervisor immediately.

B. Disposal or treatment facility safety equipment to be carried on board LeMay Enterprises truck:

- a. The following safety equipment shall be at the work site, and within 75 feet from any work area.
 - i. Type A first aid kit
 - ii. Emergency eye wash
 - iii. Minimum 15 lbs, ABC fire extinguisher.
 - iv. Bio Bond Hardener
 - v. 10% chlorine bleach solution

- a. Above equipment shall be inspected at least quarterly by the Supervisor.

- b. Contamination Control

- i. Once emptied all storage areas (trucks, trailers) must be sanitized using a 10% chlorine bleach solution.

- ii. When performing this activity the employee is required to wear PVC gloves and a face shield.

- c. Spills and Emergency Procedures

- i. General requirements for responding to container leaks, spills, fires, releases of gases or vapors, or other unusual circumstances:

1. Any employee who observes or identifies any incident shall immediately notify his/her immediate supervisor.

2. The work area shall be evacuated.

3. The supervisor or person in charge shall take any immediate action determined to be safe, to mitigate the situation.

4. Standby protective clothing and equipment shall be maintained when cleaning up spills or leaks.

- ii. If a major injury occurs requiring medical treatment beyond first aid, the office must be contacted immediately. Based on the severity of the injury either 911 will be dialed to contact an ambulance for life threatening injuries or, if less severe, the employee will be transported to the emergency room at the Good Samaritan Hospital located at 407 14th Avenue SE, Puyallup, WA (253-848-6661), or the closest emergency facility to the victim. Containment and clean up procedures. Following a spill of infectious waste, or its discovery, the following minimum procedures shall be implemented:

1. The cleanup personnel will don the appropriate protective clothing and gear and secure the spill area.
2. Apply Bio Bond Hardener as necessary and apply disinfectant to contaminated items and area.
3. Place spill items inside infectious waste bags and secure.
4. Clean and disinfect non-disposal items.
5. Remove cleanup clothing and gear and place disposable items inside infectious waste bags and secure.
6. Replenish used items.
7. Practice good personal hygiene by washing hands, or showering after spill cleanup.
8. A berm will be installed around the entire perimeter of the spill.

d. Other Handling Procedures

- i. Medical waste containers shall never be stored outside or otherwise open to the elements.
- ii. Medical waste shall not be stored longer than 48 hours prior to treatment or disposal. Unless properly refrigerated.
- iii. All medical wastes shall be bagged in approved, tear resistant, red bags. All bags shall be packaged in approved packaged containers.
- iv. All bags and containers shall be labeled "Infectious Waste" or with the international biohazard symbol and the word "Biohazard".
- v. All containers must have tight fitting covers.

e. Other Facility Procedures for LRI Autoclave (backup facility)

- i. See start up procedures for steam sterilizer.
- ii. Whenever handling medical waste you are required to wear protective gloves.
- iii. Using proper lifting techniques, load each box from the transport truck onto the loading dock.
- iv. Take each lid off each box and, if applicable, unfold each lid and line the bottom of the loader.
- v. Place each box inside loader. It is not necessary to touch the bag. The bag will automatically open when the autoclave reaches a certain temperature.

- vi. Place holding cart inside autoclave and insure that the door is properly shut.
- vii. Check all mechanical gauges to insure system is functioning properly.
- viii. When ready, push start button, to start the sterilization process.
- ix. When the sterilization process is completed, allow the autoclave to cool down at least ten minutes.
- x. Carefully open the autoclave door (using proper gloves). Stand back to allow the autoclave to cool down at least ten minutes.
- xi. Pull the holding cart from autoclave and push button to dump contents into the dumpster.
- xii. Call to have truck pick-up dumpster and unload into the landfill.
- xiii. After each load to the landfill, a dump ticket must accompany the driver and be kept on file for a minimum of three years.
- xiv. See procedures for shutting down sterilizer.
- xv. Repeat previous steps for each load in autoclave.
- xvi. A continuous daily policing and pick up of litter shall be maintained.
- xvii. After the sterilization process is complete and the waste is deemed non-infectious, the waste will be dumped into the dumpster. The driver will take the sterilized waste to the landfill. The landfill will have a special burial for the waste. A dump ticket will be given to the driver and kept on file for at least three years.

