SDMS DOCID# 1118282

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

UNIFORM HAZARDOUS WASTE MANIFEST
June 2, 1983

Department of Health Services
Shipper
11453

STATE ID NUMBER 83029896

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

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
F.M. THOMAS
231 Gimini Ave.
Brea, CA 92621
AREA CODE/PHONE NUMBER 696-9711

30

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

TRANSPORTER NO. 1
F. M. Thomas Co.

VEH./CONTAINER NO.

EPA ID NUMBER

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
12504 E. Whittier Blvd.
Whittier CA 90602
AREA CODE/PHONE NUMBER 213/698-0991

EPA ID NUMBER
CAD042245001

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.
Non-Flammable Refrigerant Gas, N.O.S. - Gas (R-11)	UN1078	100 00	P	05	DM	211	01

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM

SPECIAL HANDLING INSTRUCTIONS
yield 448 lbs.

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.

X Printed or typed full name and signature

MO. 6 DAY 17 YR. 83

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

X Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 6 DAY 17 YR. 83

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.

Omega Chemical

Tim Ratigerra
Printed or typed full name and signature

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO. 06 DAY 17 YR. 83

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

141

03/29/2000 "ORIGINAL MANIFEST COPY"

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

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

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

STATE ID NUMBER 83410804

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
F. M. THOMAS A/C
231 GEMINI AV BREA

AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAT000038034

TRANSPORTER NO 1
F.M. THOMAS A/C
231 GEMINI AV BREA

VEH/CONTAINER NO

EPA ID NUMBER
CAT000038034

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
Omega Chemical Corp.
12504 E. Whittier Blvd.
Whittier CA. 90608

AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAD042245001

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
Hazardous Waste liquid N.O.S. (R-11)	NA9189	500	P	003	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
Trichlorotrifluoromethane	99	90		
Oil	10	1		
Water				

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

X Printed or typed full name and signature Brian Pace BRIAN PACE MO 11 DAY 02 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

X Printed or typed full name and signature Brian Pace BRIAN PACE DATE REC'D & ACCEPTED MO 11 DAY 02 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

Henry Solomon
Printed or typed full name and signature

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO 11 DAY 02 YR 84

FORM NO DHS 8022A 11 82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

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

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

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

STATE ID NUMBER 83410846

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
F.M. THOMAS AIRCONDITIONING
231 Gemini Ave.
Brea, Ca.
AREA CODE/PHONE NUMBER 818/448-1902

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAT000038034

TRANSPORTER NO. 1
F.M. Thomas Airconditioning

VEH. CONTAINER NO.
EPA ID NUMBER
CAT000038034

TRANSPORTER NO. 2 ALTERNATE TSD FACILITY

VEH. CONTAINER NO.
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
Omega Chemical Corp.
12504 E. Whittier Blvd.
Whittier, CA. 90602
AREA CODE/PHONE NUMBER 213/698-0991

EPA ID NUMBER
CAD042245001

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
Hazardous Waste Liquid N.O.S ORM-E R-11	N A 9189	800	P	04	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

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

X Printed or typed full name and signature BRIAN PACE Brian Pace — MO 12 DAY 17 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

X Printed or typed full name and signature BRIAN PACE Brian Pace — DATE REC'D & ACCEPTED MO 12 DAY 17 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
Brought in 3 200 lbs drums
600 lbs TOTAL

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. OMEGA CHEMICAL

TIM BALTIERRA Tim Baltierra

Printed or typed full name and signature

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO 12 DAY 14 YR 84

FORM NO. DHS-8022A 11/82

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03/29/2000 "ORIGINAL MANIFEST COPY"

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

06/04/84

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

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

STATE ID NUMBER 83493959

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
F.M. THOMAS AIR CONDITIONING
2311 GIMINI AVE.
BREA, CA. 92621
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAX000038034

TRANSPORTER NO. 1
F.M. THOMAS AIR CONDITIONING

VEH./CONTAINER NO.
EPA ID NUMBER
CAX000038034

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO.
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
12504 E. WHITTIER BLVD.
WHITTIER, CA. 90602
AREA CODE/PHONE NUMBER 213/698-0991

EPA ID NUMBER
CAD042245001

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
HAZARDOUS WASTE, LIQUID N.O.S - ORM-E (R-11)	NA9189	300	P	3	DM	21101	

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM

Hazardous Waste Management Branch
AUG 8 1984
California Department of Health Services
SACRAMENTO

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

THOMAS MICHAEL FEYKA Thomas M. Feyka
Printed or typed full name and signature

MO. 6 DAY 4 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
Armando Delgado
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO 6 DAY 4 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.
Jay Solomon.
Jay Solomon
Printed or typed full name and signature

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO. 06 DAY 04 YR 84

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

te of California—Health and Welfare Agency
ZARDOUS WASTE MANAGEMENT BRANCH
4-744 P Street
cramento, CA 95814

Call customer after yields been taken

UNIFORM HAZARDOUS WASTE MANIFEST

MAY 30, 1984

Department of Health Services

P.O.# 21567
Shipper 12564

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

STATE ID NUMBER 33493993

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
F.M. THOMAS CO.
231 Gemini Ave.
Brea, CA 92621
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAX000038034

TRANSPORTER NO. 1
F.M. THOMAS COMPANY

VEH./CONTAINER NO.

