generator_name	GRAYCON INC
lc_name:	Graycon, Inc.
lc_calc_volume:	3.775 tons

manifest_number	manifest_quantity_ton
83029843	0.25 tons
83212258	0.4 tons
83494052	0.68805 tons
86544108	0.3 tons
87118642	0.6 tons
88293707	0.6672 tons
88345399	0.3753 tons
88614681	0.14 tons
88677515	0.2502 tons
88684769	0.10425 tons

MAY 16 1983

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

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

JUL 6 1983

STATE ID NUMBER 8 30298A3

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

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N. Rosemead Blvd.
S. El Monte, Ca.

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAX000046753

AREA CODE/PHONE NUMBER 283-9451

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

VEH./CONTAINER NO. 42507

EPA ID NUMBER CA DO 4224500 1

TRANSPORTER NO. 2/ALTERNATE FACILITY

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT/STORAGE OR DISPOSAL FACILITY
OMEGA CHEMICAL CORP.

EPA ID NUMBER CA DO 4224500 1

AREA CODE/PHONE NUMBER 698-0991

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	TYPE	WASTE CAT. NO.	DISP. METH.
R-11, CAP REFRIGERANT GAS N.O.S. Non Flammable Gas	UN 1078	1500	P	103	DM	411	01

COMPONENTS	CONC. RANGE (PER)	UNITS

SPECIAL HANDLING INSTRUCTIONS

Kept at 40 lbs

I hereby certify that the above-named waste is properly classified, packaged, marked and labeled, and is in proper condition for transportation according to applicable regulations of the Department of Transportation and the EPA.

MO. DAY YR.

Name of typed full name and signature

Check continuation sheet if any

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE RECD. ACCEPTED MO. 8 DAY 6 YR. 83

Name of typed full name and signature

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE RECD. ACCEPTED MO. DAY YR.

Name of typed full name and signature

TO BE FILLED IN BY DISPOSAL FACILITY

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous wastes covered by manifest except as noted in discrepancy indication space above. Note: TSDF must complete waste report on reverse side.

DATE RECEIVED & ACCEPTED MO. 16 DAY 16 YR. 83

EPA ID NUMBER CA DO 4224500 1

Steve Simpson

Name of typed full name and signature

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

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 83212258

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N ROSEMEAD BLVD.
S. EL MONTE, CA.
AREA CODE/PHONE NUMBER 288-9551

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAX000014619513

TRANSPORTER NO. 1
GRAYCON
VEH./CONTAINER NO.
EPA ID NUMBER

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
[redacted]
VEH./CONTAINER NO.
EPA ID NUMBER
[redacted]

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
12504 E. WHITTIER BLVD.
WHITTIER, CA 90602
AREA CODE/PHONE NUMBER
EPA ID NUMBER
CAD004212415001

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	18000	P	104	DM	211	011

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
R-11 yield 477 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

Printed or typed full name and signature Jeff Young — Jeff Young — MO. 03 DAY 22 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 Jeff Young — Jeff Young
DATE REC'D & ACCEPTED MO. 3 DAY 22 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.
Printed or typed full name and signature

EPA ID NUMBER CAD042245991
DATE RECEIVED & ACCEPTED MO. 03 DAY 22 YR 84

FORM NO. DHS-8022A 11/82

THIS COPY TO DOHS WITHIN 15 DAYS

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
Rd: Skipper 12547
Ab $13.73

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

STATE ID NUMBER 83494052

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON, INC. (Joe Welch)
2213-15 No. Rosemead Blvd.
South El Monte, CA 91733
AREA CODE/PHONE NUMBER 213/442-5633

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER

TRANSPORTER NO 1
GRAYCON, INC.

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 US DOT 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)	NA 9189	[illegible]	P	3	DM	211	01

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

SPECIAL HANDLING INSTRUCTIONS
yield 469 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

MO | DAY | YR

Printed or typed full name and signature

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Jay Young
Printed or typed full name and signature

DATE REC'D & ACCEPTED | MO 05 | DAY 01 | YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED | MO | DAY | YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

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

Jay Solomon Jay Solomon
Printed or typed full name and signature

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED | MO. 05 | DAY 01 | YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87957

DRIVER: PLS. SEE MATT

State of California—Health and Welfare Agency

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A X 4 0 0 0 4 6 9 5 8 — 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
Graycon
C/O J. C. Penney, #8 City Blvd. East, Orange, Calif

4. Generator's Phone (714) 998-9700

A. State Manifest Document Number: 86541108

B. State Generator's ID: CAX400046958

5. Transporter 1 Company Name: Omega Recovery Services

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

C. State Transporter's ID: 701734

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: 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 NOS ORM-E NA 9189 (R-11)	004	DM	600	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 01

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: DAVID R BELL — Signature: R Bell — Month Day Year: 2 6 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIM BALTIERRA — Signature: Tim Baltierra — Month Day Year: 02 06 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 02 06 87

86541108

DHS 8022 A (11/85)
(EPA 8700—22)

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Shipper 18165

Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAX 400 0 0 4 6 9 5 3

Manifest Document No.

2. Page 1 of

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

A. State Manifest Document Number: 87118642

3. Generator's Name and Mailing Address
Graycon
c/o California Plaza, 5670 Wilshire, L.A, CA

4. Generator's Phone: 818 442-5633

B. State Generator's ID

5. Transporter 1 Company Name: Omega Recovery Services

6. US EPA ID Number: CAD 0 4 2 2 4 9 0 0 1

C. State Transporter's ID: 803785

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

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	Waste No.
a. Hazardous Waste, Liquid NOS ORM-E NA 9189 (r-11)	6	DM	1/12000	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.

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: RICHARD BRYANT
Signature: Richard Bryant
Month Day Year: 10 31 15 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 31 15 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: FRANK FORD
Signature: Frank Ford
Month Day Year: 10 31 15 88

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER ...

DHS 8022 A (1/87)
EPA 8700—22

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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

Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD981375975

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
J.C. PENNYS
THE CITY DRIVE MALL., ORANGE, CA

4. Generator's Phone (818 442-5633

A. State Manifest Document Number 8 8293707

B. State Generator's ID

C. State Transporter's ID 4DL280

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

5. Transporter 1 Company Name
OMEGA RECOVERY SERVICES

6. US EPA ID Number CAD042245001

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 CAD042245991

H. Facility's Phone (213) [illegible]-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)	001 4	DIM	0101/610	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.

