Revised Manifest Summary Report

MACOM
MACOM

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
02/02/1990		88676163		3085.8	LBS		CMP		
02/02/1990		88676164		1834.8	LBS		CMP		
02/02/1990		88676165		1125.9	LBS		CMP		
02/02/1990		88676166		458.7	LBS		CMP		

Total Records: 4 Default Volume: 0 Total Waste Volume: 3.2526

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD 981 363 111 | Manifest Document No.

2. Page 1 of

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

A. State Manifest Document Number: 88676163

3. Generator's Name and Mailing Address
MACOM
4215 SORRENTO VALLEY BLVD.., SAN DIEGO, CA

B. State Generator's ID

4. Generator's Phone (619 457-2340 XXX92121

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001

C. State Transporter's ID: 012955

D. Transporter's Phone: 888-0001

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
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CA 042 245 001

G. State Facility's ID: CAD 042 245 001

H. Facility's Phone: 213 698-0001

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	k. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S UN 1993 (HUMISEAL-EMPTY)	19	DM	195	G	State 214 / EPA/Other D001
b. WASTE FLAMMABLE LIQUID N.O.S UN 1993 (HUMISEAL)	1	DM	55	G	State 214 / EPA/Other D001
c. WASTE FLAMMABLE SOLID N.O.S UN 1993 (HUMISEAL FILTERS)	4	DM	220	G	State 214 / EPA/Other D001
d. ~~WASTE FLAMMABLE LIQUID N.O.S UN 1987 (ALCOHOL)~~		DM			State 212 / EPA/Other F003

J. Additional Descriptions for Materials Listed Above
A- 5 Gal Pails

K. Handling Codes for Wastes Listed Above
a. 01 b. 01 c. 01 d.

15. Special Handling Instructions and Additional Information
PROFILE NUMBERS A-15300, 15294, 10854, 11968, 10849, 10850, 10852

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 government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Danna Bencivenga
Signature: Danna Bencivenga
Month Day Year: 10 21 01 91 10

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 20 01 91 0

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

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: FRANK FORD
Signature: Frank Ford
Month Day Year: 10 21 02 91 0

GENERATOR

TRANSPORTER

FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

000 / 010-3

DHS 8022 A (1/89)
EPA 8700—22
(Rev. 9-89) Previous editions are obsolete.

Do Not Write Below This Line

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

Revised Manifest Summary Report

MACOM SYSTEMS
MACOM

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
06/28/1988		87118884		959.1	LBS		CMP		
10/07/1988		87119232		692.22	LBS		CMP		
01/20/1989		87119655		792.3	LBS		CMP		
01/20/1989		87119656		1501.2	LBS		CMP		
01/20/1989		87119657		22017.6	LBS		CMP		
01/20/1989		87119658		1292.7	LBS		CMP		
01/20/1989		87119659		1251	LBS		CMP		
03/21/1989		88293686		2043.3	LBS		CMP		
03/21/1989		88293687		1834.8	LBS		CMP		
03/21/1989		88293688		850.68	LBS		CMP		
03/21/1989		88293689		8256.6	LBS		CMP		
06/09/1989		88677483		333.6	LBS		CMP		

Total Records: 12 Default Volume: 0 Total Waste Volume: 20.9126

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88) 1/10/89 SHIPPER #20358
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Department of Health Services
Toxic Substances Control Division
Sacramento, California

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD 981 367 790
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
MACOM SYSTEMS
4215 SORRENTO VALLEY BLVD, SAN DIEGO, CA 92121

A. State Manifest Document Number: 87119657
B. State Generator's ID:

4. Generator's Phone: (619) 457-2340

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 904878
D. Transporter's Phone: 213/698-0991

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
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER, CA 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CADD 042245001
H. Facility's Phone: 213/698-0991

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 CORROSIVE LIQUID N.O.S UN 1760 ( ) "RQ" (EMPTY)	01/10	DM	000000	G	State / EPA/Other
b. WASTE FLAMMABLE LIQUID N.O.S UN 1993 (EMPTY) (F002)	01/15	DM	000000	G	State / EPA/Other
c. HAZARDOUS WASTE LIQUID N.O.S ORM-E NA 9189 (empty drums)	0213	DM	000000	G	State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
A) LONCONTERGE (EMPTY)
B) FLUX (EMPTY)
C) HUMISEAL (EMPTY)

K. Handling Codes for Wastes Listed Above
a. 01
b. 01
c. 01
d.

15. Special Handling Instructions and Additional Information

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 government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Hammons
Signature: Bill Hammons
Month Day Year: 01/20/89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 01/20/89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
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: FRANK FORD
Signature: Frank Ford
Month Day Year: 01/20/89

DHS 8022 A (1/87)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

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

INSTRUCTIONS ON THE BACK

0002 10 0094 146

05/30/2001 "ORIGINAL MANIFEST COPY"

Revised Manifest Summary Report

MACOM (BLDG # 14)
MACOM

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
10/07/1988		87119230		917.4	LBS		CMP		

Total Records: 1 Default Volume: 0 Total Waste Volume: .4587

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88) 10/6/88 SHIPPER#18985
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Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD 982657 083
Manifest Document No.

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
MACOM (BLDG #14)
10575 ROSELLE ST., STE,#J, SAN DIEGO, CA 92121

4. Generator's Phone (619/457-2340

A. State Manifest Document Number 87119230

B. State Generator's ID

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001

C. State Transporter's ID 904878

D. Transporter's Phone 213/698-0991

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
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER, CA. 90602
10. US EPA ID Number: CAD 042 245 001

G. State Facility's ID CAD042245001

H. Facility's Phone 213/698-0991

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. HAZARDOUS WASTE LIQUID N.O.S. ORM-E NA 9189 (F002) "RQ" (FLUOROSOLV TF)	002	DM	110 55	G	State 211 / EPA/Other F002
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
a. 01
b.
c.
d.