EPA ID NUMBER
CAX000038034

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
12504 E. Whittier Blvd.
Whittier CA 90602
AREA CODE/PHONE NUMBER 213/698-0991

EPA ID NUMBER
CAD042245001

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
Hazardous waste, Liquid NOS-ORM-E (R-11)	NA 9189	700	P	64	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

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

+ Thomas P. Keeley
H. P. Keeley
Printed or typed full name and signature

MO 05 DAY 30 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
+ Thomas P. Keeley
H. P. Keeley
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO 05 DAY 30 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.

Omega Chemical
Tim Balterra
Printed or typed full name and signature

EPA ID NUMBER
CAD042245001

DATE RECEIVED & ACCEPTED MO 05 DAY 30 YR 84

NO DHS-8022A 11/82

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83-87967

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

P.O.#20829

04/09/84

UNIFORM HAZARDOUS WASTE MANIFEST

04-9-84
Department of Health Services

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

STATE ID NUMBER 83494088

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
F.M. THOMAS
231 GIMINI AVE.
BREA, CA. 92621
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAX000038034

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

VEH/CONTAINER NO: 00042507
EPA ID NUMBER: CAD042245001

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO

EPA ID NUMBER

TREATMENT STORAGE OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
AREA CODE/PHONE NUMBER

EPA ID NUMBER: CAD042245001

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
HAZARDOUS WASTE, LIQUID N.O.S (R-11)	NA9189	600	P	03	DM	211	-1

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

Hazardous Waste Management Branch
MAY 08 1984
California Department of Health Services
SACRAMENTO

SPECIAL HANDLING INSTRUCTIONS
yield 660 lbs.

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

04-09-84

X ARMANDO GUIZADO Armando Guizado
Printed or typed full name and signature

MO DAY YR

☐ Check if continuation sheet is used Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
X ARMANDO GUIZADO Armando Guizado
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO DAY YR

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. Omega Chemical
Tim BAGIERRA L. Batterra
Printed or typed full name and signature

EPA ID NUMBER: CAD042245001

DATE RECEIVED & ACCEPTED: MO. 04 DAY 09 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

17.90

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

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

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

STATE ID NUMBER 83564185

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
F.M. THOMAS AIR CONDITIONING
2311 GIMINI AVE.
BREA, CA. 92621
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAX000038034

TRANSPORTER NO. 1
F.M. THOMAS AIR CONDITIONING
VEH. CONTAINER NO.
EPA ID NUMBER
CAX000038034

TRANSPORTER NO. 2 ALTERNATE TSD FACILITY
VEH. CONTAINER NO.
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
12504 E. WHITTIER BLVD.
WHITTIER, CA. 90602
AREA CODE/PHONE NUMBER 213/698-0991
EPA ID NUMBER
CAD042245001

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
HAZARDOUS WASTE, LIQUID N.O.S - ORM-E (R-11)	NA9189	550	P	3	DM	211	01

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM

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 BRIAN E PACE — MO 10 DAY 09 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 BRIAN E PACE
DATE REC'D & ACCEPTED MO 10 DAY 09 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.

Printed or typed full name and signature TIM BATTERS
EPA ID NUMBER CAD042245001
DATE RECEIVED & ACCEPTED MO 10 DAY 09 YR 84

FORM NO. DHS 8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Ref: Shipper#13651 (P.O.#23862)

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAT000038024

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
F.M. THOMAS AIR CONDITIONING
231 Gemini Blvd., Brea, Ca. 92621

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 84341517

B. State Generator's ID: CAT000038024

5. Transporter 1 Company Name: F.M. THOMAS AIR CONDITIONING

6. US EPA ID Number: CAT000038024

C. State Transporter's ID

D. Transporter's Phone: 714/738-1062

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 CHEMICAL CORP.
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. Hazardous Waste, Liquid N.O.S / NA 9189 (R-11) ORM-E	03	DM	600	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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 governmental regulations.