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: R. VAN DER AA — Signature: [signature] — Month Day Year: 04/18/8[illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J Cirineo — Signature: [signature] — Month Day Year: 04/21/8[illegible]

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: [signature] — Month Day Year: 04/21/8[illegible]

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

082931U1

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

Do Not Write Below This Line

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

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD 981 375 975
Manifest Document No. 415319

2. Page 1 of

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

3. Generator's Name and Mailing Address
GRAYCON
2213-15 ROSEMEAD BLVD.,SOUTH EL MONTE,CA.

4. Generator's Phone (818) 442-5633

A. State Manifest Document Number 88345399

B. State Generator's ID

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

C. State Transporter's ID 208452

D. Transporter's Phone 213/698-0991

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

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER,CA. 90602
10. US EPA ID Number: CAD 042 245 001

G. State Facility's ID CAD042245001

H. Facility's Phone 213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL N.O.S., COMBUSTIBLE LIQUID NA 1270	0002	DM	000070	G	State 221 / EPA/Other N/A
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
a.-Material for disposal

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

15. Special Handling Instructions and Additional Information
Profile#B11731
*Emergency#818/442-5633

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

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

Printed/Typed Name: Santino Mercuri
Signature
Month Day Year: 1/1/25/91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature
Month Day Year: 1/1/25/91

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John HALTE
Signature
Month Day Year: 1/1/2/7/91

GENERATOR

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

88345399

Do Not Write Below This Line

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

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

07-25-89 SHIPPER 15408

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.: CAD981375575
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:
GRAYCON
2213-15 NORTH ROSEMEAD BLVD., SOUTH EL MONTE, CA 91733

4. Generator's Phone: (213) 283-9451

A. State Manifest Document Number: 88614681

B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES

6. US EPA ID Number: CAD042245001

C. State Transporter's ID: 010384

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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S TOXIC LIQUID (R-11) NA 9189	001	DM	001140	P	State / EPA/Other
b. HAZARDOUS WASTE LIQUID N.O.S TOXIC LIQUID (R-11) NA 9189	001	DM	001140	P	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. 01
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.

Printed/Typed Name: MARIO JACQUES
Signature: Mario Jacques
Month Day Year: 08 02 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 08 02 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: FRANK FORD
Signature: Frank Ford
Month Day Year: 08 02 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

88614681

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

Do Not Write Below This Line

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

07/29/2003 A

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CA0981325975 | 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
J.C PENNEY
12215 VISTORY BLVD., NO. HOLLYWOOD, CA

4. Generator's Phone (818) 442-5633

A. State Manifest Document Number: 88677515
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD042224500
C. State Transporter's ID: 010384
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. WHITTEIR BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD042224500 1
G. State Facility's ID: CAD042224500 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. State / J. EPA/Other
a. HAZARDOUS WASTE LIQUID N.O.S ORM-E NA 9189 (R-11)	002	DM	0190160	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. 001 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.

Printed/Typed Name: N. DE ROSSETT | Signature: N. De Rossett | Month Day Year: 07 12 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J CRUMPEON | Signature: [illegible] | Month Day Year: 07 12 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: FRANK FORD | Signature: Frank Ford | Month Day Year: 07 12 89

GENERATOR — TRANSPORTER — FACILITY

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

Do Not Write Below This Line

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

CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

generator_name	GRAYCON INC
lc_name:	Graycon, Inc.
lc_calc_volume:	3.775 tons

manifest_number	manifest_quantity_ton
83029843	0.25 tons
83212258	0.4 tons
83494052	0.68805 tons
86544108	0.3 tons
87118642	0.6 tons
88293707	0.6672 tons
88345399	0.3753 tons
88614681	0.14 tons
88677515	0.2502 tons
88684769	0.10425 tons

MAY 13, 1983

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

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

JUL 6 1983

STATE ID NUMBER 83022843

Please Print or Type with Ink (Type 12 characters per inch)

MANIFEST DOCUMENT NUMBER

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N. Rosemead Blvd.
S. El Monte, Ca.

EPA ID NUMBER CAX000046755

AREA CODE/PHONE NUMBER 283-9451

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

VEH./CONTAINER NO. 42507

EPA ID NUMBER CA D0 42245001

TRANSPORTER NO. 2/ALTERNATE FACILITY

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT/STORAGE OR DISPOSAL FACILITY
OMEGA CHEMICAL CORP.

EPA ID NUMBER CA D0 42245001

AREA CODE/PHONE NUMBER 698-0991

PROPER DOT SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	CONTAINER TYPE	WASTE CAT. NO.	DISP. METH.
R-11 (A) REFRIGERANT GAS N.O.S. Non Flammable Gas	UN 1078	1500	P	103	DM	211	01

COMPONENTS	CONC. RANGE UPPER	LOWER	UNITS

SPECIAL HANDLING INSTRUCTIONS
Applied 4220 lbs

I hereby certify that the above-named wastes are properly classified, packed, marked and labeled, and are in proper condition for transportation according to applicable regulations of the Department of Transportation and the EPA.

Name of typed (full) name and signature

MO. DAY YR.

If additional continuation sheet is used, number it here

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Name of typed (full) name and signature: Kathy

DATE REC'D ACCEPTED MO. 9 DAY 6 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Name of typed (full) name and signature

DATE REC'D ACCEPTED MO. DAY YR.

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste as described on this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete this section.

See back side for instructions

Steve Simpson

Name of typed (full) name and signature

EPA ID NUMBER CA D0 42245001

DATE REC'D MO. 5 DAY 18 YR. 83

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

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 83212258

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N ROSEMEAD BLVD.
S. EL MONTE, CA.
AREA CODE/PHONE NUMBER 288-9551

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAX000014619513

TRANSPORTER NO. 1
GRAYCON
VEH./CONTAINER NO.
EPA ID NUMBER

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
[illegible]
V.EH./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
EPA ID NUMBER CAD004212415001

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	18000	P	04	DM	211	011

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
R-11 yield 477 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

Printed or typed full name and signature Jeff Young — MO 03 DAY 22 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 Jeff Young — DATE REC'D & ACCEPTED MO 3 DAY 22 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.
Printed or typed full name and signature

EPA ID NUMBER CAD042245091
DATE RECEIVED & ACCEPTED MO 03 DAY 22 YR 84

FORM NO. DHS-8022A 11/82

THIS COPY TO DOHS WITHIN 15 DAYS

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
Rel: SL 1PE 12547
Ab 5/3/73

STATE ID NUMBER 83494052

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

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON, INC. (Joe Welch)
2213-15 No. Rosemead Blvd.
South El Monte, CA 91733
AREA CODE/PHONE NUMBER 213/442-5633

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER

TRANSPORTER NO 1
GRAYCON, INC.
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 US DOT 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)	NA 9189	[illegible] L	P	13	DM	211	01

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

SPECIAL HANDLING INSTRUCTIONS
yield 469 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.

