| | |
|---|---|
| generator_name | MAGNETIC DATA, INC. |
| lc_name: | Magnetic Data California, LLC 2050 |
| lc_calc_volume: | 5.2751 tons |

| manifest_number | manifest_quantity_ton |
|---|---|
| 88529050 | 0.68805 tons |
| 89513168 | 1.5012 tons |
| 89919114 | 0.60465 tons |
| 89919121 | 0.4587 tons |
| 89919128 | 0.68805 tons |
| 89919134 | 0.18765 tons |
| 90033200 | 1.14675 tons |

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

88529050

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. CIAD981215212A11 Manifest Document No. H 311518A

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
MAGNETIC DATA INC.
475 PINE AVE. GOLETA, CA 93117

4. Generator's Phone (805) 683-5353

A. State Manifest Document Number: 88529050

B. State Generator's ID: HAH0316-0107587

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES

6. US EPA ID Number: CIAD014122415001 1

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
1250 E. WHITTIER BLVD.
WHITTIER, CA 90602

10. US EPA ID Number: CIAD014122415001 1

G. State Facility's ID: CIAD014122415001 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 N.O.S. ORM-E NA 9189 | 01013 | DM | 001 1615 | G | State 211 / EPA/Other F001 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A.) TRICHLOROTRIFLOUROMETHANE 75-95 %
REMAINDER: METHANOL, ISOPROPANOL, NITROMETHANE, SURFACTANTS, WATER, OIL & DIRT

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

15. Special Handling Instructions and Additional Information
AVOID BREATHING VAPORS / WEAR 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.

GENERATOR

Printed/Typed Name: RICHARD DEAN — Signature: Richard Dean — Month Day Year: 10 5 1 2 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature: Javier Hernandez — Month Day Year: 10 5 1 1 2 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: 10 5 1 1 2 89

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. 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. CAD918215229114
Manifest Document No. 311718A
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
MAGNETIC DATA INC
475 PINE AVE. GOLETA, CA 93117
4. Generator's Phone (805) 683-5353

A. State Manifest Document Number 89513168
B. State Generator's ID HAHQ3160109587
C. State Transporter's ID 019384
D. Transporter's Phone (213) 698-0991

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD042824501011
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
1250 E. WHITTIER BLVD.
WHITTIER, CA 90602
10. US EPA ID Number CAD042824501011
G. State Facility's ID CAD042824501011
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 | 6 | DM | 330 | G | State 211 EPA/Other F001 |
| b. WASTE OIL NOS CALIFORNIA REGULATED ONLY | 001 | DM | 010 | G | State 221 EPA/Other N/A |
| c. | | | | | State EPA/Other |
| d. | | | | | State EPA/Other |

J. Additional Descriptions for Materials Listed Above
A) FREON - 60-90% REMAINDER: METHANOL, ISOPROPANOL, NITROMETHANE, SURFACTANTS, WATER, OIL, & DIRT / B) OIL

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

15. Special Handling Instructions and Additional Information
AVOID BREATHING VAPORS / WEAR 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: RICHARD DEAN
Signature: Richard Dean
Month Day Year: 10/11/1989

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10/11/1989

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: 10/11/1989

Do Not Write Below This Line

8051 3168

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

GENERATOR — TRANSPORTER — FACILITY

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

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

07/29/2003 A

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.: CIAD918125242911 Manifest Document No.: 4310141910
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
MAGNETIC DATA INC.
475 PINE AVE. GOLETA, CA 93117
4. Generator's Phone (805) 683-5353

A. State Manifest Document Number: 89919114
B. State Generator's ID: HIAP03160195817
C. State Transporter's ID: 012455
D. Transporter's Phone: (213) 698-0991

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD014212451001
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
1250 E. WHITTIER BLVD.
WHITTIER, CA 90602
10. US EPA ID Number: CAD014212451001
G. State Facility's ID: CAD014212451001
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 (F001) | 003 | DM | 001415 | G | State 211 / EPA/Other F001 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A.) FREON

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

15. Special Handling Instructions and Additional Information
GLOVES & GOGGLES

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 DEAN
Signature: Richard Dean
Month Day Year: 04 11 29 10