Printed/Typed Name: X RONNIE E. BOYETT — Signature: Ronnie E. Boyett — Date: Month 04 Day 16 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: X RONNIE E. BOYETT — Signature: Ronnie E. Boyett — Date: Month 04 Day 16 Year 85

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: TIM BALTIERRA — Signature: T. Baltierra — Date: Month 04 Day 16 Year 85

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

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

84 89541

State of California—Health and Welfare Agency

P.O# 24523 / Job# 30812-6547 / call w/yield (asap)

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.: CAT000038024
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
F.M. THOMAS
231 Gemini Ave., Brea, Ca. 92621

4. Generator's Phone (714) 738-1062 TOM

A. State Manifest Document Number: 84341549
B. State Generator's ID: CAT000038024

5. Transporter 1 Company Name: F.M. THOMAS
6. US EPA ID Number: CAT000038024
C. State Transporter's ID:
D. Transporter's Phone: 714/738-1062

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 CHEMICAL CORP.
12504 E. Whittier Blvd.
Whittier, Ca. 90602

10. US EPA ID Number: CAD042245001 XXXXXXXXXXXX
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. HAZARDOUS WASTE LIQUID N.O.S, ORM-E NA 9189 ~~(R-11)~~	2	DM	300	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
a) R01

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 governmental regulations.

Printed/Typed Name: RONNIE E. BOYETT
Signature: Ronnie E. Boyett
Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONNIE E. BOYETT
Signature: Ronnie E. Boyett
Date: Month Day Year

18. Transporter 2 Acknowledgement or 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: David E. Hart
Signature: David E. Hart
Date: Month Day Year: 6 25 85

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 08841

State of California—Health and Welfare Agency
P.O.#23866

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. CAT000038024 — 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
F.M. THOMAS AIR CONDITIONING
231 Gemini Ave., Brea, Ca. 92621 Bruce

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 84341607

B. State Generator's ID: CAT000038024

5. Transporter 1 Company Name: F.M. THOMAS AIR CONDITIONING

6. US EPA ID Number: CAT000038024

C. State Transporter's ID

D. Transporter's Phone: 714/738-1062

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 CHEMICAL CORP.
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. HAZARDOUS WASTE, LIQUID N.O.S / ORM-E (R-113) NA 9189		DM	300	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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 governmental regulations.

Printed/Typed Name: Hugh L. Castro — Signature: Hugh L. Castro — Date (Month Day Year): 09 24 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hugh L. Castro — Signature: Hugh L. Castro — Date (Month Day Year): 09 24 85

18. Transporter 2 Acknowledgement or 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: TIM BALTERRA — Signature: TIM Balterra — Date (Month Day Year): 09 24 85

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 89641

State of California—Health and Welfare Agency

4-24-85

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAT 000 038 024

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
F.M. THOMAS
@#L Gemini Blvd., Brea, CA 92621

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number 84341608

B. State Generator's ID CAT 000 038024

5. Transporter 1 Company Name
F.M. THOMAS

6. US EPA ID Number

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
OMEGA CHEMICAL CORP.
12504 E. Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number CAD 042 245 001

G. State Facility's ID CAD 042 245 001

H. Facility's Phone 213/ 696-0991

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. HAZARDOUS WASTE, LIQUID N.O.S. ORM-E NA9189 (R-11)	005	DM	00500	P	
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed/Typed Name: RONNIE E. BOYETT
Signature: Ronnie E. Boyett
Date (Month Day Year): 04 24 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONNIE E. BOYETT
Signature: Ronnie E. Boyett
Date (Month Day Year): 04 24 85

18. Transporter 2 Acknowledgement or 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: TIM BALTIERRA
Signature: Tim Balteerra
Date (Month Day Year): 04 24 85

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

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(EPA 8700-22)

84 89541

State of California—Health and Welfare Agency

July 24, 1985

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAT 000 038 024 | 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
F. M. Thomas Co.
Brea, CA

4. Generator's Phone ( )

A. State Manifest Document Number: 84341728

B. State Generator's ID:

5. Transporter 1 Company Name: F. M. Thomas Co.

6. US EPA ID Number: CAT 000 038024

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
Omega Chemical Corp.
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. Hazardous waste, Liquid N.O.S. NA 9189 (R-11)	2	DM	400	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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 governmental regulations.

Printed/Typed Name | Signature | Date Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: x ARMANDO | Signature: x [signature] | Date Month Day Year: 7 24 85

18. Transporter 2 Acknowledgement or 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: N. JAY Solomon | Signature: N. Jay Solomon | Date Month Day Year: 7 24 85

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

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84 89541

Shipper 14826

S... ...lifornia—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Sept. 6, 1985

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAT000038024
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
F.M. THOMAS
231 G... Blvd Ca

4. Generator's Phone ( )

A. State Manifest Document Number: 84341841
B. State Generator's ID: CAT000038024

5. Transporter 1 Company Name: F. M. THOMAS
6. US EPA ID Number: CAT000038024
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
Omega Chemical Clrop.
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

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 (R-11)	2	DM	2 50 lb	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: K01

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 governmental regulations.

