TO BE COMPLETED BY REQUESTING DEPARTMENT			
MAKER AND DEPARTMENT: R. WEMPER	DATE: 9/ /85	TOT. EST. COST	SHOW ANY SUGGESTED VENDOR'S NAMES HERE
DATE REQUIRED: 9/13/85	DELIVER TO (NAME AND ROOM): HARBOR ISLAND PLANT	OWN USE: XX / RESALE	APPROVED BY (REQUISITION AUTHORITY)
TO BE USED FOR: HAZ. WASTE DISPOSAL	COMMODITY CODE: K-4 8		ACCOUNTING CODE, W.O. OR A.F.E. (IF APPLICABLE)

0-304-8WP PRTD. (11-84)

PURCHASE ORDER

FRONT: REV. 12-83 BACK: REV. 10-82

5

[X] Shell Oil Company [ ] Shell Chemical Company [ ] Shell Development Company

HEREIN CALLED "SHELL"

PURCHASE ORDER NO. Show this Number on Invoices, Tags, Boxes, etc.

BLANKET ORDER NO. (IF APPLICABLE)	ALTERATION NO.	RELEASE NO.	DATE
NAT'L AGREEMENT WITH CWM		MDH-03102	9/11/85

VENDOR NAME AND ADDRESS

CHEM-SECURITY SYSTEMS, INC.
BOX 1866
BELLEVUE, WA 98009

HEREIN CALLED "CONTRACTOR"

SHIP TO

SHELL OIL COMPANY
2720 13TH AVENUE S.W.
SEATTLE, WA 98134

BILL TO

SHELL OIL COMPANY
ATTN: DISBURSEMENTS
P. O. BOX 4848
ANAHEIM, CA 92803

CC: SHELL OIL COMPANY
P. O. BOX 3947
SEATTLE, WA 98124

IMPORTANT: Mail invoice in QUADRUPLICATE with two copies of FREIGHT BILL (when PREPAID and ADDED to INVOICE), ACKNOWLEDGEMENT, SHIPPING NOTICES, and BILLS OF LADING to:

SHIP VIA — FREIGHT:	F.O.B.	TERMS	TAXABLE	NON-TAXABLE
[ ] PREPAID [ ] PREPAID/ADD TO INVOICE [ ] COLLECT	JOBSITE	NET 30		X

1. If delivery is not or cannot be made promptly by _____, Contractor must so notify SHELL immediately, and SHELL reserves the right to cancel this order in whole or in part. To give such notice, or for any further information, contact 213/513-2037
2. If routing is NOT specified, ship by cheapest route; but if that route will not meet required delivery date, contact SHELL for instructions. If products are subject to released value FREIGHT RATES and sold FOB origin with FREIGHT CHARGES for SHELL'S account, ship at the released value which will provide the lowest rate. DO NOT insure shipments unless specifically instructed. NO CHARGES will be allowed for packing or cartage unless specified in QUOTATION.
3. Show cash discount terms on invoice. All invoices for material on which no discount is allowed will be paid 30 days from date invoice is received.

QUANTITY	MATERIAL OR SERVICE	PRICE
	CONFIRMING TO MARCIA - DO NOT DUPLICATE	
	LOAD AND TRANSPORT HAZARDOUS WASTE FROM OUR FACILITY AS REFERENCED	
	ABOVE AND DISPOSE OF AT THE CLASS I DISPOSAL SITE AT CHEMICAL WASTE	
	MANAGEMENT, KETTLEMAN CITY, CALIFORNIA, ON MANIFEST NUMBER 84841791.	
	TERMS AND CONDITIONS OF OUR NATIONAL AGREEMENT WITH CHEMICAL WASTE	
	MANAGEMENT SHALL APPLY.	

AUTHORIZED SHELL REPRESENTATIVE: Anna Sampson

STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

GEORGE DEUKMEJIAN, *Governor*

DEPARTMENT OF HEALTH SERVICES
107 SOUTH BROADWAY, ROOM 7011
LOS ANGELES, CA 90012
(213) 620-2380

SEP 17 1985

Ms. Anna Sampson
Shell Oil Company
P.O. Box 6249
Carson, CA 90749

Dear Ms. Sampson:

We have reviewed your application for an extremely hazardous waste disposal permit. We find that the wastes you described are not extremely hazardous and do not require a permit for their disposal. (Lead is not considered extremely hazardous in the non-organic form).

