State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

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.: CAD031817984202
Manifest Document No.: 20145

2. Page 1 of 1

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

A. State Manifest Document Number: 90320145

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 WEST OLYMPIC BOULEVARD LOS ANGELES
4. Generator's Phone ( ) (213) 820-4616 CA 90064

B. State Generator's ID

6. Transporter 1 Company Name: A & S METAL RECYCLING, INC.
8. US EPA ID Number: CAD981402407

C. State Transporter's ID: 111411
D. Transporter's Phone: (213) 623-9443

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 EAST WHITTIER BOULEVARD
WHITTIER CAL 90602
10. US EPA ID Number: CAD042245001

G. State Facility's ID: CAD042245001
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. (ETHYLENE GLYCOL MONO BUTYL ETHER) NA 1993	001	DF	000105	G	State 331 / EPA/Other
b. PERFLUOROCOMPOUNDS ~~(liquid~~ C5-C18 (NON-RCRA HAZARDOUS WASTE LIQUID)	006	DM	000310	G	State 211/331 / EPA/Other
c. WASTE ALKALINE LIQUID, N.O.S. POLY[OXYETHYLENE (DIMETHYLIMINO)ETHYLENE-(DIETHYLIMINO)ETHYLENE CHLORIDE CORROSIVE MATERIAL NA 1719	003	DF	000118	G	State 331 / EPA/Other D002
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) ETHYLENE GLYCOL MONO BUTYL ETHER, 30%; MONOETHANOLAMINE 30%; PROPRIETARY INGREDIENT 40% – (2X5GAL)
11b) PERFLUOROCOMPOUNDS 100% – (6X5GAL)
11c) POLY[OXYETHAYLENE (DIMETHYLIMINO) ETHYLENE-(DIMETHYLIMINO) ETHYLENE CHLORIDE – 1.7% – (3X6GAL)

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

15. Special Handling Instructions and Additional Information
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR
EMERGENCY CONTACT #: (213) 623-9443
EMERGENCY RESPONSE GUIDE #: 11a) 27 11c) 60
11a) B 10918
11b) B 10809
11c) B 10801

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.

GENERATOR — Printed/Typed Name: KENNETH VAN SICKLE ON BEHALF OF — Signature: Kenneth Van Sickle — Month Day Year: 03 06 91

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Rudy G. Peña Jr. — Signature: Rudy G. Peña Jr. — Month Day Year: 03 06 91

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: TIM BALTIERRA — Signature: Tim Baltierra — Month Day Year: 03 11 91

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

90320145

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

Do Not Write Below This Line

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

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. C|A|D|0|3|8|1|7|9|8|4|2 — Manifest Document No. 1|1|7|9|0

2. Page 1 of 3

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

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 WEST OLYMPIC BOULEVARD
LOS ANGELES, CALIFORNIA 90064

4. Generator's Phone (213) 820-4616

A. State Manifest Document Number 91059942

B. State Generator's ID

5. Transporter 1 Company Name: A&S METAL RECYCLING, INC.

6. US EPA ID Number: C|A|D|9|8|1|4|0|2|4|0|7

C. State Transporter's ID 012750

D. Transporter's Phone (213) 623-9443

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 EAST WHITTIER BOULEVARD
WHITTIER, CALIFORNIA 90602

10. US EPA ID Number: C|A|D|0|4|2|2|4|5|0|0|1

G. State Facility's ID C|A|D|0|4|2|2|4|5|0|0|1

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 FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN1993	001	DF	00030	G	State 212 / EPA/Other D001
b. WASTE FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN1993	001	DM	00095	G	State 211/212 / EPA/Other D001/F001
c. WASTE ISOPROPYL ALCOHOL, LIQUID. FLAMMABLE LIQUID UN1219	095	DM	00275	G	State 212 / EPA/Other D001
d. WASTE FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN1993	003	DM	00165	G	State 212 / EPA/Other F001/D035

J. Additional Descriptions for Materials Listed Above
11a.) STAT-FREE 1x30GAL B10247
11b.) MIXED ISOPROPYL ALCOHOL/TRICHLOROETHANE 1x5GAL B10248
11c.) ISOPROPYL ALCOHOL 5x55GAL B10249
11d.) LACQUER THINNER 3x55GAL B10251

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

15. Special Handling Instructions and Additional Information
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR.

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: KEN VAN SICKLE — Signature: Ken Van Sickle — Month Day Year 1 1 0 8 9 0

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ruy G. Peña Jr. — Signature: Ruy G. Peña Jr. — Month Day Year 1 1 0 8 9 0

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: JUAN DEL REAL — Signature: Juan del Real — Month Day Year 1 1 1 2 9 0

GENERATOR

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

91059942

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

Do Not Write Below This Line

083 . 065

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

98 B2

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

04/17/84

01947

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

P.O.#20888

Please print or type with ELITE type (12 characters per inch).