Printed/Typed Name: Steve Zamora
Signature: Steve Zamora
Date: Month 9 Day 6 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Steve Zamora
Signature: Steve Zamora
Date: Month 9 Day 6 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name:
Signature:
Date: 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: J. Brent Oliver
Signature: J. Brent Oliver
Date: Month 09 Day 06 Year 85

Blue: GENERATOR SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 400, Sacramento, CA 95802

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

84 89541

State of California—Health and Welfare Agency

Sept. 13, 1985

Shipper 14858

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAT000038024
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
F. M. Thomas
231 Gemini Ave., Brea, CA

A. State Manifest Document Number: 84341848

4. Generator's Phone (714) 738-1062

B. State Generator's ID: CAT000038024

5. Transporter 1 Company Name: F. M. Thomas
6. US EPA ID Number: CAT000038024

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
Omega Chemical Corp.
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

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 (R-11) NA 9189	4	DM	600	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

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 governmental regulations.

Printed/Typed Name	Signature	Date Month Day Year
Mike Raleigh	[signature]	9 13 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
Mike Raleigh	[signature]	9 13 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date 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	Signature	Date Month Day Year
[signature]	[signature]	9 13 85

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State of California—Health and Welfare Agency 8/30/85 C. (2nd Manifest)

Department of Health Services
~~Toxic Substances Control Division~~
Sacramento, California

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supercedes 84341813

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAX000038034 — 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
F. H. THOMAS AIR CONDITIONING
231 Gemini Ave., Brea, CA 92621

4. Generator's Phone (813) 448-1902

A. State Manifest Document Number 84341853

B. State Generator's ID CAX000038034

5. Transporter 1 Company Name: F. H. THOMAS AIR CONDITIONING
6. US EPA ID Number: CAX 000038034

C. State Transporter's ID

D. Transporter's Phone 813/448-1902

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 Chemical Corp.
12504 E. Whittier Blvd.
Whittier, CA 90602
10. US EPA ID Number: CAD042245001

G. State Facility's ID CAD 042245001

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. Hazardous Waste, Liquid N.O.S. ORM-E NA9189 (R-11)		DM	600	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

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 governmental regulations.

Printed/Typed Name: TOM FEYKA — Signature — Date: Month 8 Day 30 Year 85

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: TOM FEYKA — Signature — Date: Month 8 Day 30 Year 85

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: STEVEN SIMPSON — Signature — Date: Month 8 Day 30 Year 85

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

DHS 8-22 A (7/84)
(EPA 8700-22)

84 89541

September 27, 1985

P.O.#25341
Shipper 14524

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAT000038024 — 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
F. M. Thomas
231 Gemini, Brea, Calif.
4. Generator's Phone (714) 738-1062

A. State Manifest Document Number 84341875
B. State Generator's ID

5. Transporter 1 Company Name: F. M. Thomas
6. US EPA ID Number: CAT000038024
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
Omega Chemical Corp.
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

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 NA9189 (R-11)	3	DM	500lbs	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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 governmental regulations.

Printed/Typed Name: Ronnie Bovett — Signature: Ronnie Bovett — Date: Month 09 Day 30 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ronnie Bovett — Signature: [illegible] — Date: Month 9 Day 30 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: 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: David D'Hooge — Signature: David D'Hooge — Date: Month 9 Day 30 Year 85

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

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84 80541

State of California—Health and Welfare Agency March 26, 1986

Armando

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAT000038034 | 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
F.M. THOMAS Co.
231 Gemini, Brea CA

A. State Manifest Document Number 843452 78

4. Generator's Phone (714) 738-1062

B. State Generator's ID CAT000038034

5. Transporter 1 Company Name F. M. THOMAS | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone 714/738-1062

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 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. Hazardous waste, Liquid N.O.S. ORM-E NA 9189 (R-11)	3		400	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed/Typed Name: ARMANDO GUIZADO | Signature | Date Month Day Year 3 26 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ARMANDO GUIZADO | Signature | Date Month Day Year 3 26 86

18. Transporter 2 Acknowledgement or 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: Henry R. Solomon | Signature | Date Month Day Year 03 26 1986

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 60541

Unless I am a small 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:

Authorized Signature:

F. M. Thomas Co.

84345278

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAX000038034

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
F.M. THOMAS
231 Gemini, Brea, Ca

A. State Manifest Document Number 84345333

B. State Generator's ID CAX000038034

4. Generator's Phone (714) 738-1062

5. Transporter 1 Company Name F.M. THOMAS

6. US EPA ID Number CAX000038034

C. State Transporter's ID

D. Transporter's Phone 714738-1062

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 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. HAZARDOUS WASTE LIQUID N.O.S ORM-E NA 9189 (R211)	3	DM	500	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
X MIKE RALEIGH	Mike Raleigh	04 17 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
X MIKE RALEIGH	Mike Raleigh	04 17 86

18. Transporter 2 Acknowledgement or 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)
N. JAY Solomon	N. Jay Solomon	04 17 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 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:

Authorized Signature:

Date:

F. M. Thomas
84345333

HOLD YIELD FOR CUSTOMER CREDIT

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAX000038034 — 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
F.M. THOMAS AIR CONDITIONING
231 Gemini Blvd., Brea, Ca. 92621
ARMANDO

A. State Manifest Document Number 84345351

B. State Generator's ID 2

4. Generator's Phone ( )

5. Transporter 1 Company Name
F.M. THOMAS AIR CONDITIONING

6. US EPA ID Number CAX000038034

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID 714/738-1062

F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
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. HAZARDOUS WASTE LIQUID N.O.S, ORM-E (R-113) NA 9189	05	DM	800	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed/Typed Name: X RONNIE E. BOYETT — Signature: Ronnie E. Boyett — Date: Month 04 Day 24 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: X RONNIE E. BOYETT — Signature: Ronnie E. Boyett — Date: Month 04 Day 24 Year 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: TIM BATTIELLA — Signature: Tim Battiella — Date: Month 04 Day 24 Year 86

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(EPA 8700-22)

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

84 80641

Unless I am a small 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:

Authorized Signature:

Date

F.M. Thomas Air Conditioning
84345351

reprocessed back to customer

State of California—Health and Welfare Agency

P.O. # 24234 2/13/86

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. CAX 000038034 | 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
F.M. THOMAS AIRCONDITIONING
231 Gemini, Brea, Ca. 92621

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number 84720082

B. State Generator's ID CAX000038034

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD042245001

C. State Transporter's ID

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: 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	Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S , NA9189 ORM-E		DM	300	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed/Typed Name	Signature	Date Month Day Year
ARMANDO GUIZADO	Armando Guizado	2 13 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
ARMANDO GUIZADO	Armando Guizado	2 13 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date 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	Signature	Date Month Day Year
David O'Hara	David O'Hara	2 13 86

84720082

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

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

84 89641

February 18, 1986

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAT000038034 | 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
F.M. THOMAS AIR CONDITIONING CO. (Tom Feyka)
231 Gemini, Brea, CA

4. Generator's Phone ( )

5. Transporter 1 Company Name
F. M. THOMAS

6. US EPA ID Number
CAT000038034

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
CAD042245001

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
a. Hazardous waste, Liquid N.O.S. ORM-E NA 9189 (R-113)	002	DM		P
b.				
c.				
d.				

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed/Typed Name: HERNANDO GUZADO | Signature | Date (Month Day Year): 2/1/86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: HERNANDO GUZADO | Signature | Date (Month Day Year): 2/1/86

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 Hacta | Signature | Date (Month Day Year): 2/1/86

84720095

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

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84 89641

05 631 63001 "ORIGINAL MANIFEST COPY"

State of California -- Health and Welfare Agency

C

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAX000038034 | 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
F.M. THOMAS AIRCONDITIONING SERVICE Armando
231 Gemini Ave., Brea, Ca. 92621
4. Generator's Phone (714) 738-1062

5. Transporter 1 Company Name: F.M. THOMAS AIRCONDITIONING
6. US EPA ID Number: CAX000038034

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: CAD042245001

11. US DOT Description (*Including Proper Shipping Name, Hazard Class, and ID Number*)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S , [redacted] ORM-E (R-113) NA9189	02	DM		P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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 governmental regulations.

Printed/Typed Name: MIKE KALEIGH | Signature | Date: Month Day Year 2 11 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIKE KALEIGH | Signature | Date: Month Day Year 2 11 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: 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: John HALTE | Signature | Date: Month Day Year 2 11 86

GENERATOR

TRANSPORTER

FACILITY

84720116

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

84 89641

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Called in by Mike

5/7/86

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAT 0000 38034 — 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
F. M. Thomas
231 Gemini, Brea, CA

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 86534407

B. State Generator's ID: CAT000038034

5. Transporter 1 Company Name: F. M. Thomas

6. US EPA ID Number: CAX 0000 38034

C. State Transporter's ID:

D. Transporter's Phone: 714/738-1062

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 (R-11) NA 9189	003	DM		P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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.

Unless I am a small quantity generator who has been exempted by statute or 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.

Printed/Typed Name: X Mike Raleigh — Signature: [signature] — Month Day Year: 5 7 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: X Mike Raleigh — Signature: [signature] — Month Day Year: 5 7 86

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space
RECEIVED 570 lbs.

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 Halte — Signature: [signature] — Month Day Year: 5 7 86

86534407

DHS 8022 A (11/85)
(EPA 8700—22)

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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. CAX000038034 — 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
F.M. THOMAS CO.
231 Gemini Ave., Brea, Ca. 92621

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 86534518

B. State Generator's ID: CAX000038034

5. Transporter 1 Company Name: F.M. THOMAS CO.

6. US EPA ID Number: CAX000038034

C. State Transporter's ID

D. Transporter's Phone: 714/738-1062

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: 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. HAZARDOUS WASTE LIQUID N.O.S , NA 9189 ORM-E (R-11)	03	DM		P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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.