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 04 11 29 10

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: 04 11 29 10

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

89919114

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. 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. CAD982152291 Manifest Document No. 3106910
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
MAGNETIC DATA INC.
475 PINE AVE. GOLETA, CA 93117
4. Generator's Phone ( )

A. State Manifest Document Number 89919121
B. State Generator's ID HAHQ3160075187

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD042245001
C. State Transporter's ID
D. Transporter's Phone (213) 698-0991

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

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
1250 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 NOS ORM-E NA9189 (F001) | 002 | DM | 001110 | G | State 211 / EPA/Other F001 |
| b | | | | | State / EPA/Other |
| c | | | | | State / EPA/Other |
| d | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A) TRICHLOROTRIFLOUROETHANE

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

15. Special Handling Instructions and Additional Information
GLOVES & GOGGLES

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 DEAN
Signature: Richard Dean
Month Day Year: 060790

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 060790

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: 060790

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

89919121

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

Do Not Write Below This Line

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

07/29/2003 A

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. CA0982522914 — Manifest Document No. 310890

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
MAGNETIC DATA INC.
475 PINE AVE GOLETA, CA 93117

4. Generator's Phone (805) 683 5353

A. State Manifest Document Number: 89919128

B. State Generator's ID: HAHQ360095871

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES

6. US EPA ID Number: CAD042245001

C. State Transporter's ID: [redacted] 110236

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
1250 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 NOS ORM-E NA9187 (F001) | 003 | DM | 0016 | G | State 211 / EPA/Other F001 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A) TRICHOROTRIFLOUROETHANE

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

15. Special Handling Instructions and Additional Information
GLOVES AND GOGGLES

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: CURTIS DALEY — Signature: Curtis Daley — Month Day Year: 08 16 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature: Javier Hernandez — Month Day Year: 08 16 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: N. JAY Solomon — Signature: N. Jay Solomon — Month Day Year: 08 16 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

89919128

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. 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. CAD981525914 Manifest Document No. 310920
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
MAGNETIC DATA INC.
475 PINE AVE. GOLETA, CA 93117
4. Generator's Phone (805) 683-5353

A. State Manifest Document Number 89919134
B. State Generator's ID HAHQ360091587
C. State Transporter's ID 110236
D. Transporter's Phone (213) 698-0991
E. State Transporter's ID
F. Transporter's Phone

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD041224500 1
7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
1250 E WHITTIER BLVD.
WHITTIER, CA 90602
10. US EPA ID Number: CAD041224500 1

G. State Facility's ID CAD041224500 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 NOS ORM-E NA9187 (F001) | 001 | DM | 00043 | G | State 211 / EPA/Other F001 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A) TRICHLOROTRIFLOUROETHANE

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

15. Special Handling Instructions and Additional Information
GLOVES & GOGGLES

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: CHRIS ROSSI — Signature — Month Day Year: 09 21 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature — Month Day Year: 09 21 90

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

FACILITY

19. Discrepancy Indication Space

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

89919134

GENERATOR

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 9-30-91)
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. CIAD981215229 Manifest Document No. 31011910

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
MAGNETIC DATA INC.
475 PINE AVE. GOLETA, CA 93117

4. Generator's Phone (805) 683-5353

A. State Manifest Document Number 90033200

B. State Generator's ID HIAH213160.09.5817

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CIAD014212145001

C. State Transporter's ID 012455

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
1250 E. WHITTIER BLVD.
WHITTIER, CA 90602
10. US EPA ID Number: CIAD014212145001

G. State Facility's ID CIAD014212145001

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 (F001) | 005 ~~0014~~ | DM | 00275 ~~0012200~~ | G | State 211 / EPA/Other F001 |
| b | | | | | State / EPA/Other |
| c | | | | | State / EPA/Other |
| d | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A) FREON - 60-90% REMAINDER: METHANOL, ISOPROPANOL, NITROMETHANE, SURFACTS, WATER, OIL & DIRT. PROFILE # 10418

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

15. Special Handling Instructions and Additional Information
GLOVES & GOGGLES

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 DEAN — Signature: Richard Dean — Month Day Year: 10 1 1 90

17. Transporter 1 Acknowledgement of Receipt of Materials
TRANSPORTER — Printed/Typed Name: JAVIER HERNANDEZ — Signature: Javier Hernandez — Month Day Year: 10 1 1 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
FACILITY — Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 10 1 1 90

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

90033200

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