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
TELEDYNE PICCO (T110)
16800 CHESTNUT
CITY OF INDUSTRY, CA. 91748

STATE ID NUMBER 83494125

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER CAD075301390

AREA CODE/PHONE NUMBER 818/961-0711 X375 MARY HANNUM

Entered on California List

TRANSPORTER NO 1
OMEGA CHEMICAL CORP
12504 E. WHITTIER BLVD.
WHITTIER, CALIF. 90602

VEH./CONTAINER NO. 00042907
EPA ID NUMBER CAD042245001

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO
EPA ID NUMBER

TREATMENT, STORAGE, DISPOSAL FACILITY
OMEGA CHEMICAL (TSDF)
12504 E. WHITTIER BLVD.
WHITTIER, CALIF. 90602

EPA ID NUMBER CAD042245001

AREA CODE/PHONE NUMBER (213) 698-0991

PROPER U.S. D.O.T SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	CONTAINER TYPE	WASTE CAT NO	DISP METH
WASTE ETHANOL - FLAMMABLE LIQUID	UN1170	11150	G	23	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
Alcohol	99		✓	
Wax	1		✓	

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature SCOTT A. BOREL — MO. 04 DAY 20 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature Henry Solomon — DATE REC'D & ACCEPTED MO. 14 DAY 20 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

STEVE SIMPSON

Printed or typed full name and signature

CAD042245001

DATE RECEIVED & ACCEPTED MO. 05 DAY 01 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87007

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

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. C|A|D|0|3|8|1|7|9|8|4|2 — Manifest Document No. 2|0|0|8|6

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

A. State Manifest Document Number: 90320086

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 W. OLYMPIC BLVD.
LOS ANGELES, CA 90064

4. Generator's Phone ( ) (213) 820-4616

B. State Generator's ID

5. Transporter 1 Company Name: A & S METAL RECYCLING, INC.
6. US EPA ID Number: C|A|D|9|8|1|4|0|2|4|0|7

C. State Transporter's ID: 111411
D. Transporter's Phone: (213) 623-9443

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
12004 WHITTIER BLVD.
WHITTIER, CA 90608

10. US EPA ID Number: C|A|D|0|4|2|2|4|5|0|0|1

G. State Facility's ID: C|4|D|0|4|2|2|4|5|T|0|0|1|1
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 1,1,1-TRICHLOROETHANE ORM-A UN 2831	0012	DM	0011110	G	State 211 EPA/Other F001
b. WASTE ACETONE FLAMMABLE LIQUID UN 1090	001	DM	0010095	G	State 212 EPA/Other D001/U002
c. WASTE FLAMMABLE LIQUID, N.O.S. (TOLUENE, METHYL ETHYL KETONE) UN 1993	0010	DM	0010515	G	State 212 EPA/Other D035/F005
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) SPENT 1,1,1-TRICHLOROETHANE 100% 2X55DM
11b) VIRGIN ACETONE 100% 1X50M
11c) THINNER CONTAINS TOLUENE, METHYL ETHYL KETONE, DISTILLATES.

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

15. Special Handling Instructions and Additional Information
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR
EMERGENCY CONTACT #: 213 623 9443
EMERGENCY RESPONSE GUIDE #: 11a) 74 11b) 26 11c) 27

11A) B-10250
11B) B-10253
11C) B-10251

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: KENNETH VANSICKLE — Signature: Kenneth Van Sickle — Month Day Year: 10 2 05 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HENRY C. SMITH — Signature: Henry C. Smith — Month Day Year: 10 2 05 91

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: Henry R. Solomon — Signature — Month Day Year: 10 2 1 91

Do Not Write Below This Line

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

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

0033 .0047

GENERATOR

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

90320086

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

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. CAD0381798421 — Manifest Document No. 11890