Unless I am a small quantity generator who has been exempted by statute or 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.

Printed/Typed Name: Don Miller — Signature: Don Miller — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Don Miller — Signature: Don Miller — Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
RECEIVED 534 lbs.

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

Printed/Typed Name: JAVIER HERNANDEZ — Signature: Javier Hernandez — Month Day Year: 7 2 2 86

GENERATOR — TRANSPORTER — FACILITY

86534518

DHS 8022 A (11/85)
(EPA 8700—22)

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

Reclaim back to customer

State of California—Health and Welfare Agency

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8/4/86

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAXO100031804 — 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
F. M. Thomas
231 Gemini, Brea, California

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 86534546

B. State Generator's ID

5. Transporter 1 Company Name: F. M. Thomas

6. US EPA ID Number: CAXO100031804

C. State Transporter's ID

D. Transporter's Phone: 714/738-1062

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: 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. Hazardous Waste, Liquid N.O.S. ORM-E NA 9189 (R-113)	005	DM	6000	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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.

Unless I am a small quantity generator who has been exempted by statute or 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.

Printed/Typed Name: RONNIE BOYETT — Signature: Ronnie Boyett — Month 08 Day 4 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RONNIE BOYETT — Signature: Ronnie Boyett — Month 8 Day 4 Year 86

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: John MALTA — Signature: [illegible] — Month 8 Day 4 Year 86

GENERATOR — TRANSPORTER — FACILITY

86534546

DHS 8022 A (11/85)
(EPA 8700--22)

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To P.O. Box 3000, Sacramento CA 95812

860828 047

August 6, 1986

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAX000038034 — 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
F. M. Thomas
231 Gemini, Brea, California

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 86534551

B. State Generator's ID: CAX000038034

5. Transporter 1 Company Name: F. M. Thomas

6. US EPA ID Number: CAX000038034

C. State Transporter's ID

D. Transporter's Phone: 714/738-1062

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: 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. Hazardous Waste, Liquid N.O.S. NA 9189 ORM-E (R-11)	31	DN		P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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.

Unless I am a small quantity generator who has been exempted by statute or 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 — Printed/Typed Name: X RONNIE BOYETT — Signature: Ronnie Boyett — Month 8 Day 7 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

TRANSPORTER — Printed/Typed Name: Y RONNIE BOYETT — Signature: Ronnie Boyett — Month 8 Day 7 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
RECIEVED 453 lbs

FACILITY

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

Printed/Typed Name: JAVIER HERNANDEZ — Signature: Javier Hernandez — Month 8 Day 7 Year 86

86534551

DHS 8022 A (11/85)
(EPA 8700—22)

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To P.O. Box 3000, Sacramento CA 95812

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Called in by Ron. Put in Reserve

August 26, 1986

~~P.O. 27923~~

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: C A X 0 0 0 0 3 8 0 3 4
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
F. M. Thomas
231 Gemini
Brea, Calif.

4. Generator's Phone ( ) 714/738-1062

A. State Manifest Document Number: 86534584

B. State Generator's ID: CAX000038034

5. Transporter 1 Company Name: F. M. Thomas

6. US EPA ID Number: C A X 0 0 0 0 3 8 0 3 4

C. State Transporter's ID

D. Transporter's Phone: 714/738-1062

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: C A D 0 4 2 2 4 5 0 0 1

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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Waste Liquid NOS, ORM-E NA 9189 (R-11)		DM		P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: R01

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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Printed/Typed Name: RONNIE BOYETT — Signature: Ronnie Boyett — Month Day Year: 8 26 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RONNIE BOYETT — Signature: Ronnie Boyett — Month Day Year: 8 26 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
RECEIVED 4 DRUMS, 440 lbs

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 HALTE — Signature: [signature] — Month Day Year: 8 26 86

DHS 8022 A (11/85)
(EPA 8700—22)

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

05/31/2001 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency

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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. C A X 0 0 0 0 3 8 0 3 4 — 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
F.M. Thomas Airconditioning
231 Gemini Ave., Brea, Ca. 92621

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 86544220

B. State Generator's ID: CAX000038034

5. Transporter 1 Company Name: F.M. THOMAS AIRCONDITIONING

6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone: 714/738-1062

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: C A D 0 4 2 2 4 5 0 0 1

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, NA 9189 ORM-e ~~(R-11)~~	4	DM	650	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

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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Printed/Typed Name: MIKE RALEIGH — Signature — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIKE RALEIGH — Signature — Month Day Year

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: Bil Solomon — Signature — Month Day Year: 4 15 85

86544220

DHS 8022 A (11/85)
(EPA 8700—22)

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To P.O. Box 3000, Sacramento CA 95812

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
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-5/02/88

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A X0 0 00 3 80 3 4 — 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
F. M. Thomas Co.
231 Gemini Ave. Brea, CA 92621

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 87118754

B. State Generator's ID

5. Transporter 1 Company Name: F. M. Thomas — 6. US EPA ID Number

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
Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number: C A D 042 24 5 -01

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 NOS NA 9189 (R-11)	002	DM	400	P	State 211 / EPA/Other
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.