MO | DAY | YR

Printed or typed full name and signature

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Jeff Young
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO 05 DAY 01 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Jay Solomon Jay Solomon
Printed or typed full name and signature

EPA ID NUMBER CAD042245001
DATE RECEIVED & ACCEPTED MO. 05 DAY 01 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87957

DRIVER: PLS. SEE MATT

State of California—Health and Welfare Agency

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A X 4 0 0 0 4 6 9 5 8

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
Graycon
C/O J. C. Penney, #8 City Blvd. East, Orange, Calif

4. Generator's Phone (714) 998-9700

A. State Manifest Document Number: 86544108

B. State Generator's ID: CAX400046958

5. Transporter 1 Company Name: Omega Recovery Services

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

C. State Transporter's ID: 701734

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: 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 NOS ORM-E NA 9189 (R-11)	004	DM	600	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 01

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: DAVID R BELL — Signature: [signature] — Month 12 Day 6 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIM BALTIERRA — Signature: [signature] — Month 12 Day 06 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: FRANK FORD — Signature: [signature] — Month 12 Day 96 Year 87

86544108

DHS 8022 A (11/85)
(EPA 8700—22)

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Shipper 18165

Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C A X 4 0 0 0 4 6 9 5 3

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
Graycon
c/o California Plaza, 5670 Wilshire, L.A, CA

4. Generator's Phone: 818 442-5633

A. State Manifest Document Number: 87118642

B. State Generator's ID:

C. State Transporter's ID: 803785

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

5. Transporter 1 Company Name: Omega Recovery Services

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

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

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	Waste No.
a. Hazardous Waste, Liquid NOS ORM-E NA 9189 (r-11)	6	DM	1/2000	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.

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: RICHARD BRYANT
Signature: Richard Bryant
Month Day Year: 10 31 1988

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 31 1988

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD
Signature: Frank Ford
Month Day Year: 10 31 1988

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER ...

DHS 8022 A (1/87)
EPA 8700—22

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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

Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD981137595 — 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
J.C. PENNYS
THE CITY DRIVE MALL., ORANGE, CA

4. Generator's Phone (818 442-5633

A. State Manifest Document Number: 8 8293707

B. State Generator's ID

C. State Transporter's ID: 962780

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

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES

6. US EPA ID Number: CAD042245001

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: CAD042245991

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)	001	DIM	0010	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.

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: R. VAN DER AA — Signature: R. Van der Aa — Month Day Year: 04 16 18

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Robert J Carrington — Signature: Robert J Carrington — Month Day Year: 04 16 18

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 10 4 21 18

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

8 8293 /U/

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

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30

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

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD 981 375 975
Manifest Document No.: 41 5 3 9 9
2. Page 1 of

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

3. Generator's Name and Mailing Address
GRAYCON
2213-15 ROSEMEAD BLVD.,SOUTH EL MONTE,CA.

4. Generator's Phone (818) 442-5633

A. State Manifest Document Number: 88345399
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 208452
D. Transporter's Phone: 213/698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER,CA. 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: 213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL N.O.S., COMBUSTIBLE LIQUID NA 1270	0002	DIM	000070	G	State 221 / EPA/Other N/A
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
a.-Material for disposal

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

15. Special Handling Instructions and Additional Information
Profile#B11731
*Emergency#818/442-5633

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

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

Printed/Typed Name: Santino Mercuri
Signature: [signature]
Month Day Year: 1/1/25/91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: [signature]
Month Day Year: 1/1/25/91

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John HALTE
Signature: [signature]
Month Day Year: 1/1/27/91

GENERATOR

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

88345399

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

Do Not Write Below This Line

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

07-25-89 SHIPPER 15408

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. CAD981375375 | Manifest Document No. 11

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

3. Generator's Name and Mailing Address
GRAYCON
2213-15 NORTH ROSEMEAD BLVD., SOUTH EL MONTE, CA 91733

4. Generator's Phone (213) 283-9451

A. State Manifest Document Number 88614681

B. State Generator's ID

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

C. State Transporter's ID 010384

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	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S TOXIC LIQUID (R-11) NA 9189	001	DM	001140	P	State / EPA/Other
b. HAZARDOUS WASTE LIQUID N.O.S TOXIC LIQUID (R-11) NA 9189	001	DM	001140	P	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. 01
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.

Printed/Typed Name: MARIO JACQUES | Signature | Month Day Year 08 02 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ | Signature | Month Day Year 08 02 89

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD | Signature | Month Day Year 08 02 89

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

88614681

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 3-88) Previous editions are obsolete.

Do Not Write Below This Line

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

07/29/2003 A

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CA0981325925 | 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
J.C PENNEY
12215 VISTORY BLVD., NO. HOLLYWOOD, CA

4. Generator's Phone (818) 442-5633

A. State Manifest Document Number: 88677515
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD042224500
C. State Transporter's ID: 010334
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. WHITTEIR BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD042224500 1
G. State Facility's ID: CAD042224500 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 ORM-E NA 9189 (R-11)	002	DM	0190160	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. M1 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.

Printed/Typed Name: N. DE ROSSETT | Signature: N. De Rossett | Month Day Year: 10 12 17 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J Crimeen | Signature: [signature] | Month Day Year: 10 12 17 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: FRANK FORD | Signature: Frank Ford | Month Day Year: 10 12 17 89

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF EMERGENCY CALL CHEMTREC 1-800-424-9300 OR CALL CHEMTREC INTERNATIONAL RESPONSE CENTER 1-800-262-7850 WITHIN CALIFORNIA CALL 1-800-852-7550

DHS 8022 A (1/88)
CHP 700-22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

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

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

88684769

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.: CAD 981 370 975
Manifest Document No.: 84769
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address:
AVERY LABEL-GRAYCON
150 NORTH ORANGE GROVE BLVD. - PASADENA, CA 91103
4. Generator's Phone: (213) 283-9451

A. State Manifest Document Number: 88684769
B. State Generator's ID:
C. State Transporter's ID: H0236
D. Transporter's Phone: 213 283-9451
E. State Facility's ID:
F. Facility's Phone:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address:
OMEGA RECOVERY SERVICE
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.	13. Total Quantity	14. Unit Wt./Vol.	I. Waste No.
a. WASTE OIL, N.O.S., COMBUSTIBLE LIQUID NA 1270 (REFRIGERANT OIL)	001	DM 00035	G	State 341; EPA/Other D001, F002
b.				State: EPA/Other:
c.				State: EPA/Other:
d.				State: EPA/Other:

J. Additional Descriptions for Materials Listed Above:
A) FOR DISPOSAL

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

15. Special Handling Instructions and Additional Information:
PROFILE NUMBER B 11114
EMERGENCY PHONE NUMBER 213 283-9451

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: James O. Young — Signature: [signature] — Month Day Year: 09 24 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature: [signature] — Month Day Year: 09 24 91

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19:
Printed/Typed Name: John Hyde — Signature: [signature] — Month Day Year: 09 24 91

Do Not Write Below This Line

DHS 8022 A (1/86)
EPA 8700-22
(Rev. 9-88) Previous editions are obsolete

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

MAY 19, 1983

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

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

JUL 6 1983

STATE ID NUMBER 83029843

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

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N. Rosemead Blvd.
S. El Monte, Ca.
AREA CODE/PHONE NUMBER 283-9451

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER CAX000049153

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

VEH./CONTAINER NO. 42507 — EPA ID NUMBER CA D0 42245001

TRANSPORTER NO. 2 (ALTERNATE FACILITY)

VEH./CONTAINER NO. — EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL SITE OR FACILITY
OMEGA CHEMICAL CORP.