f. Inspections and Monitoring

- i. The first load of each day shall be tested for complete sterilization.
- ii. Each test shall be recorded daily in the logbook.
- iii. In any test proves the waste was not sterilized, check all equipment and repeat steps for autoclave and sterilization procedures. In addition, the next load must have two spores; one for a test to be completed by an independent lab, the other will be tested on-site.
- iv. If our test proves to be positive and the independent is negative, then check for faulty equipment, and replace accordingly.
- v. All tests on-site will be accomplished using the 3M Biological Monitoring System.

2. Record Keeping

The following procedures require the maintenance of records for a period of at least one year.

i. Steam sterilizer (each cycle)

1. Time of cycle
2. Temperature
3. Pressure
4. Type of waste
5. Type of containers
6. Maximum load quantity

ii. Test Spores

1. The "Attests" 3M Biological Monitoring System spore test should be placed in the middle of a representative load of infectious waste on a daily basis. Also, spore testing should be performed on a quarterly basis by a certified laboratory. In addition, the above spore test results should be recorded and kept for a minimum of three years.

iii. Storage

1. Date entered
2. Temperature
3. Number on box
4. Date removed
5. Size
6. Initial

iv. Waste Manifest

1. Type of waste
2. Generator's name
3. Size and quantity

3. Storage

a. Temperature Storage Period

- i. Infectious Waste received at the facility shall have 48 hours to be treated and rendered non-infectious or shall be subject to the following storage temperature requirements:

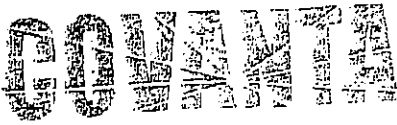
1. Refrigeration at a temperature between 34F to 45F for up to seven days.
2. Refrigeration at a temperature at or below 32F for periods longer than seven days but less than ninety days.

- b. Site Contingency Plan
 - i. In the event of equipment failure for 48 hours or longer, the operator will store the waste in the refrigeration storage box and be stored until the equipment is operable. Please see Temperature Storage Period for storage times and temperatures required.
- 4. Standards for Treating Infectious Waste At the Facility
 - a. Method
 - i. Steam Sterilization
 - b. Specific Types (See Definitions)
 - c. Types of Infectious Waste not accepted for Steam Sterilization:
 - i. Chemotherapeutic/Antineoplastic
 - ii. Human Pathological Waste
 - iii. Contaminated Animal Carcasses, body parts
 - iv. Pharmaceutical Drugs
 - v. Radioactive materials
 - d. Restrictions on Waste
 - i. No untreated waste can be compacted in any way prior to treatment.
 - ii. Waste can only be stored 48 hours unless refrigerated.
 - e. Location of Incinerator (Primary Facility)
 - i. All facility procedures must be followed upon arrival at this facility.
 - ii. See procedures enclosed.
 - iii. All waste being destroyed by incineration will be taken to:

Covanta Marion
4850 Brooklake Road NE
Brooks, OR 97305

Distribution:

Truck # 9580
Truck # 9514
Sid Colby
David Kinnear
Jessie Bailey
James Jenkins
Customer Service / Dispatch Office



Covanta Marion, Inc.