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: MIKE RALEIGH — Signature: Mike Raleigh — Month Day Year: 5 2 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIKE RALEIGH — Signature: Mike Raleigh — Month Day Year: 5 2 88

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: Fred Mittwer — Signature: Fred Mittwer — Month Day Year: 5 02 88

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

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

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06-02-88

P.O. 5866

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A X0 0 00 3 80 3 4
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
F. M. Thomas Co.
231 Gemini Ave., Brea, CA 92521

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number 87118844

B. State Generator's ID

5. Transporter 1 Company Name F. M. Thomas

6. US EPA ID Number

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
Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number C A D 04 2245 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 NOS NA 9189 (R-11)	5	DM	2500	P	State / EPA/Other
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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Printed/Typed Name: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 06 02 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year:

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: CHRIS E. MARTINEZ
Signature:
Month Day Year: 06 07 88

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

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Shipper 20199 P.O.# 53172

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAX000038034
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
F.M. Thomas Co.
231 Gemini Ave., Brea, CA 92521
4. Generator's Phone (714-738-1062

A. State Manifest Document Number: 87118852
B. State Generator's ID:

5. Transporter 1 Company Name: F.M.Thomas
6. US EPA ID Number:
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
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:

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 NOS NA 9189 (R-11)	2	DM	210	G	State / EPA/Other
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: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 6 17 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 6 17 88

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: CHRIS E. MARTINEZ
Signature:
Month Day Year: 6 17 88

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

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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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAX 000 038 034
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
F.M. THOMAS CO.
231 GEMINI AVE., BREA, CA 92521
4. Generator's Phone (714) 738-1062

A. State Manifest Document Number 87118916
B. State Generator's ID

5. Transporter 1 Company Name: F.M. THOMAS CO
6. US EPA ID Number: CAX 000 038 034
C. State Transporter's ID
D. Transporter's Phone (714) 738-1062

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: CAX 000 038 034
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. NA 9189 (R-11)	11	DM	110	G	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

P.O. 53123

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: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 07 07 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 07 7 88

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: J. Brent Oliver
Signature: J. Brent Oliver
Month Day Year: 07 07 88

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

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07-12-88 SHIPPER 18878

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAX 000 038 034
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
F, M. THOMAS
231 GEMINI AVE., BREA, CA
4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 87118931
B. State Generator's ID:

5. Transporter 1 Company Name: F.M. THOMAS
6. US EPA ID Number: CAX 000 038 034
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
OMEGA RECIVERY SERVICES
12504 E. WHITTIER B:VD
@HITTIER, 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 NA 9189 (R-11)	005	DM		G	State / EPA/Other
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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Printed/Typed Name: Mike RALEIGH
Signature: Mike Raleigh
Month Day Year: 7 12 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

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: G. Solomon
Signature: G. Solomon
Month Day Year: 7 12 88

GENERATOR

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
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05/30/2001 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
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July 25, 1988

Shipper 20000

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CA X 0 00 0 3 80 3 4
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
F.M. Thomas
231 Gemini, Brea, CA

4. Generator's Phone ( )

A. State Manifest Document Number: 87118965
B. State Generator's ID:

5. Transporter 1 Company Name: F. M. Thomas
6. US EPA ID Number: C AX 00 00 38 0 3 4
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
Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA 90602
10. US EPA ID Number: C A D 04 2 245 001
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 NOS ORM-E NA 9189 (R-11)	0 05	DM	5000	P	State 211 / EPA/Other
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

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Printed/Typed Name: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 7 26 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 7 26 88

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 Sobon
Signature:
Month Day Year: 07 27 88

GENERATOR

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

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08/24/88

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAX 000 038 034
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
F. M. Thomas
231 Gemini, Brea, California
4. Generator's Phone (714) 738-1062

A. State Manifest Document Number 87119112
B. State Generator's ID

5. Transporter 1 Company Name F. M. Thomas
6. US EPA ID Number CAY000038034
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
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 NOS NA 9189 (R-11)	007	DM	500	P	State 211 / EPA/Other
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

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Printed/Typed Name: X MIKE RALEIGH
Signature: Mike Raleigh
Month Day Year: 8/25/88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: X MIKE RALEIGH
Signature: Mike Raleigh
Month Day Year: 8/25/88

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: 10/31/88

GENERATOR

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)
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01-04-88 P.O.# 51807