However, your wastes are hazardous and must be managed in accordance with applicable California codes and local regulations which require that these wastes must be manifested and transported by a registered transportor to a permitted facility.

If you have any questions, please call Azita Yazdani of my staff at the above number between the hours of 8:00 a.m. and 11:00 a.m.

Sincerely,

Sazedur Rahman

Sazedur Rahman, Program Manager
Facility Permitting Unit
Southern California Section
Toxic Substances Control Division

SR:AY:ls

cc: J.T. Clarkson - Manager - Harbor Island
R.G. Wrapir - Plant Supervisor

WASTE PRODUCER, PLEASE CHECK APPLICABLE PERMIT REQUEST:

X New Permit

____ Renewal Permit (Current Permit No. _____ Date _____)

____ Amendment and (Current Permit No. _____ Date _____)

____ Verbal Permit (No. _____ Date _____)
(If given verbal emergency permit by telephone)

For Office Use Only:

Permit # _____

Date Handled _____

Date Sent _____

CALIFORNIA DEPARTMENT OF HEALTH SERVICES
Hazardous Materials Management Section

Section Offices:

714/744 P Street
Sacramento, CA 95814
(916) 322-2337

2151 Berkeley Way
Berkeley, CA 94704
(415) 540-2043

5545 East Shields Avenue
Fresno, CA 93727
(209) 291-6676

107 South Broadway
Rm. 7012
Los Angeles, CA 90012
(213) 620-2380

APPLICATION FOR
CALIFORNIA EXTREMELY HAZARDOUS WASTE DISPOSAL PERMIT*

Please type or print clearly. Provide all information requested, since omissions will result in delay or denial of permit. Allow 15 days process time from day of receipt.

WASTE PRODUCER:

Name of Firm Shell Oil Company

Street and No. (Or P.O. Box) 2720 13th Avenue S.W.

City Seattle *State* WA *Zip Code* 98124

Telephone No. (206) 453-3051 *County* King

Pick Up Address (If Different)

Applicant J. T. Clarkson *Title* Plant Manager

PROPOSED HAULER: Chem-Security Systems, Inc.,

Hauler Reg. No. ORD089452353

SEP 09 1985
Department of Health Services
LOS ANGELES

PROPOSED DISPOSAL (OR OTHER) FACILITY: Chemical Waste Management, Inc., Kettleman City, CA

PROPOSED METHOD OF DISPOSAL: Stabilization &

Burial X Ponding __ Storage __ Other *(Specify)* _____

Treatment *(Specify type)* _____

Recycle *(Specify method of reuse)* _____

*Required for handling or disposal of extremely hazardous wastes (Section 66570, Title 22, CAC).

CALIFORNIA DEPARTMENT OF HEALTH SERVICES
Hazardous Materials Management Section

APPLICATION FOR
CALIFORNIA EXTREMELY HAZARDOUS WASTE DISPOSAL PERMIT

DESCRIPTION OF WASTE (Including Composition with Upper and Lower Concentration of Hazardous Components)	CONCENTRATION Lower	Upper	Units, % or ppm	QUANTITY (For year's permit give estimated quantity per disposal and per year)
Red Lead		55	%	
Petroleum Distillate		20	%	
Paint Lacquer Base Mat'l		25	%	

(Attach page(s) for additional wastes)

DESCRIPTION OF PACKAGING: (Packaging, Containerization)

Drums _____ Cartons _____ Bottles _____ Tank Truck _____

Other 5-Gallon Pails - Palletized
(Specify in detail of packaging multicontainers)

Packaging, containerization, and transport of the material shall be in accordance with Title 49, Code of Federal Regulations for hazardous materials, and with regulations of the California Highway Patrol, Title 13, California Administrative Code, for intrastate transport of hazardous materials and, for PCB-containing wastes, in accordance with U.S.E.P.A. regulations set forth in Title 40 CFR Part 761.