Procedure for Haulers Delivering Medical Waste

1. Prior to any delivery being accepted at Covanta Marion, Inc. (CMI), you must have an account and a Certificate of Insurance on file with the Marion County Department of Solid Waste Management.
2. Each vehicle transporting infectious waste must be registered with the Public Utilities Commission (PUC) and follow their transporter rules.
3. Arrangements regarding the amount of medical waste to be incinerated and a delivery time must be made with CMI by calling (503) 393-0890.
4. Each delivery truck must carry:
 - a. Extra empty medical waste boxes. The boxes must be rigid walled with double strength liners. All medical waste containers shall be appropriately labeled.
 - b. Plastic liners for the boxes.
 - c. Personal Protective Equipment (PPE) which includes protective clothing, shoe covers, face shields and ANSI approved safety goggles or glasses with side-shields, latex or surgical gloves, ANSI-approved hard hat, hearing protection with a minimum noise reduction rating (NRR) of 27, and dust or surgical masks. Additional puncture-proof gloves are also a good idea.
 - d. Spill clean-up kit which includes: fresh 10:1 water and bleach mixture (or comparable disinfecting solution) in a hand-held sprayer, absorbent material, a broom and scoop shovel, PPE, broom and scoop shovel, and large, heavy plastic bags with tie wraps that can completely enclose a 40 gallon box. In addition, the spill kit must contain spill clean-up procedures and report forms, extra pair of clean street clothes, and "Caution" tape or other warning signs. Further, soap and towels should also be carried in case personnel need to decontaminate themselves.
5. Once you have scheduled an appointment and driven to CMI, proceed to the platform scales, and the operator or scale attendant will meet you to record your incoming weight, time, driver's name, and company. They may also ask for your PUC registration as an infectious waste transporter.
6. If it is after hours, stop at the front entrance gate and use the call box, which is located between the CMI entrance and exit roadways, to call the Control Room. Let the operator know the name of your company and that you are delivering medical waste.
7. The operator will direct you to the scales to be weighed and then to the tipping floor conveyor. A phone is provided near the conveyor for communication with the control room. When you are ready to begin unloading call the control room and they will let you know when you can begin.

8. In addition, a new switch has been installed by the phone at the conveyor which is to be used to activate a light visible from the crane chair. This light will serve as a reminder that there is medical waste to be fed and must remain on whether or not the conveyor is actually running. When all of the medical waste is fed, the hauler will turn off the light.
9. In the event that the crane operator is unable to actually feed medical waste into the feed hopper, the crane operator will start the conveyor so the hauler can load boxes of medical waste onto the conveyor until the conveyor is full. Then either the crane operator or the hauler will shut off the conveyor until the medical waste can be fed into the feed hopper; the crane operator starts the conveyor.
10. Except in the administrative areas or the tipping floor, the driver and any helpers must wear ANSI-approved hardhat and safety glasses (or splash goggles), hearing protection with a noise reduction rating of at least 27. However, protective gloves must be worn while unloading boxes of medical waste.
11. The hauler is responsible for:
 - a. Unloading the medical waste boxes onto the conveyor; one box every other flight unless otherwise instructed.
 - b. Monitoring the boxes to prevent any box damage or spillage as they travel up the incline belt to the boilers.
 - c. Stopping the conveyor in the event of plugs or spills. (See attached procedure.)
 - d. Bagging any boxes that are wet or dripping before loading them onto the conveyor.
 - e. Cleaning up any spills and disinfecting the area. PPE must be worn whenever a hauler is cleaning up a spill or disinfecting an area.
12. Civil personnel will control the conveyor feed by starting and stopping it to properly feed the boiler.
13. When the conveyor is stopped, DO NOT restart it. The operator will start it when he determines he is able to process more waste.
14. Call the control room to let them know that you are finished unloading. The Operations Foreman or control room operator will inspect the area around the conveyor and the feed-chute hopper and let you know if you are free to leave.
15. Return to the facility scales to have your weight recorded. The operator will prepare a "Delivery Receipt". After signing, a copy will be given to you.
16. Medical waste companies and their personnel shall comply with all applicable federal, state and local regulations.
17. All medical waste haulers should:
 - a. Wash their hands and face before eating, drinking, smoking or putting anything in their mouths while handling medical waste. Eating, drinking, smoking or chewing are not allowed on the tipping floor.
 - b. Check clothing, boots and equipment before leaving the tipping floor. Haulers shall decontaminate clothing and boots, as necessary, prior to entering the building.