EPA ID NUMBER CA D0 42245001

CODE PHONE NUMBER 698-0991

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT./VOL.	CONTAINER NO.	CONTAINER TYPE	WASTE CAT. NO.	DISP. METH.
P-11 (REFRIGERANT GAS N.O.S.) Non Flammable Gas	UN 1078	1500	P	003	DM	41	01

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS	EPA

SPECIAL HANDLING INSTRUCTIONS
Applied to D.O.T.

I hereby 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 regulations of the Department of Transportation and the EPA.

MO DAY YR

Signature or typed full name and operator

Signature of Company Representative Name and Address

TO BE FILLED BY THAT PARTY

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF HAZ. WASTES

DATE RECD. ACCEPTED MO 9 DAY 6 YR 83

Signature or typed full name and operator

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF HAZ. WASTES

DATE RECD. ACCEPTED MO DAY YR

Signature or typed full name and operator

DISCREPANCY INDICATION SPACE

TO BE FILLED BY DESIGNATED FACILITY

Certification of receipt of hazardous wastes covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must process waste as per instructions.

Signature or typed full name and signature: Steve Simpson

EPA ID NUMBER CA D0 42245001

DATE RECEIVED/ACCEPTED MO 5 DAY 18 YR 1

YOU SENDS THIS COPY TO DOHS WITHIN 15 DAYS

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 83212258

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N ROSEMEAD BLVD.
S. EL MONTE, CA.
AREA CODE/PHONE NUMBER 288-9551

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAX000014619513

TRANSPORTER NO. 1
GRAYCON
VEH./CONTAINER NO.
EPA ID NUMBER

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
[redacted]
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
EPA ID NUMBER CAD014212415004

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	18000	P	104	DM	211	011

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
R-11 gold 477 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

Printed or typed full name and signature Jeff Young — MO. 03 DAY 22 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 Jeff Young — DATE REC'D & ACCEPTED MO. 3 DAY 22 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.
Printed or typed full name and signature

EPA ID NUMBER CAD042245991
DATE RECEIVED & ACCEPTED MO. 03 DAY 22 YR 84

FORM NO. DHS-8022A 11/82

THIS COPY TO DOHS WITHIN 15 DAYS

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
Rec'd Skippie No. 12547
5/31/73

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

STATE ID NUMBER 83494052

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON, INC. (Joe Welch)
2213-15 No. Rosemead Blvd.
South El Monte, CA 91733
AREA CODE/PHONE NUMBER 213/442-5633

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER

TRANSPORTER NO 1
GRAYCON, INC.

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 US DOT 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)	NA 9189	[illegible] L	P	13	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

SPECIAL HANDLING INSTRUCTIONS
yield 469 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

MO | DAY | YR

Printed or typed full name and signature

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Jeff Young
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO 05 DAY 01 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Jay Solomon
Printed or typed full name and signature

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED
MO. 05 DAY 01 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87957

DRIVER: PLS. SEE MATT

State of California—Health and Welfare Agency

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A X 4 0 0 0 4 6 9 5 3

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
Graycon
C/O J. C. Penney, #8 City Blvd. East, Orange, Calif

4. Generator's Phone (714) 998-9700

A. State Manifest Document Number: 86544108

B. State Generator's ID: CAX400046953

5. Transporter 1 Company Name: Omega Recovery Services

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

C. State Transporter's ID: 201734

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: 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 NOS ORM-E NA 9189 (R-11)	004	DM	600	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 01

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: DAVID R BELL — Signature: R Bell — Month Day Year: 12 6 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIM BALTIERRA — Signature: Tim Baltierra — Month Day Year: 12 06 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 12 29 87

86544108

DHS 8022 A (11/85)
(EPA 8700—22)

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Shipper 18165

Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CA X 40 00 04 6953

Manifest Document No.

2. Page 1 of

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

A. State Manifest Document Number: 87118642

3. Generator's Name and Mailing Address
Graycon
c/o California Plaza, 5670 Wilshire, L.A, CA

4. Generator's Phone: 818 442-5633

B. State Generator's ID

5. Transporter 1 Company Name: Omega Recovery Services

6. US EPA ID Number: CA AD 04 22 45 00 1

C. State Transporter's ID: 803785

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

10. US EPA ID Number: CA AD 04 22 45 001

G. State Facility's ID: CA AD 04 22 45 001

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. State / EPA/Other / State / EPA/Other
a. Hazardous Waste, Liquid NOS ORM-E NA 9189 (r-11)	6	DM	1/12000	P	
b.					
c.					
d.					

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: RICHARD BRYANT
Signature: Richard Bryant
Month Day Year: 10 31 1988

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 31 1988

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD
Signature: Frank Ford
Month Day Year: 10 31 1988

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802, WITHIN ONE HOUR OF SPILL

DHS 8022 A (1/87)
EPA 8700—22

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

INSTRUCTIONS ON THE BACK

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

Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD981375975

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
J.C. PENNYS
THE CITY DRIVE MALL., ORANGE, CA

4. Generator's Phone (818 442-5633

A. State Manifest Document Number: 8 8293707

B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES

6. US EPA ID Number: CAD042245001

C. State Transporter's ID: 4D42830

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.	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S NA 9189 (R-11)	001	DM	0101/610	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.

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: R. VAN DER AA — Signature: R. Van der Aa — Month Day Year: 04/21/89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert Cirwedy — Signature: Robert J. Cirwedy — Month Day Year: 04/21/89

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 04/21/89

GENERATOR

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

8 8293707

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

Do Not Write Below This Line

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

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD 981 375 975
Manifest Document No.: 4 5 3 9 9
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
GRAYCON
2213-15 ROSEMEAD BLVD., SOUTH EL MONTE, CA.
4. Generator's Phone (818) 442-5633

A. State Manifest Document Number: 88345399
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 208452
D. Transporter's Phone: 213/698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER, CA. 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: 213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL N.O.S., COMBUSTIBLE LIQUID NA 1270	002	DM	000010	G	State 221 / EPA/Other N/A
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
a.-Material for disposal

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

15. Special Handling Instructions and Additional Information
Profile#B11731
*Emergency#818/442-5633

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

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

Printed/Typed Name: Santino Mercuri
Signature: [signature]
Month Day Year: 1/1/25 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: [signature]
Month Day Year: 1/1/25 91

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John HAUTE
Signature: [signature]
Month Day Year: 1/1/27 91

GENERATOR

88345399

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

Do Not Write Below This Line

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

07-25-89 SHIPPER 15408

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. CAID981375375 — 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
GRAYCON
2213-15 NORTH ROSEMEAD BLVD., SOUTH EL MONTE, CA 91733

4. Generator's Phone (213) 283-9451

A. State Manifest Document Number: 88614681

B. State Generator's ID

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES

6. US EPA ID Number: CAD042245001

C. State Transporter's ID: 010384

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	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S TOXIC LIQUID (R-11) NA 9189	001	DM	001140	P	State / EPA/Other
b. HAZARDOUS WASTE LIQUID N.O.S TOXIC LIQUID (R-11) NA 9189	001	DM	001140	P	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. 01 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.