PERMIT TO BE USED FOR: (Length of Time)

Single Disposal X

One Year Maximum for Multiple Disposals ___

PERMIT RENEWALS: *(Application for renewal of a one-year blanket permit, using this form, must be received at least 15 days prior to expiration date to keep permit in effect).*

Signature of Applicant Anna Sampson for J. T. Clarkson

Company and City She ll Oil Compan y, Seattle, WA

Date September 4, 1985

NOTE: Direct all inquiries to: Shell Oil Company
P.O. Box 6249
Carson, CA 90749
213/513-2037

1/22/81

Please send permit number to the above P. O. Box, Attention Anna Sampson

SM-32 MC (REV. 4-79)

Shell Oil Company • Shell Chemical Company
Interoffice Memorandum

SEPTEMBER 4, 1985

FROM: HAZARDOUS WASTE COORDINATION, MDP PURCHASING, WILMINGTON MANUFACTURING COMPLEX

TO: J. T. CLARKSON, PLANT MANAGER
HARBOR ISLAND DISTRIBUTION PLANT

SUBJECT: APPLICATION FOR CALIFORNIA EXTREMELY HAZARDOUS WASTE DISPOSAL PERMIT - LOCATION: SHELL OIL COMPANY, 2720 13TH AVE. S.W., SEATTLE, WA 98124

The attached application is provided for your information and covers the disposal of Red Lead Epon Ester Paint from the above location.

As the designated coordinator for the administrative handling of Hazardous Materials produced/generated in your area, we have made this application on your behalf.

Should you have any questions regarding this procedure or the location involved, please contact me at SSN 629-2037.

A.M. Sampson

A. M. Sampson

AS/ams

Attachment

cc: R. G. Wraspir, Plant Supervisor

BFPZ8524801

WASTE PRODUCER, PLEASE CHECK APPLICABLE PERMIT REQUEST:

X New Permit

____ Renewal Permit (Current Permit No. _____ Date _____)

____ Amendment and (Current Permit No. _____ Date _____)

____ Verbal Permit (No. _____ Date _____)
(If given verbal emergency permit by phone)

For Office Use Only:

Permit # _____

Date Handled _____

Date Sent _____

CALIFORNIA DEPARTMENT OF HEALTH SERVICES
Hazardous Materials Management Section

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Sacramento, CA 95814
(916) 322-2337

2151 Berkeley Way
Berkeley, CA 94704
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Fresno, CA 93727
(209) 291-6676

107 South Broadway
Rm. 7012
Los Angeles, CA 90012
(213) 620-2380

APPLICATION FOR
CALIFORNIA EXTREMELY HAZARDOUS WASTE DISPOSAL PERMIT*

Please type or print clearly. Provide all information requested, since omissions will result in delay or denial of permit. Allow 15 days process time from day of receipt.

WASTE PRODUCER:

Name of Firm Shell Oil Company

Street and No. (Or P.O. Box) 2720 13th Avenue S.W.

City Seattle *State* WA *Zip Code* 98134

Telephone No. (206) 453-3051 *County* King

Pick Up Address (If Different)

Applicant J. T. Clarkson *Title* Plant Manager

PROPOSED HAULER:

Chem-Security Systems, Inc.

Hauler Reg. No. ORD 089452353

PROPOSED DISPOSAL (OR OTHER) FACILITY:

Chemical Waste Management, Inc., Kettleman City, CA

PROPOSED METHOD OF DISPOSAL:

Stabilization &
Burial X Ponding __ Storage __ Other *(Specify)* _____

Treatment *(Specify type)* _____

Recycle *(Specify method of reuse)* _____

*Required for handling or disposal of extremely hazardous wastes (Section 66570, Title 22, CAC).

CALIFORNIA DEPARTMENT OF HEALTH SERVICES
Hazardous Materials Management Section

APPLICATION FOR
CALIFORNIA EXTREMELY HAZARDOUS WASTE DISPOSAL PERMIT

DESCRIPTION OF WASTE (Including Composition with Upper and Lower Concentration of Hazardous Components)	CONCENTRATION Lower	Upper	Units, % or ppm	QUANTITY (For year's permit give estimated quantity per disposal and per year)
Red Lead		55	%	
Petroleum Distillate		20	%	
Paint Lacquer Base Mat'l		25	%	

(Attach page(s) for additional wastes)

DESCRIPTION OF PACKAGING: (Packaging, Containerization)

Drums ____ Cartons ____ Bottles ____ Tank Truck ____

Other 5-Gallon Pails - Palletized
Specify method of packaging small containers

Packaging, containerization, and transport of the material shall be in accordance with Title 49, Code of Federal Regulations for hazardous materials, and with regulations of the California Highway Patrol, Title 13, California Administrative Code, for intrastate transport of hazardous materials and, for PCB-containing wastes, in accordance with U.S.E.P.A. regulations set forth in Title 40 CFR Part 761.