MEDICAL WASTE CONVEYOR CLEARANCE PROCEDURES

1. **DO NOT**, under any circumstances, stand, climb or walk on the conveyor system.
2. In the event of a jammed box, call the control room to stop the conveyor.
3. Come up to the Control Room and ask the Operations Foreman or Operator to accompany you to the charging deck to reverse the conveyor. Unless otherwise instructed, only an Covanta employee is allowed to reverse the conveyor to clear plugs.
4. If the pluggage can not be cleared by reversing the direction of the conveyor, the conveyor will have to "Locked Out" in accordance with CMI Safety Procedure 14. Proceed back to the Control Room where the Operations Foreman will walk through the procedure with the driver.
5. Once the conveyor has been locked out the driver and/or helper will either use a poke-pole to dislodge the box from above the conveyor. If the jam is below the beam, the driver must use a lift to reach the conveyor. The lift will be brought to the tipping floor by Covanta personnel as soon as possible. Under no circumstances is anyone allowed to climb on or up the conveyor system.
6. Once the jam is cleared; the medical waste hauler will re-box the waste. The charging deck, tipping floor and conveyor will be disinfected as appropriate. PPE should be worn while clearing a plug and during decontamination procedures.
7. All protective clothing and clean-up equipment shall be decontaminated or disposed of in accordance with applicable regulations and company policy.

ACCEPTABLE AND NON-ACCEPTABLE MEDICAL WASTE

ACCEPTABLE

1. Biological cultures, specimens and other contaminated laboratory waste
2. Blood and blood products, such as blood plasma and blood serum
3. Surgical/pathological wastes such as blood and body fluids from surgery
4. Sharps, such as needles, syringes, broken glass and blades
5. Wastes generated by hospitalized patients who are isolated in separate rooms because of their severe and communicable diseases.

NON-ACCEPTABLE

1. Any hazardous or radioactive waste.
2. Chemotherapy waste, including bags, waste drugs, IV tubing and related equipment, fume hood filters, etc.
3. Formaldehyde or other preservative agents.
4. Animal carcasses over 65 pounds.

TESTIMONY OF LARRY MEANY
Harold LeMay Enterprises, Inc.

EXHIBIT 7

TESTIMONY OF LARRY MEANY
Harold LeMay Enterprises, Inc.

EXHIBIT 8

COVANTA MARION, INC
4850 Brooklake Road NE
P.O. Box 9126
Brooks, OR 97305

№ 0342

DELIVERY RECEIPT

Date: 2-3-04

Time:

Company LeMay

Truck # 9514

Weight In 300

Weight Out 1300

NET WEIGHT 980

David W. Kinner
Driver

David W. Kinner
Operator

Original - COVANTA
Pink - DRIVER

Yellow - MARION COUNTY

TESTIMONY OF LARRY MEANY
Harold LeMay Enterprises, Inc.

EXHIBIT 9



COMMERCIAL DIVISION
 P. O. BOX 44459, TACOMA, WA 98444-0459
 (253) 539-0060 Fax (253) 539-0063

B/L # 59049
 Carrier No. MC 159255
 CC 9099

Pick Up Date: 02/03/04

Delivery Date: 02/03/04

CONSIGNEE	DESTINATION
LEMAY YARD	COVANTA MARION
13502 PACIFIC AVE	4850 BROOKLAKE RD NE
TACOMA, WA	BROOKS, OR

DOCK TIME: _____ DOCK TIME: _____

B/L or Wgt. TICKET #	# OF UNITS	# LDS	COMMODY / DESCRIPTION	WEIGHT
	VAN		INFECTIOUS WASTE FOR INCINERATION	11360
			TARE: 9380	
TOTALS				

This Shipping Order is subject to the terms and conditions contained on the back of this form.