Printed/Typed Name: MARIO JACQUES — Signature — Month Day Year: 08 02 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAVIER HERNANDEZ — Signature — Month Day Year: 08 02 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: FRANK FORD — Signature — Month Day Year: 08 02 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

88614681

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

Do Not Write Below This Line

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

07/29/2003 A

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CA0981375975 | 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
J.C PENNEY
12215 VISTORY BLVD., NO. HOLLYWOOD, CA

4. Generator's Phone (818) 442-5633

A. State Manifest Document Number: 88677515
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD042224500
C. State Transporter's ID: 210384
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. WHITTEIR 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	State / EPA/Other
a. HAZARDOUS WASTE LIQUID N.O.S ORM-E NA 9189 (R-11)	002	DM	0190160	G	
b.					
c.					
d.					

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.

Printed/Typed Name: N. DE ROSSETI | Signature: N. De Rossetti | Month Day Year: 07 12 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J CRUMLEY | Signature: [signature] | Month Day Year: 07 12 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: FRANK FORD | Signature: Frank Ford | Month Day Year: 07 12 89

GENERATOR — TRANSPORTER — FACILITY

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

DHS 8022 A (1/88)
CCR 1700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

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

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 981 375 975
Manifest Document No: 88684769

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

3. Generator's Name and Mailing Address:
AVERY LABEL-GRAYCON
150 NORTH ORANGE GROVE BLVD., PASADENA, CA 91103

4. Generator's Phone: (213) 283-9451

A. State Manifest Document Number: 88684769

B. State Generator's ID:

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

C. State Transporter's ID: 110236

D. Transporter's Phone: 213 283-9451

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. WASTE OIL, N.O.S, COMBUSTIBLE LIQUID NA 1270 (REFRIGERANT OIL)	001	DM	00025	G	State 341; EPA/Other D001, F002
b.					State; EPA/Other
c.					State; EPA/Other
d.					State; EPA/Other

J. Additional Descriptions for Materials Listed Above:
A) FOR DISPOSAL

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

15. Special Handling Instructions and Additional Information:
PROFILE NUMBER B 11114
EMERGENCY PHONE NUMBER 213 283-9451

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: James O. Young
Signature:
Month Day Year: 04 24 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature:
Month Day Year: 04 24 91

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: John Hayes
Signature:
Month Day Year: 04 24 91

Do Not Write Below This Line

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

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

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

GENERATOR

88684769

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C A X4 0 00 4 69 58
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
Graycon
C/O J. C. Penney, #8 City Blvd. East, Orange, Calif
4. Generator's Phone (714) 998-9700

5. Transporter 1 Company Name: Omega Recovery Services
6. US EPA ID Number: C AD 04 2 24 5 00 1

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: C A D 04 2 245 0 01

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 NOS ORM-E NA 9189 (R-11)	004	DM	600	P
b.				
c.				
d.				

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 01

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: DAVID K BELL
Signature: K Bell
Month Day Year: 2 6 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: TIM BALTIERRA
Signature: Tim Baltierra
Month Day Year: 02 06 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: 02 06 87

DHS 8022 A (11/85)
(EPA 8700—22)

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

04/25/2000 "ORIGINAL MANIFEST COPY"

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C A X 40 0 0 0 4 6953
Manifest Document No.:
2. Page 1 of
A. State Manifest: 87118642

3. Generator's Name and Mailing Address
Graycon
c/o California Plaza, 5670 Wilshire, L.A, CA
4. Generator's Phone (818 442-5633
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone:

5. Transporter 1 Company Name: Omega Recovery Services
6. US EPA ID Number: C A D 0 0 4 2 2 4 5 0 0 1
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
10. US EPA ID Number: C A D 0 0 4 2 2 4 5 0 0 1
G. State Facility's ID: CAD004224500
H. Facility's Phone: 213-698-0901

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)	6	DM	1/2000	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.

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: RICHARD BAYANT
Signature: Richard Bayant
Month Day Year: 03/15/88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 03/15/88

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: FRANK FORD
Signature: Frank Ford
Month Day Year: 03/15/88

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

04/24/2000 "ORIGINAL MANIFEST COPY"

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 981 375 975 — Manifest Document No. 84769
2. Page 1 of — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
AVERY LABEL-GRAYCON
150 NORTH ORANGE GROVE BLVD.., PASADENA, CA 91103

4. Generator's Phone (213) 283-9451

A. State Manifest Document Number: 88684769
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 110236
D. Transporter's Phone: 213 283-9451

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. WASTE OIL, N.O.S, COMBUSTIBLE LIQUID NA 1270 (REFRIGERANT OIL)	001	DM	00025	G	State 341; EPA/Other D001, F002
b.					State; EPA/Other
c.					State; EPA/Other
d.					State; EPA/Other

J. Additional Descriptions for Materials Listed Above
A) FOR DISPOSAL

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

15. Special Handling Instructions and Additional Information
PROFILE NUMBER B 11114
EMERGENCY PHONE NUMBER 213 283-9451

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

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

Printed/Typed Name: James O. Yours — Signature — Month Day Year: 04 12 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature — Month Day Year: 04 12 91

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John Hart — Signature — Month Day Year: 04 12 91

GENERATOR — TRANSPORTER — FACILITY

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

88684769

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

Do Not Write Below This Line

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

06/12/2001 "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

Ref: Shipper 12547
PO # 513173

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

STATE ID NUMBER 83494052

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON, INC. (Joe Welch)
2213-15 No. Rosemead Blvd.
South El Monte, CA 91733
AREA CODE/PHONE NUMBER 213/442-5633

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER

TRANSPORTER NO 1
GRAYCON, INC.
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 US DOT 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)	NA 9189	[illegible]	P	3	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

SPECIAL HANDLING INSTRUCTIONS
yield 469 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

MO DAY YR

Printed or typed full name and signature

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Jay Solomon
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO 05 DAY 01 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Jay Solomon
Printed or typed full name and signature
EPA ID NUMBER CAD042245001
DATE RECEIVED & ACCEPTED MO 05 DAY 01 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

05/31/2001 "ORIGINAL MANIFEST COPY"

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

MAY 18, 1983

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

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

JUL 6 1983

STATE ID NUMBER 83029843

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N. Rosemead Blvd.
S. El Monte, Ca.
AREA CODE/PHONE NUMBER 283-9451

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER CAX000046953

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

VEH. CONTAINER NO. 42507

EPA ID NUMBER CA DO 42245001

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH. CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.