PERMIT TO BE USED FOR: (Length of Time)

Single Disposal X

One Year Maximum for Multiple Disposals ___

PERMIT RENEWALS: *(Application for renewal of a one-year blanket permit, using this form, must be received at least 15 days prior to expiration date to keep permit in effect).*

Signature of Applicant Anna Sampa for J. T. Clarkson

Company and City Shell Oil Company, Seattle, WA

Date September 4, 1985

NOTE: Direct all inquiries to: Shell Oil Company
P.O. Box 6249
Carson, CA 90749
213/513-2037

1/22/81

State of California—Health and Welfare Agency

MOH-0302

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. WAD000643080 Manifest Document No. 03102

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SHELL OIL COMPANY
P. O. BOX 6249
CARSON, CA 90749

4. Generator's Phone (213) 513-2037

GENERATING SITE
SHELL OIL COMPANY
2720 13TH AVE. S.W.
SEATTLE, WA 98134

A. State Manifest Document Number 84841791

B. State Generator's ID

5. Transporter 1 Company Name: CHEM-SECURITY SYSTEMS, INC.

6. US EPA ID Number: ORD089452353

C. State Transporter's ID 61927

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
35251 OLD SKYLINE ROAD
KETTLEMAN CITY, CA 93239

10. US EPA ID Number: CAT000646117

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTIBLE LIQUID N.O.S., COMBUSTIBLE LIQUID, UN1268	06	DM	05400	P	D001, D008 342
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
RED LEAD (55%)
PETROLEUM DISTILLATE (20%)
PAINT LACQUER BASE MATERIAL (25%)

K. Handling Codes for Wastes Listed Above
09

15. Special Handling Instructions and Additional Information
WEAR RUBBER GLOVES. AVOID INHALING FUMES. AVOID CONTACT WITH THE EYES AND SKIN.
REFER TO PROFILE SHEET #D88641

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

GENERATOR

Printed/Typed Name: RICHARD G WIRASPIR — Signature: Richard G Wiraspir — Date: Month 09 Day 13 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JOHN E CHILDERS — Signature: John E. Childers — Date: Month 9 Day 13 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space
G. CAT000646117

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Dean Robinson — Signature — Date: Month 09 Day 17 Year 85

DHS 8022 A (11/84)
(EPA 8700-22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

8489641

84841791

HI-SHELL000921

SHELL CONTACT: R. Wraspir

SSN:

SERVICE STATION LOCATION: Harbor Island

APPROXIMATE QUANTITY: 300 gallons

DESCRIPTION OF MATERIAL: Red Lead Epon Ester Paint
(SUCH AS LEADED OR UNLEADED GASOLINE)

NUMBER OF TANKS INVOLVED:

WHEN THE PROJECT ENGINEER WOULD LIKE PICK-UP ARRANGED FOR:

9/13/85

APPROXIMATE ARRIVAL AT APPROPRIATE REFINERY:

TRANSPORTER USED: Chem-Security

CONFIRMING TO: Marcia Charlton

PURCHASE ORDER NUMBER: MOH-03102

COST OF SERVICE:

DESTINATION OF MATERIAL: CWM-Kettleman City, CA

CONFIRMING TO:

*SEND WEIGHT TICKETS AND ANY PERTINENT COPIES OF TRANSACTION TO:
ANNA SAMPSON, SHELL OIL CO., P.O. BOX 6249, CARSON, CA 90749

State of California—Health and Welfare Agency

MOH-0302

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. W A D 0 0 0 6 4 3 0 8 0 — Manifest Document No. 0 3 1 0 2

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SHELL OIL COMPANY
P. O. BOX 6249
CARSON, CA 90749

4. Generator's Phone (213) 513-2037

GENERATING SITE
SHELL OIL COMPANY
2720 13TH AVE. S.W.
SEATTLE, WA 98134

A. State Manifest Document Number: 84841791

B. State Generator's ID

5. Transporter 1 Company Name: CHEM-SECURITY SYSTEMS, INC.

6. US EPA ID Number: O R D 0 8 9 4 5 2 3 5 3

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
35251 OLD SKYLINE ROAD
KETTLEMAN CITY, CA 93239