2. Page 1 of 3

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

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 WEST OLYMPIC BOULEVARD
LOS ANGELES, CALIFORNIA 90064

4. Generator's Phone (213) 820-4616

A. State Manifest Document Number: 91059943

B. State Generator's ID:

5. Transporter 1 Company Name: A&S METAL RECYCLING, INC.

6. US EPA ID Number: CAD981402407

C. State Transporter's ID: 012750

D. Transporter's Phone: (213) 623-9443

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 EAST WHITTIER BOULEVARD
WHITTIER, CALIFORNIA 90602

10. US EPA ID Number: CAD042245001

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. State / EPA/Other
a. WASTE ACETONE, LIQUID. FLAMMABLE LIQUID UN1090	001	DM	00005	G	State 212 / EPA/Other D001/U002
~~b. WASTE ACETONE, LIQUID. FLAMMABLE LIQUID UN1090~~					State ~~212~~ / EPA/Other ~~F003/D001~~
c. WASTE COATING SOLUTION, N.O.S. FLAMMABLE LIQUID UN1139	001	DM	00005	G	State 212/213 / EPA/Other D001
d. WASTE COMPOUND CLEANING, LIQUID. CORROSIVE MATERIAL NA1760	001	DM	00055	G	State 122 / EPA/Other D002

J. Additional Descriptions for Materials Listed Above
11a.) ACETONE-VIRGIN 1x5GAL B-10253
~~11b.) WASTE ACETONE SPENT~~
11c.) MOLD RELEASE 225 1x5GAL B10246
11d.) SOIL-SOLV CLEANER 1x55GAL B10245

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

15. Special Handling Instructions and Additional Information
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR.

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: KEN VAN SICKLE — Signature: [signature] — Month Day Year: 11 10 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ruy G. PONA JR. — Signature: [signature] — Month Day Year: 11 10 90

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: JUAN DEL REAL — Signature: [signature] — Month Day Year: 11 11 90

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

91059943

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

Do Not Write Below This Line

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

0027.0080

State of California—Health and Welfare Agency

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. CAD009587700 Manifest Document No. 00061

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

A. State Manifest Document Number: 84559338

B. State Generator's ID: CAD009587700

3. Generator's Name and Mailing Address
TELEDYNE MICROELECTRONICS
12964 PANAMA ST. LOS ANGELES, CA 90066

4. Generator's Phone (213) 822-8229 X 2372

5. Transporter 1 Company Name: VAN WATERS & ROGERS
6. US EPA ID Number: CAD009230244

C. State Transporter's ID: 63201

D. Transporter's Phone: (213) 698-0991

7. Transporter 2 Company Name: OMEGA RECOVERY SERVICES
8. US EPA ID Number: CAD042245001

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: CAD042245001

G. State Facility's ID: CAD042245001

H. Facility's Phone: (213) 698-0991

GENERATOR

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 TRICHLOROTRIFLUOROETHANE LIQUID)	5	DM	260	G	211
b (ORM-E NOS NA 9189)					
c					
d					

J. Additional Descriptions for Materials Listed Above
a) TRICHLOROTRIFLUOROETHANE (96 - 60%)
ALCOHOLS (40 - 4%)

K. Handling Codes for Wastes Listed Above: R01

15. Special Handling Instructions and Additional Information
GLOVES, GOGGLES AND APRONS

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: MARK A. EGBERT
Signature: Mark A. Egbert
Date (Month Day Year): 04 30 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Carlos Flores
Signature: Carlos Flores
Date (Month Day Year): 4 30 86

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: John Halto
Signature: John Halto
Date (Month Day Year): 4 13 0 86

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

DHS 8022 A (7/84)
(EPA 8700-22)

84 80541

"Unless I am a small quantity generator who has been exempted by statute or by regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment."

Generator Signature Mark Smith Date 8/1/96

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

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. CAD038117918412 — Manifest Document No. 206911

2. Page 1 of

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

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 W. OLYMPIC BLVD.
LOS ANGELES, CA 90064

4. Generator's Phone ( ) (213) 820-4616

A. State Manifest Document Number: 90320084

B. State Generator's ID

5. Transporter 1 Company Name: A & S METAL RECYCLING, INC

6. US EPA ID Number: CAD981402407

C. State Transporter's ID: 11411

D. Transporter's Phone: (213) 623-9443

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 WHITTIER BLVD.
WHITTIER, CA 90608