EPA ID NUMBER CA DO 42245001

AREA CODE/PHONE NUMBER 698-0991

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	CONTAINER TYPE	WASTE CAT NO.	DISP METH.
R-11 (REFRIGERANT GAS N.O.S.) Non Flammable Gas	UN 1078	500	P	03	DM	311	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

SPECIAL HANDLING INSTRUCTIONS
Pulled 420 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.

MO DAY YR

Printed or typed full name and signature

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE REC'D & ACCEPTED MO 5 DAY 18 YR 83

Printed or typed full name and signature X Ray R. Wm 5-18-83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE REC'D & ACCEPTED MO DAY YR

Printed or typed full name and signature

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

Steve Simpson

Printed or typed full name and signature

EPA ID NUMBER CA DO 42245001

DATE RECEIVED & ACCEPTED MO 5 DAY 18 YR 83

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

06/13/2001 "ORIGINAL MANIFEST COPY"

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

88684769

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

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD 981 370 975
Manifest Document No.: 84769

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

3. Generator's Name and Mailing Address:
AVERY LABEL-GRAYCON
150 NORTH ORANGE GROVE BLVD., PASADENA, CA 91103

4. Generator's Phone: (213) 283-9451

A. State Manifest Document Number: 88684769

B. State Generator's ID:

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

C. State Transporter's ID: H0236

D. Transporter's Phone: 213 283-9451

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 Addr.:
OMEGA RECOVERY SERVICE
12504 E. WHITTIER BLVD
WHITTIER, CA 9 6 2
10. US EPA ID Number: CAD 042 245 001

G. State Facility ID: CAD042245001

H. Facility 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. WASTE OIL, N.O.S., COMBUSTIBLE LIQUID NA 1270 (REFRIGERANT OIL)	001	DM	00025	G	State 341; EPA/Other D001, F002
b.					State; EPA/Other
c.					State; EPA/Other
d.					State; EPA/Other

J. Additional Descriptions for Materials Listed Above:
A) FOR DISPOSAL

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

15. Special Handling Instructions and Additional Information:
PROFILE NUMBER B 11114
EMERGENCY PHONE NUMBER 213 283-9451

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

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

Printed/Typed Name: James O. Young
Signature:
Month Day Year: 04 24 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature:
Month Day Year: 04 24 91

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

FACILITY

19. Discrepancy Indication Space:

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19:
Printed/Typed Name: John Hayte
Signature:
Month Day Year: 04 24 91

Do Not Write Below This Line

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

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Shipper 18165

Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAX 40 00 4 6953

Manifest Document No.

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

A. State Manifest Document Number: 87118642

3. Generator's Name and Mailing Address
Graycon
c/o California Plaza, 5670 Wilshire, L.A, CA

4. Generator's Phone: 818 442-5633

B. State Generator's ID

C. State Transporter's ID: 103785

5. Transporter 1 Company Name: Omega Recovery Services

6. US EPA ID Number: CAD 0 4 22 4 50 0 1

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

10. US EPA ID Number: CAD 0 4 22 4 5 001

G. State Facility's ID: CAD 0 4 22 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	Waste No.
a. Hazardous Waste, Liquid NOS ORM-E NA 9189 (r-11)	6	DM	1/12010	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.

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: RICHARD BRYANT
Signature: Richard Bryant
Month Day Year: 10 31 1988

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 31 1988

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD
Signature: Frank Ford
Month Day Year: 10 31 1988

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802, WITHIN ONE HOUR OF SPILL

DHS 8022 A (1/87)
EPA 8700—22

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

INSTRUCTIONS ON THE BACK

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

Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C|A|D|9|8|1|3|7|5|9|7|5

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
J.C. PENNYS
THE CITY DRIVE MALL., ORANGE, CA

4. Generator's Phone (818 442-5633

A. State Manifest Document Number 8 8293707

B. State Generator's ID

5. Transporter 1 Company Name
OMEGA RECOVERY SERVICES

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

C. State Transporter's ID 9D4280

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

G. State Facility's ID C|A|D|0|4|2|2|4|5|9|9|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 (R-11)	0101 4	DIM	0101/610	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.

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: R. VAN DER AA — Signature: R. Van Der Aa — Month Day Year: 04 18 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J. Cirineo — Signature: Robert J. Cirineo — Month Day Year: 04 18 89

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 04 21 89

GENERATOR

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

8 8293707

DHS 6022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD981325975 | 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
J.C PENNEY
12215 VISTORY BLVD., NO. HOLLYWOOD, CA

4. Generator's Phone (818) 442-5633

A. State Manifest Document Number: 88677515
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD042224500
C. State Transporter's ID: 010387
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. WHITTEIR BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD042224500 1
G. State Facility's ID: CAD042224500 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 ORM-E NA 9189 (R-11)	002	DM	2100160	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.

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: N. DE ROSSETT | Signature: N. De Rossett | Month Day Year: 07 12 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Robert J Cirineo | Signature: [signature] | Month Day Year: 07 12 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: FRANK FORD | Signature: Frank Ford | Month Day Year: 07 12 89

GENERATOR — TRANSPORTER — FACILITY

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

DHS 8022 A (1/88)
700-22
(9-88) Previous editions are obsolete.

Do Not Write Below This Line

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

Please print or type. (Form designed for use on elite (12-pitch typewriter). and Front of Page 1 Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD000327080 Manifest Document No. 00001

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
JC PENNY CO. INC.
6131 ORANGETHORPE AVE
BUENA PARK, CA. 90624
FORMER: FIRESTONE SERVICE CTR.
7777 EDINGER AVE
HUNTINGTON BEACH, CA

4. Generator's Phone (714 523-6853

A. State Manifest Document Number: 89653379

B. State Generator's ID:

5. Transporter 1 Company Name: FALCON ENVIRONMENTAL

6. US EPA ID Number: CAD000048934

C. State Transporter's ID: 014052

D. Transporter's Phone: (213) 590-8531

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 CORPORATION
12504 WHITTIER BLVD
WHITTIER, CA. 90640

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. "RQ" WASTE HAZARDOUS SUBSTANCE, LIQUID, N.O.S. ORM-E NA 9188 (TRICHLOROETHANE)	002	DM	00110	G	State 343 / EPA/Other F001
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
WATER CONTAMINATED WITH SOLVENTS

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

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE CLOTHING
JOB# 20490234

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

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

Printed/Typed Name: Robert Ainesson Signature: Month Day Year: 03 30 90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: G L JONES Signature: Month Day Year: 04 16 90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Month Day Year:

19. Discrepancy Indication Space
NOTE: ONE DRUM WAS A LEAKER. HAD TO TRANSFER TO ANOTHER DRUM.

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

Printed/Typed Name: BILLY L. HANEY Signature: Month Day Year: 04 11 90

GENERATOR

TRANSPORTER

FACILITY

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

89653379

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

Do Not Write Below This Line

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

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD000327080 Manifest Document No. 000001

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
J. C. PENNEY CO. INC.
6131 ORANGETHORPE AVE.
BUENA PARK, CA 90624

FORMER: firestone service center
7777 edinger ave.
huntington beach

4. Generator's Phone (714) 523-6853

A. State Manifest Document Number 89661606

B. State Generator's ID

C. State Transporter's ID [redacted]

D. Transporter's Phone (213) 590-8531

5. Transporter 1 Company Name
FALCON ENVIRONMENTAL

6. US EPA ID Number CAD004893

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 CORPORATION
12504 WHITTIER BLVD.
WHITTIER, CA 90640

10. US EPA ID Number CAD042124501

G. State Facility's ID CAD042124501

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. "RQ" WASTE HAZARDOUS SUBSTANCE, LIQUID N.O.S. ORM-E NA9188 (TRICHLOROETHANE)	001	DM	00055	G	State 343 / EPA/Other F001
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
WATER CONTAMINATED WITH SOLVENTS

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

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE CLOTHING

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

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

Printed/Typed Name: ROBERT ARNESON — Signature — Month Day Year: 08 24 90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Willizm A Goldfinch — Signature — Month Day Year: 08 24 90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: R. Avalos — Signature — Month Day Year: 09 14 90

Do Not Write Below This Line

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

89661606

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

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

DRIVER: PLS. SEE MATT

State of California—Health and Welfare Agency

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A X 4 0 0 0 4 6 9 5 3

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
Graycon
C/O J. C. Penney, #8 City Blvd. East, Orange, Calif

4. Generator's Phone (714) 998-9700

A. State Manifest Document Number: 86544108

B. State Generator's ID: CAX400046953

5. Transporter 1 Company Name: Omega Recovery Services

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

C. State Transporter's ID: 701734

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: 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 NOS ORM-E NA 9189 (R-11)	004	DM	600	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 01

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: DAVID K BELL — Signature: K Bell — Month Day Year: 2 6 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIM BALTIERRA — Signature: Tim Baltierra — Month Day Year: 02 06 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 02 06 87

86544108

DHS 8022 A (11/85)
(EPA 8700—22)

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

all use Graycon ID #

generator_name	GRAYCON INC
lc_name:	Graycon, Inc. 1431
lc_calc_volume:	3.775 tons

manifest_number	manifest_quantity_ton	
83029843	0.25 tons	not sign by gen. ?
83212258	0.4 tons	
83494052	0.68805 tons	
86544108	0.3 tons	graycon c/o JC Penny ← Penny client + generator
87118642	0.6 tons	graycon c/o California Plaza ← client + gen. not temp
88293707	0.6672 tons	gen = JC Penny. but ID # = graycon 160 job decline not employee
88345399	0.3753 tons	
88614681	0.14 tons	
88677515	0.2502 tons	gen = JC Penny ID # graycon not employee
88684769	0.10425 tons	gen = Penny label id # = graycon

MAY 15 1983

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

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

JUL 6 1983

STATE ID NUMBER 830298A3

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

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N. Rosemead Blvd.
S. El Monte, Ca.

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER CAXGCG46755

AREA CODE/PHONE NUMBER 283-9451

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

VEH./CONTAINER NO. 142507

EPA ID NUMBER CA DO 4224500 1

TRANSPORTER NO. 2 (ALTERNATE TSD FACILITY)

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT/STORAGE OR DISPOSAL FACILITY
OMEGA CHEMICAL CORP.

EPA ID NUMBER CA DO 4224500 1

AREA CODE/PHONE NUMBER 698-0991

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT./VOL.	CONTAINER NO.	CONTAINER TYPE	WASTE CAT. NO.	DISP. METH.
R-11 (CHLORIFLUOROMETHANE) REFRIGERANT GAS N.O.S. Non Flammable Gas	UN 1078	1500	P	103	DOT	311	01

COMPONENTS	CONC. RANGE UPPER	MEAN	UNITS	

SPECIAL HANDLING INSTRUCTIONS
Applied 1199 lbs

I hereby certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to applicable regulations of the U.S. Department of Transportation and the EPA.

MO. DAY YR.

Printed or typed full name and signature

Continuation sheet (U.S. Mail only) attached

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF WASTES

DATE RECD. ACCEPTED MO. 5 DAY 16 YR. 83

Printed or typed full name and signature

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF WASTES

DATE RECD. ACCEPTED MO. DAY YR.

Printed or typed full name and signature

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous materials covered by manifest except as noted in discrepancy indication space above. Note: TSDF must complete waste analysis and discrepancy indication space on back.

EPA ID NUMBER CA DO 4224500 1

DATE RECEIVED/ACCEPTED MO. 6 DAY 8 YR. 83

Steve Sampson

Printed or typed full name and signature

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

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 83212258

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON
2213 N ROSEMEAD BLVD.
S. EL MONTE, CA.
AREA CODE/PHONE NUMBER 288-9551

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAX000014619513

TRANSPORTER NO. 1
GRAYCON

VEH./CONTAINER NO.
EPA ID NUMBER

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
[redacted]

V.EH./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

EPA ID NUMBER CAD041212415

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	18000	P	104	DM	211	011

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
R-11 guide 47766.

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 Jeff Young — MO. 03 DAY 22 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 Jeff Young — DATE REC'D & ACCEPTED MO. 3 DAY 22 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.
Printed or typed full name and signature

EPA ID NUMBER CAD042245991

DATE RECEIVED & ACCEPTED MO. 03 DAY 22 YR 84

FORM NO. DHS-8022A 11/82

THIS COPY TO DOHS WITHIN 15 DAYS

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
Ref: SK PPE 12547
Ab 513173

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

STATE ID NUMBER 83494052

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
GRAYCON, INC. (Joe Welch)
2213-15 No. Rosemead Blvd.
South El Monte, CA 91733
AREA CODE/PHONE NUMBER 213/442-5633

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER

TRANSPORTER NO 1
GRAYCON, INC.

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 US DOT 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)	NA 9189	[illegible]	P	3	DM	211	01

COMPONENTS	CONC. RANGE UPPER	LOWER	UNITS %	PPM

SPECIAL HANDLING INSTRUCTIONS
yield 469 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.

