SDMS DOCID# 1118231

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

Raw Material

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

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

STATE ID NUMBER 83445352

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
Barnes-Hind/Hydrocurve Inc.
8006 Engineer Rd
San Diego, Ca 92111
AREA CODE/PHONE NUMBER (609) 277-9873

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD008232118 100007

TRANSPORTER NO 1
IT Transportation corp
221 East D street
Wilmington, Ca 90744
Dot-E 7476

VEH./CONTAINER NO: 142687
EPA ID NUMBER: CAD029654894

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO
EPA ID NUMBER: ~~CAD~~

TREATMENT STORAGE OR DISPOSAL (TSD) FACILITY
Omega Chemical
12504 E. Whittier Blvd.
Whittier Ca
AREA CODE/PHONE NUMBER (213) 698-0921

EPA ID NUMBER: CAD042245011

PROPER U S DOT SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO	CONTAINER TYPE	WASTE CAT NO	DISP METH
Hazardous Substance Liquid NOS ORM-E	9188	2000	G	001	CT	2111	

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
1.1 Trichlorotrifluoroethane	30	20	✓	
1.2 Trichlorofluoromethane	40	30	✓	
1.3 Coumarone Indene Resin	30	20	✓	

SPECIAL HANDLING INSTRUCTIONS
yield 1026 GALS 1,000 SA IN MORK 13 DRUMS OF R-11/R-113
WASTE 1162 GALS 9 DRUMS OF WATER

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

Kenn S. Garrett
Printed or typed full name and signature Kenn S. Garrett

MO 05 DAY 01 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
DARRIELL SLATE DRIVER Darrell Slate 190 167V
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO 05 DAY 01 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.

EPA ID NUMBER CAD042245011

DATE RECEIVED & ACCEPTED MO 05 DAY 01 YR 84

Printed or typed full name and signature John Halte

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

06/01/2001 "ORIGINAL MANIFEST COPY"

Item 1-20

State of California—Health and Welfare Agency
Form Approved OMB No. 2060—0039 (Expires 9-30-88)
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. CIA|0|0|0|8|2|3|2|1|1|7 Manifest Document No. 8|9|0|0|1

2. Page 1 of

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

3. Generator's Name and Mailing Address
Sola/Barnes-Hind
8006 Engineer Road
San Diego, CA 92111

4. Generator's Phone (619) 277-9873

A. State Manifest Document Number 87442574

B. State Generator's ID H|A|W|B|3|6|0|0|9|1|3|7

5. Transporter 1 Company Name: Omega Recovery Services

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

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

G. State Facility's ID C|A|D|0|4|2|2|4|5|9|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 Liquid NOS, ORM-E, NA9189	0101	DM	00101 50	G	State 211 / EPA/Other F002
b. Waste Flammable Liquid NOS, Flammable Liquid, UN1993	0101	2DM	00111 10	G	State 214 / EPA/Other F003
c.					State / EPA/Other
d.					State / EPA/Other

OFFICIAL MANIFEST RECORD COPY

J. Additional Descriptions for Materials Listed Above
SEE ATTACHED LIST

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

15. Special Handling Instructions and Additional Information
Store in cool area. Open drum with caution due to pressure building. Avoid breathing vapors. Eye protection, g-oves and apron should be worn while handling. If undeliverable to Omega, return to Sola/Barnes-Hind.

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: Chet Vasey — Signature: Chet Vasey — Month Day Year 10|2|1|9|8|9

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature: Javier Hernandez — Month Day Year 10|2|1|9|8|9

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 1|0|2|1|8|9

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

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

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

INSTRUCTIONS ON THE BACK

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

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

88615548

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAL 000 035 783
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
SOLA BARNES-HIND
8006 ENGINEER RD..,SAN DIEGO, CA 92111

4. Generator's Phone (619 277-9873

A. State Manifest Document Number 88615548
B. State Generator's ID HAH036-009187
C. State Transporter's ID 110236
D. Transporter's Phone 213 698-0991
E. State Transporter's ID
F. Transporter's Phone

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
7. Transporter 2 Company Name
8. US EPA ID Number

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. WASTE FLAMMABLE LIQUID, N.O.S UN 1993 (ACETONE 50%,ALCOHOL 30%, TOLUENE 20%)	0101	DM	010050	G	State 212 / EPA/Other F003
b. WASTE 1,1,1 TRICHLOROETHANE, ORM-A UN 2831	0103	DM	0101610	G	State 211 / EPA/Other F002
c. HAZARDOUS WASTE LIQUID, N.O.S ORM-E NA 9189 (FREON TF)	001	DM	010050	G	State 211 / EPA/Other F001
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information
PROFILE NUMBERS B10083,B10082,B10084

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: RANDY J EVANS — Signature — Month Day Year 1/01/1990

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature — Month Day Year 1/01/1990

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: N. JAY SOLOMON. — Signature — Month Day Year 1/01/1990.

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

0034.0090

06/12/2001 "ORIGINAL MANIFEST COPY"