10. US EPA ID Number: C A T 0 0 0 6 4 6 1 1 1

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a. WASTE COMBUSTIBLE LIQUID N.O.S., COMBUSTIBLE LIQUID, UN1263	0 6 0	D M	0 5 4 0 0	P	D001, D008 342
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
RED LEAD (55%)
PETROLEUM DISTILLATE (20%)
PAINT LACQUER BASE MATERIAL (25%)

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
WEAR RUBBER GLOVES. AVOID INHALING FUMES. AVOID CONTACT WITH THE EYES AND SKIN.

REFER TO PROFILE SHEET #D88641

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name | Signature | Date (Month Day Year)

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name | Signature | Date (Month Day Year)

84841791

DHS 8022 A (11/84)
(EPA 8700-22)

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento CA 95812

84 89641

HI-SHELL000923

COOK

RECEIVED - COPY TO
MGR. _____ TERM FRMN _____
SUPT _____
AD _____ STAFF _____
APR 29 1985
HARBOR ISLAND PLANT
FILE _____

TOXOLOGICAL AND LABELING SECTION

Shell Oil Co.
P.O. Box 3947
Seattle, WA 18124

Attn: Don Johnson

Date April 25, 1985

In compliance with your request, we are enclosing a MATERIAL SAFETY DATA SHEET for each of the following.

CODE	PRODUCT
920-R-148	Red Lead Epon Ester Paint(4-24-85)

Thank you for the opportunity to be of service and for your interest in our product. If we can be of further assistance to you or some of your people, do not hesitate to call on us.

Sincerely,

Lillian Craig

Lillian Craig
Toxological and Labeling Supervisor

RUSH
RUSH
ANNA
SAMPSON

COMPANY
ISSOURI 64141
e 816/391-6000

HI-SHELL000924

MATE IAL SAFETY DATA S IEET

NFCA

FOR COATINGS, RESINS AND RELATED MATERIALS

(Approved by U S Department of Labor Essentially Similar to Form OSHA-20)

RECEIVED - COPY TO GR TERM FRMN JPT STAFF

E OF PREP 4-24-85

Section I

APR 29 1985 6931

NUFACTURER S NAME COOK PAINT & VARNISH COMPANY

HARBOR ISLAND PLANT

EET ADDRESS P.O. BOX 389 CITY, STATE, AND ZIPCODE KANSAS CITY, MO 64141

ERGENCY TELEPHONE NO. 816-391-6000

ORMATION TELEPHONE NO 816-391-6012

DUCT CLASS

MANUFACTURERS CODE IDENTIFICATION 920-R-148

DE NAME Red Lead Epon Ester Paint

Section II — HAZARDOUS INGREDIENTS

REDIENT	PERCENT WEIGHT	TLV PPM	TLV mg/m³	LEL	VAPOR PRESSURE @ 20°C
troleum Distillate (Cas#8032-32-4)	20.0	200		1.0	2.0
d Lead (Cas#1314-41-6) Contains lead (compounds) which is regulated as an air contaminant under OSHA regulation 29CFR 1910.1025.)	55.0		50 ug/m³ (Lead)		

Section III — PHYSICAL DATA

ING RANGE 315- 410° F

VAPOR DENSITY [XXX] HEAVIER, [ ] LIGHTER THAN AIR

ORATION RATE [ ] FASTER [XXX] SLOWER THAN ETHER

PERCENT VOLATILE BY VOLUME 54%

WEIGHT PER GALLON 16.42

Section IV — FIRE AND EXPLOSION HAZARD DATA

LAMMABILITY CLASSIFICATION OSHA 29 CFR-1910.106 (a) Parts 18-19 Comb. Liquid-Class II

FLASH POINT Setaflash 102 °F DOT Hazard Class Combustible liquid

LEL See Sect.

TINGUISHING MEDIA

Use National Fire Protection Association (NFPA) Class B extinguishers; carbon dioxide, dry chemical or foam.

UAL FIRE AND EXPLOSION HAZARDS

Keep containers tightly closed. Isolate from heat, electrical equipment, sparks and open flame. Closed container may explode when exposed to extreme heat. Application to hot surfaces requires special precautions. Never use welding or cutting torch on or near drum (even empty) because product (even just residue) can ignite explosively.