10. US EPA ID Number: CAD024245001

G. State Facility's ID: CAD024245001

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 COMPRESSED GAS, N.O.S (PETROLEUM DISTILLATES, TOLUOL) FLAMMABLE GAS UN 1954	004 ~~003~~	DF	00120 ~~00096~~	G	State 213/331; EPA/Other D001
b. WASTE COMPRESSED GAS, N.O.S (BUTANE, CHLORINATED HYDROCARBONS) NON-FLAMMABLE GAS UN 1956	00B	DF	00065 ~~00035~~	G	State 331/221; EPA/Other
c.					State; EPA/Other
d.					State; EPA/Other

J. Additional Descriptions for Materials Listed Above
11A) AEROSOL FLASH POINT <100°F 4X30DF
11B) AEROSOL FLASH POINT >200°F 1X5DF 2X30DF

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

15. Special Handling Instructions and Additional Information
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR
EMERGENCY CONTACT #: 213 623 9443
EMERGENCY RESPONSE GUIDE #: 11a) 22 11b) 12
11a) 610811
11b) 610810

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: KENNETH VAN SICKLE — Signature: Kenneth Van Sickle — Month Day Year: 10 21 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HENRY C. SMITH — Signature: Hey J Smith — Month Day Year: 10 21 91

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: Henry R. Solomon — Signature — Month Day Year: 10 21 91

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

90320084

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

Do Not Write Below This Line

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

0033 . 0053

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)

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

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.: CAD013818172918412
Manifest Document No.: 2000815

2. Page 1 of 1

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

A. State Manifest Document Number: 90320085

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 W. OLYMPIC BLVD.
LOS ANGELES, CA 90064

4. Generator's Phone ( ) (213) 820-4616

B. State Generator's ID

5. Transporter 1 Company Name: A & S METAL RECYCLING, INC
6. US EPA ID Number: CAD982140207

C. State Transporter's ID: 111411
D. Transporter's Phone: (213) 623-9443

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 WHITTIER BLVD.
WHITTIER, CA 90608

10. US EPA ID Number: CAD042245001

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. WASTE COMPOUND CLEANING LIQUID, N.O.S. CORROSIVE MATERIAL NA1760	010	DF	00050	G	State 141 / EPA/Other
b. WASTE COMPOUND CLEANING LIQUID, N.O.S. CORROSIVE MATERIAL NA1760	015	DF	00025	G	State 141 / EPA/Other
c. WASTE COMPOUND CLEANING LIQUID, N.O.S. (DIETHYLENE GLYCOL ETHER, TRI-BUTOXYETHYL PHOSPHATE) CORROSIVE MATERIAL NA1760	010	DF	00030	G	State 141 / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) VIRGIN - SEE MSDS pH=9 #129-137, 49 10XSDF
11b) VIRGIN - SEE MSDS pH=9 # 115-128, 45 12XSDF 3X15DUEGAL
11c) VIRGIN - SEE MSDS pH=9 # 138-143 5X5DF 1X15DFDUEGAL

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

15. Special Handling Instructions and Additional Information
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR
EMERGENCY CONTACT H: 213 623 9443
EMERGENCY RESPONSE GUIDE H: 11a) 60 11b) 60 11c) 60

11a) b10814
11b) b10813
11c) b10812.

18. **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: KENNETH VANSLUSLE
Signature: Kenneth Van Sluslé
Month Day Year: 10 20 1991

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HENRY L. SMITH
Signature: Hly L Smit
Month Day Year: 10 20 1991

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: Henry R. Solomon
Signature
Month Day Year: 10 21 91

Do Not Write Below This Line

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

90320085

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

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

0010 . 0079

State of California—Health and Welfare Agency
Form Approved OMB No. 2060—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

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. CAD038172984212 — Manifest Document No. 11189 10

2. Page 1 of 3

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

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 WEST OLYMPIC BOULEVARD
LOS ANGELES, CALIFORNIA 90064

4. Generator's Phone (213) 820-4616

A. State Manifest Document Number: 91059944

B. State Generator's ID

5. Transporter 1 Company Name: A&S METAL RECYCLING, INC.

6. US EPA ID Number: CAD981402407

C. State Transporter's ID: 012745D

D. Transporter's Phone: (213) 623-9443

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 EAST WHITTIER BOULEVARD
WHITTIER, CALIFORNIA 90602

10. US EPA ID Number: CAD042245001

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. WASTE 1,1,1-TRICHLOROETHANE, LIQUID. ORM-A UN2831	007	DM	00385	G	State 211 / EPA/Other F001
b. WASTE DICHLOROMETHANE, LIQUID. ORM-A UN1593	003	DM	00165	G	State 211 / EPA/Other F001
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11a.) 1,1,1-TRICHLOROETHANE 9X55GAL B 10250
11b.) METHYLENE CHLORIDE 3X55GAL B 10252

