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.: CAD 098113187515
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required for hazardous waste.

3. Generator's Name and Mailing Address:
GAMBOA'S BODY & FRAME SHOP
2500 CITRUS ROAD RANCHO CORDOVA, CALIFORNIA 95742

4. Generator's Phone: (916) 638-3015

5. Transporter 1 Company Name: BOR INDUSTRIES
6. US EPA ID Number: CAD 981282179

7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address:
OMEGA RECOVERY SERVICES
12512 E. WHITTIER BLVD. WHITTIER, CALIFORNIA 90602
10. US EPA ID Number: CAD 014275001

A. State Manifest Document Number: 8357335
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter 1 Phone: (916) 332-3542
E. State Transporter's ID:
F. Transporter 2 Phone:
G. State Facility's ID: CAD 014275001
H. Facility's Phone: (213) 698-0997

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

	No.	Type	Quantity	Unit Wt./Vol.	Waste No.
A. NOS NA 1993 WASTE CONDENSATE LIQUID		DM	01	G	
B.					
C.					
D.					

J. Additional Descriptions for Materials (Listed Above)
K. Handling Codes for Wastes Listed Above: a. 01 b. c. d.

Main Solvents & Paint

12. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: J. Nobes
Signature:
Month Day Year: 1 9 2 1 9 3

14. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: BOR Ind
Signature:
Month Day Year: 1 8 3 2 1 3

15. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name:
Signature:
Month Day Year:

16. Discrepancy Indication Space

17. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 16:

Printed/Typed Name: Henry R. Solomon
Signature:
Month Day Year: 0 9 0 2 9 2

Do Not Write Below This Line

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

Mail: 1501 SIXTH AVE. (ORT TO DOH), within 30 days to: P.O. Box 3000, Sacramento, CA 95812

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CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802 IN EMERGENCIES CALL 1-800-852-7550