IAL FIRE FIGHTING PROCEDURES

Full protective equipment including self-contained breathing apparatus should be used. Water spray may be ineffective. If water is used, fog nozzles are preferable. Water may be used to cool closed containers to prevent pressure build-up and possible auto-ignition or explosion when exposed to extreme heat.

Section V — HEALTH HAZARD DATA

IESHOLD LIMIT VALUE See Section II

ECTS OF OVEREXPOSURE

ACUTE INHALATION: Anesthetic. Irritation of the respiratory tract or acute nervous system depression racterized by the following progressive steps if severe over exposure is continued; headache, dizziness, staggering , confusion, unconsciousness, or coma. SKIN OR EYE CONTACT: Primary irritation.

CHRONIC Excessive chronic exposure to lead may cause a metallic taste in mouth, s of appetite; indigestion, nausea, vomiting, constipation, abdominal cramps, sleeplessness weakness.

RGENCY AND FIRST AID PROCEDURES VAPORS: Remove from exposure. Restore breathing. Keep warm and quiet. Notify a ysician. Splash (eyes): Flush immediately with large amounts of water for at least 15 minutes. Take to a physician for dical treatment. Splash (skin): Wash affected areas with water. Remove contaminated clothing. Consult a physician. GESTION: DO NOT INDUCE VOMITING. If swallowed, CALL A PHYSICIAN IMMEDIATELY.

Section VI — REACTIVITY DATA

ILITY ☐ UNSTABLE ☒ STABLE CONDITIONS TO AVOID High temperatures

MPATIBILITY (Materials to avoid) Water

ARDOUS DECOMPOSITION PRODUCTS May produce hazardous fumes when heated to decomposition as in welding. Fumes contain carbon monoxide and oxide of nitrogen.

ARDOUS POLYMERIZATION ☐ MAY OCCUR ☒ WILL NOT OCCUR

DITIONS TO AVOID Elevated temperatures.

Section VII — SPILL OR LEAK PROCEDURES

S TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED Remove all sources of ignition (flames, hot surfaces, and electrostatic, or frictional sparks). Avoid breathing vapors. Ventilate area. Contain and remove with inert absorbent and sparking tools.

E DISPOSAL METHOD Dispose of in accordance with local, state and federal regulations. Do not incinerate closed ainers. Incinerate in approve facility.

Section VIII — SPECIAL PROTECTION INFORMATION

IRATORY PROTECTION When spray applied in outdoor and open areas, and during sanding or grinding operations, use d approved mechanical filter respirator to remove solid airborne particles of overspray and sanding dust. When used tricted ventilation areas, wear NIOSH approved chemical/mechanical filters designed to remove a combination of ulate, gas and vapor. When used in confined areas, wear NIOSH approved air supplied respirators or hoods. Use d approved respirators when flame cutting, welding and brazing material coated with this product.

LATION Provide general dilution or local exhaust ventilation in volume and pattern to keep the air contaminant ntration below current applicable OSHA safety and health requirements in the mixing, application and curing and to remove decomposition product during welding and flame cutting on surfaces coated with this product. Heavy solvent vapors should be removed from lower levels of the work area and all ignition sources (nonexplo- proof motors, etc.) should be eliminated.

ECTIVE GLOVES Required for prolonged or repeated contact.

PROTECTION Use safety eyewear with splash guards or side shields.

R PROTECTIVE EQUIPMENT Prevent prolonged skin contact with contaminated clothing. Wash contaminated clothing

Section IX — SPECIAL PRECAUTIONS

IONS TO BE TAKEN IN HANDLING AND STORING Do not store above 120°F. Store large quantities in buildings designed to comply with OSHA 1910.106. Keep away from heat, sparks and open flame.

TORAGE CATEGORY

Combustible Liquid Class II, OSHA 29CFR-1910.106 (a) Parts 18-19.

PRECAUTIONS

Containers should be grounded when pouring. Avoid free fall of liquids in excess of a few inches. Use with adequate entilation and respiratory equipment. See Section VIII. Do not take internally. Wash hands after using and before eating nd smoking. Keep out of reach of children. Emptied containers may retain hazardous residue and explosive vapors. o not cut, puncture or weld on or near emptied containers. Follow all hazard precautions given in this data sheet until container is thoroughly cleaned or destroyed. Avoid prolonged breating of vapor or spray ist. Avoid prolonged or repeated contact with skin.