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
Jeff Young
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO 05 DAY 01 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Jay Solomon
Printed or typed full name and signature

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO. 05 DAY 01 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87957

DRIVER: PLS. SEE MATT

State of California—Health and Welfare Agency

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A X4 0 00 4 69 5B

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
Graycon
C/O J. C. Penney, #8 City Blvd. East, Orange, Calif

4. Generator's Phone (714) 998-9700

A. State Manifest Document Number: 86544108

B. State Generator's ID: CAX400046958

5. Transporter 1 Company Name: Omega Recovery Services

6. US EPA ID Number: C AD 04 2 24 5 00 1

C. State Transporter's ID: 701734

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: C A D 04 2 245 0 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	Waste No.
a. Hazardous Waste, Liquid NOS ORM-E NA 9189 (R-11)	004	DM	600	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 01

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: DAVID R BELL — Signature: D R Bell — Month Day Year: 12 6 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIM BALTIERRA — Signature: Tim Baltierra — Month Day Year: 12 06 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 12 9 87

86544108

DHS 8022 A (11/85)
(EPA 8700—22)

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Shipper 18165

Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C A X 4 0 0 0 4 6 9 5 3

Manifest Document No.

2. Page 1 of

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

A. State Manifest Document Number: 87118642

3. Generator's Name and Mailing Address
Graycon
c/o California Plaza, 5670 Wilshire, L.A, CA

B. State Generator's ID

4. Generator's Phone: 818 442-5633

5. Transporter 1 Company Name: Omega Recovery Services

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

C. State Transporter's ID: 803785

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

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	Waste No.
a. Hazardous Waste, Liquid NOS ORM-E NA 9189 (r-11)	6	DM	1/12010	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.

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: RICHARD T BRYANT — Signature: Richard Bryant — Month Day Year: 10 31 1988

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature: Javier Hernandez — Month Day Year: 10 31 1988

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 10 31 1988

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF AN EMERGENCY ON SITE, OTHER THAN SPILLS, CALL THE EMERGENCY HELP LINE

DHS 8022 A (1/87)
EPA 8700—22

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

INSTRUCTIONS ON THE BACK

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

Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C|A|D|9|8|1|3|7|5|9|7|5 — Manifest Document No.

2. Page 1 of 1

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

A. State Manifest Document Number: 8 8293707

3. Generator's Name and Mailing Address
J.C. PENNYS
THE CITY DRIVE MALL., ORANGE, CA

4. Generator's Phone (818 442-5633

B. State Generator's ID

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES

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

C. State Transporter's ID: 906280

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

G. State Facility's ID: C|A|D|0|4|2|2|4|5|9|9|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. State / EPA/Other
a. HAZARDOUS WASTE LIQUID N.O.S NA 9189 (R-11)	0101 4	DIM	0101/610	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.

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: R. VAN DER HA — Signature — Month Day Year: 04/21/89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Robert J CIRINEGNA — Signature — Month Day Year: 04/21/89

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: FRANK FORD — Signature — Month Day Year: 04/21/89

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

Do Not Write Below This Line

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

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 D

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

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD 981 375 975
Manifest Document No. 415319
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
GRAYCON
2213-15 ROSEMEAD BLVD.,SOUTH EL MONTE,CA.
4. Generator's Phone (818) 442-5633

A. State Manifest Document Number 88345399
B. State Generator's ID

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID 208452
D. Transporter's Phone 213/698-0991

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER,CA. 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID CAD042245001
H. Facility's Phone 213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL N.O.S., COMBUSTIBLE LIQUID NA 1270	0102	DIM	000090	G	State 221 / EPA/Other N/A
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
a.-Material for disposal

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

15. Special Handling Instructions and Additional Information
Profile#B11731
*Emergency#818/442-5633

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

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

Printed/Typed Name: Santino Mercuri — Signature — Month Day Year 1/1/25/91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature — Month Day Year 1/1/25/91

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John HALTE — Signature — Month Day Year 1/1/27/91

Do Not Write Below This Line

GENERATOR

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

88345399

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

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

07-25-89 SHIPPER 15408

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. CAD981375375 — 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
GRAYCON
2213-15 NORTH ROSEMEAD BLVD., SOUTH EL MONTE, CA 91733

A. State Manifest Document Number: 88614681

B. State Generator's ID

4. Generator's Phone: (213) 283-9451

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES

6. US EPA ID Number: CAD042245001

C. State Transporter's ID: 010384

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	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S TOXIC LIQUID (R-11) NA 9189	001	DM	001140	P	State / EPA/Other
b. HAZARDOUS WASTE LIQUID N.O.S TOXIC LIQUID (R-11) NA 9189	001	DM	001140	P	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. 01 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: MARIO JIMENEZ — Signature: [signature] — Month Day Year: 10 10 89

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature: [signature] — Month Day Year: 10 10 89

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

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD — Signature: [signature] — Month Day Year: 10 10 89

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

88614681

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

Do Not Write Below This Line

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

07/29/2003 A

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CA0981325975
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
J.C PENNEY
12215 VISTORY BLVD., NO. HOLLYWOOD, CA

A. State Manifest Document Number 88677515
B. State Generator's ID

4. Generator's Phone (818) 442-5633

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD042224500
C. State Transporter's ID 210384
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. WHITTEIR BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD042224500 1
G. State Facility's ID CAD042224500 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 ORM-E NA 9189 (R-11)	002	DM	0190016	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.

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: N. DE POSSETT
Signature: N. De Posset
Month Day Year: 07 21 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J Cirwlson
Signature: Robert J Cirwlson
Month Day Year: 07 21 89

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: FRANK FORD
Signature: Frank Ford
Month Day Year: 07 21 89

GENERATOR

Do Not Write Below This Line

(8022 A (1/88)
13700-22
(9-88) Previous editions are obsolete.

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

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD 981 376 975
Manifest Document No.: 88684769
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address:
AVERY LABEL-GRAYC N
150 NORTH ORANGE ROVE BLVD., PASADENA, CA 91103
4. Generator's Phone: (213) 283-451

A. State Manifest Document Number: 88684769
B. State Generator's ID:
C. State Transporter's ID: H0236
D. Transporter's Phone: 213 283-9451

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
7. Transporter 2 Company Name:
8. US EPA ID Number:
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 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. WASTE OIL, N.O.S, COMBUSTIBLE LIQUID NA 1270 (REFRIGERANT OIL)	001	DM	00025	G	State 341; EPA/Other D001, F002
b.					State; EPA/Other
c.					State; EPA/Other
d.					State; EPA/Other

J. Additional Descriptions for Materials Listed Above:
A) FOR DISPOSAL

K. Handling Codes for Wastes Listed Above:
a. 021
b.
c.
d.

15. Special Handling Instructions and Additional Information:
PROFILE NUMBER B 11114
EMERGENCY PHONE NUMBER 213 283-9451

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

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

Printed/Typed Name: James O. Young
Signature:
Month Day Year: 04 24 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature:
Month Day Year: 04 24 91

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

19. Discrepancy Indication Space:

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19:
Printed/Typed Name: John Hatt
Signature:
Month Day Year: 04 24 91

GENERATOR — TRANSPORTER — FACILITY

88684769

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

Do Not Write Below This Line

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