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAX 2 0 0 0 3 8 0 3 4
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
F.M. THOMAS AIRCONDITIONING
231 GEMINI AVE., BREA CA 92621
4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 87119559
B. State Generator's ID:

5. Transporter 1 Company Name: F.M. THOMAS AIRCONDITIONINGT
6. US EPA ID Number:
C. State Transporter's ID:
D. Transporter's Phone: 714/738-1062

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 0 4 2 2 4 5 0 0 1
G. State Facility's ID: CAD 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. HAZARDOUS WASTE LIQUID N.O.S. NA 9189 ORM-E (R-11)	2	DM	1400	P	State / EPA/Other
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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Printed/Typed Name: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 01 04 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONNIE BOYETT
Signature: Ronnie Boyett
Month Day Year: 01 04 88

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: John HACK
Signature:
Month Day Year: 01 04 88

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, TSDF 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 9-30-85)
Please print or type. (Form designed for use on elite (12-pitch typewriter) 12/28/87

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAX000038034
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
F.M. THOMAS AIRCONDITIONING
231 GEMINI AVE, BREA CA 92621

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 87119577
B. State Generator's ID:

5. Transporter 1 Company Name: F.M. THOMAS AIRCONDITIONING
6. US EPA ID Number:
C. State Transporter's ID: CAX000038034
D. Transporter's Phone: 714/738-1062

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: 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. HAZAEDOUS WASTE LIQUID N.O.S. NA9189 ORM-E (R-11)	10	DM	1000	P	State / EPA/Other
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
PO # 52690

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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Printed/Typed Name: JAMES PROCK
Signature: James Prock
Month Day Year: 12 28 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAMES PROCK
Signature: James Proc E
Month Day Year: 12 28 87

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: 12 28 87

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.

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

INSTRUCTIONS ON THE BACK

State of California—Health and Welfare Agency Shipper 19259
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

8 8293692

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAX000038034
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
F.M. Thomas
231 Gemini, Brea, CA

A. State Manifest Document Number: 8 8293692

4. Generator's Phone (714) 738-1062

B. State Generator's ID:

5. Transporter 1 Company Name: F.M. Thomas
6. US EPA ID Number: CAX000038034

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
Omega Recovery Services
12054 E. Whittier Blvd.
Whittier, CA

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. Hazardous Waste Liquid NOS NA 9189 (R-11)	04	DM	400	P	State / EPA/Other
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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Printed/Typed Name: Mike Raleigh
Signature: Mike Raleigh
Month Day Year: 3 21 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Mike Raleigh
Signature: Mike Raleigh
Month Day Year: 3 21 89

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: John Hautz
Signature: [signature]
Month Day Year: 3 21 89

GENERATOR / TRANSPORTER / FACILITY

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

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05/24/89 Shipper 20836

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.: CAX000038034
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
F. M. Thomas
231 Gemini, Brea, CA 92621
4. Generator's Phone (818 448-1902

A. State Manifest Document Number: 88677471
B. State Generator's ID:

5. Transporter 1 Company Name: F. M. Thomas Co.
6. US EPA ID Number: CAX000038034
C. State Transporter's ID:
D. Transporter's Phone: 818/448-1902

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 NOS ORM-E (R-11) NA 9189	005	DM	500	P	State / EPA/Other
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
A) Recycle back to customer.

16.
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Printed/Typed Name: F.M. THOMAS A/C
Signature: [signature]
Month Day Year: 5 25 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: F.M. THOMAS A/C
Signature: [signature]
Month Day Year: 5 25 89

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: R. Avalos Jr.
Signature: R. Avalos Jr.
Month Day Year: 5 24 89

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

88677471

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

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8906 30 0115 0741

Item 2-15

06-28-89 SHIPPER 20890

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: CAX000038034 — 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
F.M. THOMAS
231 GIMINI AVE., BREA, CA 92621

4. Generator's Phone (714) 738-1062

A. State Manifest Document Number: 88677585
B. State Generator's ID:

5. Transporter 1 Company Name: F.M. THOMAS
6. US EPA ID Number: CAX000038034
C. State Transporter's ID:
D. Transporter's Phone: (714)738-1062

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: 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. HAZARDOUS WASTE LIQUID N.O.S ORM-E NA 9189 (R-113)	4	DM	400	16	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

OFFICIAL MANIFEST RECORD COPY

J. Additional Descriptions for Materials Listed Above
RECYCLE BACK TO CUSTOMER

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

15. Special Handling Instructions and Additional Information

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Printed/Typed Name: Mike Rallich — Signature: Mike Rallich — Month Day Year: 6 29 89

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

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: N. JAY Solomon — Signature: N. Jay Solomon — Month Day Year: 6 29 89

GENERATOR — TRANSPORTER — FACILITY

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88677585

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EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

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