CARRIER: Daniel W. Kinner AUTHORIZED SIGNATURE
 CONSIGNEE: [Signature] AUTHORIZED SIGNATURE
 DATE: _____

SPECIAL INSTRUCTIONS: WE HAVE TO BE DONE BY 10PM

TRLR #1 TRLR #2 DOLLY

DRIVER INFORMATION		DATE	TRIP	LOAD	UNLOAD	DOWN
DRIVER'S NAME		Mo / Day	Time	Time	Time	Time
DAVE K	TRACTOR 5914	START 2/3	5:00	←	8:15	
		STOP 2/3	12:10		9:00	
	TRACTOR	START /				
	TRACTOR	STOP /				
	TRACTOR	START /				
	TRACTOR	STOP /				
	TRACTOR	START /				
	TRACTOR	STOP /				

BILLING INFORMATION (OFFICE USE ONLY BELOW THIS LINE)

DESCRIPTION OF CHARGE	METHOD	# BILLING UNITS	RATE	TOTAL
		7.25		

TESTIMONY OF LARRY MEANY
Harold LeMay Enterprises, Inc.

EXHIBIT 10



13502 PACIFIC AVENUE
P.O BOX 44459 • TACOMA, WA 98444-0459
PHONE 253-539-0060

Saint Francis Hospital
34515 9th Ave South
Federal Way, WA 98003

Dear Infectious Waste Manager,

This letter is to introduce our company to you as a potential alternative for the transportation of the infectious waste generated from your facility. We are LeMay Enterprises, a locally owned company with a long standing reputation for providing high quality waste hauling services in the South Puget Sound area, to include Tacoma, Olympia, Aberdeen, Centralia and surrounding areas. We are currently exploring the feasibility of expanding our infectious waste hauling service to King County.

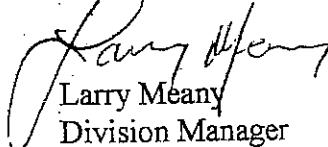
Currently, our intent is to determine the interest of the greater King County health care community in having an additional infectious waste hauler which provides superior service to health care providers. We will present our findings to the Washington State Utilities and Transportation Commission in an attempt to gain regulatory authority to provide infectious waste hauling service in King County.

We would deeply appreciate your assistance in providing this vital information. Please rest assured that by responding you are in no way making any commitments to us for service. We will only be using your responses to present the commission with factual findings that indicate the level of interest from the King County health care community.

Attached is a response form and a self-addressed, postage paid envelope. Thank you very much for your vital feedback. We look forward to the opportunity to service your infectious waste disposal needs in the future. If you have any questions regarding our services please don't hesitate to contact me directly at (253)-536-4420. I will be glad to provide you with information about our company and the services we provide.

Thanks again for your help!

Sincerely,


Larry Meany
Division Manager

DIVISION OF HAROLD Le MAY ENTERPRISES, INC.
Member of: National Solid Waste Management Association
Washington Waste Management Association

King County Infectious Waste Survey

Yes; I am interested in increasing competition and having an additional choice for infectious waste service providers in King County.

No; I am not interested in having an additional infectious waste service provider in King County at this time.

If you prefer a business card may be attached in the area below.

Name: _____

+ CATHOLIC HEALTH
INITIATIVES

Facility Name: Franciscan
Health System

34515 9th Ave. South
Federal Way, WA
98003

Street: _____

City, State, Zip

CHET ZYGMUNT
Facilities Manager

Phone 253.942.4111
253.927.9700
Ext. 1251200
Fax 253.952.7944
Email chetzygmunt@
chiwest.com

Signature: _____

Date: _____

King County Infectious Waste Survey

Yes;

I am interested in increasing competition and having an additional choice for infectious waste service providers in King County.

No;

I am not interested in having an additional infectious waste service provider in King County at this time.