15. Special Handling Instructions and Additional Information

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 government regulations.

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GENERATOR

Printed/Typed Name: DANNA BENCIVENGA
Signature: Danna Bencivenga
Month Day Year: 1 10 0 7 8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 1 0 0 7 8 8

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
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: FRANK FORD
Signature: Frank Ford
Month Day Year: 1 1 0 0 7 8 8

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802, WITHIN CALIFORNIA CALL 1-800-852-7550

DHS 8022 A (1/87)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

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INSTRUCTIONS ON THE BACK

03/28/2000 "ORIGINAL MANIFEST COPY"

Revised Manifest Summary Report

TITAN CORP
TITAN CORP

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
		87118885		1834.8	LBS		CMP		
		87118887		917.4	LBS		CMP		
		87119233		458.7	LBS		CMP		
		87119234		1834.8	LBS		CMP		
		87119235		1959.9	LBS		CMP		
		88614916		602.24	LBS		CMP		
		88614919		1279.1	LBS		CMP		
		88614921		85.06	LBS		CMP		
		88614924		1229.8	LBS		CMP		
		88614925		73.7	LBS		CMP		
		88676901		200	LBS		CMP		
		88676949		200	LBS		CMP		
		88677111		1109.2	LBS		CMP		
		88677114		298.5	LBS		CMP		
		88677141		3002.4	LBS		CMP		
		88677142		750.6	LBS		CMP		
		88677481		1000.8	LBS		CMP		
		88677484		5087	LBS		CMP		
		88677485		7422.6	LBS		CMP		
		88683549		218	LBS		CMP		
		88683550		685.2	LBS		CMP		

Total Records: 21 Default Volume: 0 Total Waste Volume: 15.1249

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD981368111
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Macom
4215 Sorrento Valley Blvd, San Diego, CA 92121
4. Generator's Phone: 619 457-2340

A. State Manifest Document Number: 88614925
B. State Generator's ID:

5. Transporter 1 Company Name: Omega Recovery SErvices
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 012453
D. Transporter's Phone: 213/698-0991

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
Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: 213/698-0991

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. Hazardous waste Solid NOS ORM-E NA 9189 (Loucoterge Butyl cellosolve)	015	Ct	00030	P	State 351 EPA/Other D003
b. Hazardous waste Solid NOS ORM-E NA9189 (Loucoterge Butyl Cellosolve)	002	DM	00002	G	State 351 EPA/Other D001
c. Flammable waste liquid NOS UN 1993 (Thinner) Flammable liquid	003	Ct.	00003	G	State 213 EPA/Other F005
d. Flammable waste liquid NOS UN 1993 (Rosin flux) Flammable liquid	001	Ct.	00002	P	State 214 EPA/Other F005

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
a. 01 b. 01
c. 01 d. 01

15. Special Handling Instructions and Additional Information
A) Material in 15/5 gallon containers.
C) Material is 1 gallon containers
C) Material is in 1 gallon containers
Profile Nos.

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 government regulations.

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GENERATOR

Printed/Typed Name: DANNA BENCIVENGA
Signature: Danna Bencivenga
Month Day Year: 1/10/2089

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 1/10/2089

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
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: FRANK FUED
Signature: Frank Fued
Month Day Year: 1/19/2089

DHS 8022 A (1/86)
Previous editions are obsolete.

Do Not Write Below This Line

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To: P.O. Box 3000 Sacramento, CA 95812

04/09/2008

IN CASE OF EMERGENCY CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802 WITHIN CALIFORNIA CALL 1-800-852-7550

California—Health and Welfare Agency
Approved OMB No. 2050-0039 (Expires 8-30-91)

See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD 981 363 111
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
MACOM
4215 SORRENTO VALLEY BLVD.., SAN DIEGO, CA
4. Generator's Phone (619 457-2340 XHX92121

A. State Manifest Document Number: 88678186
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 01-[illegible]
D. Transporter's Phone: 888-[illegible]

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
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CA 042 245 001
G. State Facility's ID: CAD 042 245 001
H. Facility's Phone: 213 888-0001

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. WASTE FLAMMABLE LIQUID N.O.S UN 1993 (HUMISEAL-EMPTY)	19	DM	95	G	State: 221 EPA/Other: D001
b. WASTE FLAMMABLE LIQUID N.O.S UN 1993 (HUMISEAL)	1	DM	55	G	State: 221 EPA/Other: D001
c. WASTE FLAMMABLE SOLID N.O.S UN 1993 (HUMISEAL FILTERS)	4	DM	220	G	State: 221 EPA/Other: D001
d. ~~WASTE FLAMMABLE LIQUID N.O.S UN 1987 (ALCOHOL)~~		DM			State: 221 EPA/Other: F003

J. Additional Descriptions for Materials Listed Above
A- 5 Gal Pails

K. Handling Codes for Wastes Listed Above
a. 01 b. 01 c. 01 d.

13. Special Handling Instructions and Additional Information
PROFILE NUMBERS A-15300, 15294, 10854, 11968, 10849, 10850, 10852

15. 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 government regulations.

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Printed/Typed Name: Danna Bencivenga
Signature: Danna Bencivenga
Month Day Year: 10 21 01 91 10

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 20 01 91 0

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

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: FRANK FORD
Signature: Frank Ford
Month Day Year: 10 24 01 91 10

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR — TRANSPORTER — FACILITY

Do Not Write Below This Line

DHS 8022 A (1/88)
Previous editions are obsolete.

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

000/0103