Waste Management, Inc.

GENERATOR'S WASTE MATERIAL PROFILE SHEET

WASTE PROFILE SHEET CODE: NWPD 88641

TSDR

A GENERAL INFORMATION

GENERATOR NAME:

TRANSPORTER:

FACILITY ADDRESS:

TRANSPORTER PHONE:

GENERATOR USEPA I.D.

GENERATOR STATE I.D.

TECHNICAL CONTACT: TITLE: PHONE:

NAME OF WASTE: RED LEAD EPON ESTER PAINT — CODE 920-R-14.8

PROCESS GENERATING WASTE: (UNUSED/UNOPENED PRODUCT

B PHYSICAL CHARACTERISTICS OF WASTE

COLOR

ODOR ☐ NONE ☐ MILD ☐ STRONG

DESCRIBE

PHYSICAL STATE @ 70°F: ☐ SOLID ☐ SEMI-SOLID ☒ LIQUID ☐ POWDER

LAYERS: ☐ MULTILAYERED ☐ BI-LAYERED ☒ SINGLE PHASED

FREE LIQUIDS: ☒ YES ☐ NO

VOLUME 100 %

pH: ☐ <2 ☐ 7.1-10 ☒ N/A ☐ 2-4 ☐ 10.1-12.5 ☐ 4.1-6.9 ☐ > 12.5 ☐ 7 ☐ EXACT

SPECIFIC GRAVITY: ☐ <.8 ☐ 1.3-1.4 ☐ .8-1.0 ☐ 1.5-1.7 ☐ 1.1-1.2 ☒ > 1.7 ☐ EXACT

FLASH POINT: ☐ < 70°F ☐ > 200°F ☒ CLOSED CUP ☐ 70°F-100°F ☐ NO FLASH ☐ OPEN CUP ☒ 101°F - 139°F ☐ EXACT ☐ 140°F-200°F

C CHEMICAL COMPOSITION (TOTALS MUST ADD TO 100%)

RED LEAD	55 %
PETROLEUM DISTILLATE	20 %
PAINT LACQUER BASE MATERIAL	25 %
	%
	%
	%
	%
	%
	%
	%

D METALS ☒ TOTAL (PPM) ☐ EPA EXTRACTION PROCEDURE (mg/L)

ARSENIC (As)	0	SELENIUM (Se)	0
BARIUM (Ba)	0	SILVER (Ag)	0
CADMIUM (Cd)	0	COPPER (Cu)	0
CHROMIUM (Cr)	0	NICKEL (Ni)	0
MERCURY (Hg)	0	ZINC (Zn)	0
LEAD (Pb)	550000	THALLIUM (Tl)	0
CHROMIUM-HEX (Cr+6)	0		0

E OTHER COMPONENTS - TOTAL (PPM)

CYANIDES	0	PCB'S	0
SULFIDES	0	PHENOLICS	0

F SHIPPING INFORMATION

D.O.T. HAZARDOUS MATERIAL? ☒ YES ☐ NO

PROPER SHIPPING NAME: WASTE COMBUSTIBLE LIQUID

HAZARD CLASS: COMBUSTIBLE I.D. NO. UN 1263 R.Q. ✓

METHOD OF SHIPMENT: ☐ BULK LIQUID ☐ BULK SOLID ☐ DRUM (TYPE/SIZE)

ANTICIPATED VOLUME: GALS. CUBIC YARDS OTHER

PER: ☐ ONE TIME ☐ WEEK ☐ MONTH ☐ QUARTER ☐ YEAR ☐

G HAZARDOUS CHARACTERISTICS

REACTIVITY: ☐ NONE ☐ PYROPHORIC ☐ SHOCK SENSITIVE ☐ EXPLOSIVE ☐ WATER REACTIVE ☐ OTHER COMBUSTIBLE

OTHER HAZARDOUS CHARACTERISTICS: ☐ NONE ☐ RADIOACTIVE ☐ ETIOLOGICAL ☐ PESTICIDE MANUFACTURING WASTE ☐ OTHER: HIGH LEAD LEVEL

USEPA HAZARDOUS WASTE? ☒ YES ☐ NO

USEPA HAZARDOUS CODE(S): D-001 D-008

STATE HAZARDOUS WASTE? ☒ YES ☐ NO

STATE CODE(S): WASTE CATEGORY NO. 342

H SPECIAL HANDLING INFORMATION WEAR RUBBER GLOVES — AVOID INHALING FUMES — AVOID CONTACT WITH THE EYES AND SKIN.