Chuck Thorell, C.H.E.M.
Manager

Environmental Services
12040 NE 128th Street
Kirkland, WA 98034-3098
cthorell@evergreenhealthcare.org

Tel: 425-899-1783
Fax: 425-899-3608

attached in the area below.

Signature: _____

Date: _____



13502 PACIFIC AVENUE
P.O. BOX 44459 • TACOMA, WA 98444-0459
PHONE 253-539-0060

Swedish Medical Center / Ballard

~~PO Box 70707~~ 5300 TALLMAN AVE NW
Seattle, WA 98107

Dear Infectious Waste Manager,

This letter is to introduce our company to you as a potential alternative for the transportation of the infectious waste generated from your facility. We are LeMay Enterprises, a locally owned company with a long standing reputation for providing high quality waste hauling services in the South Puget Sound area, to include Tacoma, Olympia, Aberdeen, Centralia and surrounding areas. We are currently exploring the feasibility of expanding our infectious waste hauling service to King County.

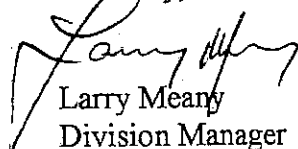
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Thanks again for your help!

Sincerely,


Larry Meany
Division Manager

King County Infectious Waste Survey

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No; I am not interested in having an additional infectious waste service provider in King County at this time.

If you prefer a business card may be attached in the area below.

Name:

Facility Name:

Street:

City, State, Zip:

Signature:

Date:



SWEDISH MEDICAL CENTER | BALLARD

Renee Masterson
Facility Manager
Physical Resource Management

5300 Tallman Ave. N.W. Seattle, WA 98107-1507
Phone (206) 781-6237 Fax (206) 781-6117
renee.masterson@swedish.org

Renee Masterson

3/12/04

King County Infectious Waste Survey

Yes;

I am interested in increasing competition and having an additional choice for infectious waste service providers in King County.

No;

I am not interested in having an additional infectious waste service provider in King County at this time.

If you prefer a business card may be attached in the area below.

Name: _____

Facility Name: _____

Trammell Crow Company

Street: _____

Thomas Mills
Environmental Services Supervisor

City, State, Zip: _____

Group Health Cooperative Account
201 16th Avenue East MS CSB-80113 Seattle, Washington 98112
Main 206-326-3300 Direct 206-326-2043
Fax 206-326-3325 Pager 206-314-1025
tmills@trammellcrow.com

Signature: _____



Date: _____

3-25-04



13502 PACIFIC AVENUE
P.O. BOX 44459 • TACOMA, WA 98444-0459
PHONE 253-539-0060

Harborview Medical Center
325 Ninth Ave
Seattle, WA 98104

Dear Infectious Waste Manager,

This letter is to introduce our company to you as a potential alternative for the transportation of the infectious waste generated from your facility. We are LeMay Enterprises, a locally owned company with a long standing reputation for providing high quality waste hauling services in the South Puget Sound area, to include Tacoma, Olympia, Aberdeen, Centralia and surrounding areas. We are currently exploring the feasibility of expanding our infectious waste hauling service to King County.

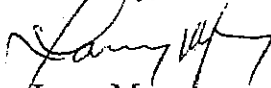
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Sincerely,



Larry Meany
Division Manager

DIVISION OF HAROLD Le MAY ENTERPRISES, INC.

Member of: National Solid Waste Management Association
Washington Waste Management Association

King County Infectious Waste Survey

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If you prefer a business card may be attached in the area below.

Name: _____

Facility Name: _____

Street: _____

City, State, Zip: _____

Signature: _____

Date: _____

Kathryn M. Olf
Operations Manager of Environmental Services
Department of Hospitality Services, Box 359793

325 Ninth Avenue
Harborview Hall, BHH10
Seattle, WA 98104-2499
206-341-4020
FAX: 206-731-8635
Email:
kathyo@u.washington.edu