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

15. Special Handling Instructions and Additional Information
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR.

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: KEN VAN SICKLE — Signature: [signature] — Month Day Year: 11 10 8 9 0

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ruy G. Peña Jr. — Signature: [signature] — Month Day Year: 11 10 8 9 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: JUAN DEL REAL — Signature: [signature] — Month Day Year: 11 11 12 9 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

91059944

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

Do Not Write Below This Line

0089 . 0018

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

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. CAD038179842 Manifest Document No. 20144

2. Page 1 of 1

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

A. State Manifest Document Number 90320144

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 WEST OLYMPIC BOULEVARD LOS ANGELES
CA 90064

4. Generator's Phone ( ) (213) 820-4616

B. State Generator's ID

5. Transporter 1 Company Name
A & S METAL RECYCLING, INC.

6. US EPA ID Number CAD981402407

C. State Transporter's ID 111411

D. Transporter's Phone (213) 623-9443

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 EAST WHITTIER BOULEVARD
WHITTIER CAL 90602

10. US EPA ID Number CAD042245001

G. State Facility's ID CAD042245001

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 FLAMMABLE LIQUID, N.O.S. (TOLUENE, METHYL ETHYL KETONE), UN 1993	019	DM	000155	G	State 212 EPA/Other D001/D035*
b. WASTE ISOPROPYL ALCOHOL, LIQUID. FLAMMABLE LIQUID UN 1219	001	DM	000155	G	State 212 EPA/Other D001
c. WASTE 1,1,1 TRICHLOROETHANE, LIQUID. ORM-A UN 2831	001	DM	000155	G	State 211 EPA/Other F001
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) ~~LA~~ TOLUENE, METHYL ETHYL KETONE, BUTYL ALCOHOL, PETROLEUM DISTILLATES. (1X55 GAL)
11b) ISOPROPYL ALCOHOL (1X55 GAL)
11c) SPENT 1,1,1 TRICHLOROETHANE (1X55 GAL)

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

15. Special Handling Instructions and Additional Information *11a) ADDITIONAL EPA CODE: F005
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR
EMERGENCY CONTACT #: (213)623-9443
EMERGENCY RESPONSE GUIDE #: 11a) 27 11b) 26 11c) 74

11a) B10251
11b) B10249
11c) B10250

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: KENNETH G VAN SICKLE ON BEHALF OF — Signature: Kenneth G Van Sickle — Month Day Year: 10 30 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ruy G. Peña Jr. — Signature: Ruy G. Peña Jr. — Month Day Year: 10 30 91

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: TIM BALTIERRA — Signature: Tim Baltierra — Month Day Year: 10 31 91

Do Not Write Below This Line

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

90320144

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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. CAD038179842 Manifest Document No. 30990

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
TELEDYNE CONTROLS
12333 WEST OLYMPIC BOULEVARD, LOS ANGELES, CALIFORNIA 90064

4. Generator's Phone (213) 820-4616

A. State Manifest Document Number 88375298

B. State Generator's ID HHA3602409.4

5. Transporter 1 Company Name a/s METAL RECYCLING, INC.

6. US EPA ID Number CAD981402407

C. State Transporter's ID 027450

D. Transporter's Phone (213) 623-9443

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 EAST WHITTIER BOULEVARD
WHITTIER, CALIFORNIA 90602

10. US EPA ID Number CAD042245001

G. State Facility's ID CAD042245001

H. Facility's Phone 695-0991 213-

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 METHYLENE CHLORIDE, LIQUID, N.O.S. ORM-A UN1593	002	DM	00100	G	State 211 / EPA/Other F002/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. b. c. d.

15. Special Handling Instructions and Additional Information
APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR

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: K.B. VAN SICKLE
Signature: Kenneth B. Van Sickle
Month Day Year: 03 13 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE SCHWARTZ
Signature: Mike Schwartz
Month Day Year: 03 13 90

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: K.B. VAN SICKLE
Signature: Kenneth B. Van
Month Day Year

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

88375298

GENERATOR

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Blue: GENERATOR SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 400, Sacramento, CA 95812-0400