☐ ADDITIONAL PAGE(S) ATTACHED

I HEREBY CERTIFY THAT ALL INFORMATION SUBMITTED IN THIS AND ALL ATTACHED DOCUMENTS IS COMPLETE AND ACCURATE, AND THAT ALL KNOWN OR SUSPECTED HAZARDS HAVE BEEN DISCLOSED.

AUTHORIZED SIGNATURE	TITLE	DATE
D. W. Jackson	CHEMIST	6-24-85

HI-SHELL000927

PRTD. (4-83) 5

SHELL OIL COMPANY ☒
SHELL CHEMICAL COMPANY ☐
SHELL DEVELOPMENT COMPANY ☐
HEREIN CALLED "SHELL"

PURCHASE ORDER

PR. INTREV. 10-82 BACK: REV. 10-82

PURCHASE ORDER NO. Show this Number on Invoices, Tags, Boxes, etc.
MOH
054962

BLANKET ORDER NO. (If applicable)	ALTERATION NO.	RELEASE NO.	DATE
			6-26-85

CHEMICAL WASTE MANAGEMENT
KETTLEMAN HILLS DISP. FACILITY
P.O. Box 471
35251-OLD SKYLINE RD
KETTLEMAN CITY Ca 93239
HEREIN CALLED "CONTRACTOR"

SHIP TO
SHELL OIL CO
2720-13TH AVE SW.
SEATTLE, Wa 98134

IMPORTANT: Mail invoice in QUADRUPLICATE with two copies of FREIGHT BILL (when PREPAID and ADDED to INVOICE), ACKNOWLEDGEMENT, SHIPPING NOTICES, and BILLS OF LADING to:

P.O. Box 3947
SEATTLE, Wa 98124

SHIP VIA - FREIGHT:	F.O.B.	TERMS	TAXABLE	NON-TAXABLE
☐ PREPAID ☐ PREPAID/ADD TO INVOICE ☐ COLLECT		NET	X	

1. If delivery is not or cannot be made promptly by _____ Contractor must so notify Shell immediately, and Shell reserves the right to cancel this order in whole or in part. To give such notice, or for any further information, contact _____.
2. If routing is NOT specified, ship by cheapest route; but if that route will not meet required delivery date, contact SHELL for instructions. If products are subject to released value FREIGHT RATES and sold FOB origin with FREIGHT CHARGES for SHELL'S account, ship at the released value which will provide the lowest rate. DO NOT insure shipments unless specifically instructed. NO CHARGES will be allowed for packing or cartage unless specified in QUOTATION.
3. Show cash discount terms on invoice. All invoices for material on which no discount is allowed will be paid 30 days from date invoice is received.

QUANTITY	MATERIAL OR SERVICE	PRICE
	PROVIDE LABOR & MATERIALS TO ANALYZE	
	(1) GAL SAMPLE OF RED LEAD EPON	$157.50
	ESTER PAINT CODE # 920-R-148.	
	RESULTS WILL DETERMINE CORRECT	
	METHOD OF DISPOSAL PER FEDERAL	
	& STATE REQUIREMENTS.	
	Chem-Security Marsha 206/827-0711	
	NWP D88641	

AUTHORIZED SHELL REPRESENTATIVE
R.L. Wraspir

TO BE COMPLETED BY REQUESTING DEPARTMENT

MAKER AND DEPARTMENT	DATE	Tot. Est. Cost	SHOW ANY SUGGESTED VENDORS' NAMES HERE
R.L. Wraspir	6-26-85	200	

DATE REQUIRED	DELIVER TO (NAME AND ROOM)	Own Use	Re-sale	APPROVED BY (REQUISITION AUTHORITY)
ASAP	Supervisor	X		[illegible]

TO BE USED FOR	COMMODITY CODE	ACCOUNTING CODE, W.O., OR A.F.E. (IF APPLICABLE)
LAB TEST FOR PROPER DISPOSAL		[illegible]

HI-SHELL000928