SDMS DOCID 2181760

[redacted]

Exhibit E

United States Compliance

Hazardous Materials Business Plan

KIK Custom Products

KIK SoCal

March 2007

Prepared By:

US Compliance Corporation

Exhibit E

United States Compliance Corporation
301 Carlson Parkway • Suite 200 • Minnetonka, MN 55305 • Phone 952.252.3000 • Fax 952.252 3001
www uscompliance.com

Table of Contents

1 Business Activities

2 Hazardous Materials Inventory

3 Hazardous Waste Generator Information

4 Site Plan and Storage Map

5 Contingency & Emergency Plan

UNIFIED PROGRAM (UP) FORM
BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID #	1	9		0	4	9		6	0	0	0	9	1		1

EPA ID # (Hazardous Waste Only) 2
CAD051482784

BUSINESS NAME (Same as Facility Name of DBA-Doing Business As) 3

KIK International So Cal

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility...		If Yes, please complete these pages of the UPCF.. .
A. HAZARDOUS MATERIALS		
Have on site (for any purpose) hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☒ YES ☐ NO 4	4 HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION 4 CONSOLIDATED CONTINGENCY PLAN (Section I and Site Map(s)) 4 TRAINING PLAN
B. UNDERGROUND STORAGE TANKS (USTs)		
1. Own or operate underground storage tanks?	☐ YES ☒ NO 5	4UST FACILITY 4UST TANK (one page per tank)
2. Intend to upgrade existing or install new USTs?	☐ YES ☒ NO 6	4UST FACILITY 4UST TANK (one per tank) 4UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank)
3. Need to report closing a UST?	☐ YES ☒ NO 7	4UST TANK (closure portion –one page per tank)
C. ABOVE GROUND PETROLEUM STORAGE TANKS (APSTs)		
Own or operate APSTs above this threshold: ---the total capacity for the facility is greater than 1,320 gallons?	☐ YES ☒ NO 8	NO FORM REQUIRED TO CUPAs
D. HAZARDOUS WASTE		
1. Generate hazardous waste?	☒ YES ☐ NO 9	4 EPA ID NUMBER – provide at the top of this page 4 As a generator, answer YES to Item E2b and complete Waste Generator Form
2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES ☒ NO 10	4 RECYCLABLE MATERIALS REPORT
3. Treat hazardous waste on site?	☐ YES ☒ NO 11	4 ONSITE HAZARDOUS WASTE TREATMENT – FACILITY 4 ONSITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
4. Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES ☒ NO 12	4 CERTIFICATION OF FINANCIAL ASSURANCE
5. Consolidate hazardous waste generated at a remote site?	☐ YES ☒ NO 13	4 REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
6. Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?	☐YES ☒ NO 14	4 HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
E. LOCAL REQUIREMENTS		15
1. REGULATED SUBSTANCES		
Have Regulated Substances (RS) including Extremely Hazardous Substances (EHS) stored on site at greater than the threshold planning quantities established by the California Accidental Release Program (Cal ARP) ?	☒YES ☐ NO 15a	In addition to Hazardous Materials requirements, complete: 4 Regulated Substance Registration 4 Risk Management Plan (when required)
2. OTHER REQUIREMENTS		
a. Have hazardous materials stored on site at or above a threshold amount established by a CUPA's or PA's local ordinance?	☐YES ☒ NO 15b	4 Consult local CUPA or PA for added reporting requirements
b. Required by a CUPA or PA to provide other information?	☒YES ☐ NO 15c	4 Waste Generator Form (LA County)

OFFICIAL USE ONLY	UP FORM	HW	HM	ARP	AST	UST	TP	CUPA	PA

UNIFIED PROGRAM (UP) FORM

BUSINESS OWNER/OPERATOR IDENTIFICATION (LACoCUPA Form 2730)

☐ NEW BUSINESS ☐ OUT OF BUSINESS ☒ REVISE/UPDATE (EFFECTIVE / /)

I. IDENTIFICATION

ACILITY ID# 1 9 0 4 9 6 0 0 0 9 1	BEGINNING DATE 100	ENDING DATE 101	2006/12/31
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3	KIK SoCal	BUSINESS PHONE 102	(562) 946-6427
BUSINESS SITE ADDRESS 103	9028 Dice Road		
CITY	Santa Fe Springs 104 C	ZIP CODE	90670 105
DUN & BRADSTREET	051482784 106	SIC CODE (4 digit #)	2841 107
COUNTY	Los Angeles 108	UNINCORPORATED ☐ Yes ☒ No	133a.
BUSINESS OPERATOR NAME 109	Bob Brown	BUSINESS OPERATOR PHONE 110	(562) 946-6427

II. BUSINESS OWNER

OWNER NAME 111	KIK Custom Products	OWNER PHONE 112	(905) 660-0444
OWNER MAILING ADDRESS 113	33 MacIntosh Blvd.		
CITY	Concord 114	STATE Ontario 115	ZIP CODE L4K4L5 116

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117	Bob Brown	CONTACT PHONE 118	(562) 946-6427
CONTACT MAILING ADDRESS 119	9028 Dice Road		
CITY	Santa Fe Springs 120	STATE CA 121	ZIP CODE 90670 122

IV. EMERGENCY CONTACTS

PRIMARY		SECONDARY	
NAME 123	Ray Wetter	NAME 128	Bob Brown
TITLE 124	EHS Manager	TITLE 129	General Manager
BUSINESS PHONE 125	(562) 906-2215	BUSINESS PHONE 130	(562) 906-2244
24-HOUR PHONE 126	(562) 865-3995	24-HOUR PHONE 131	(310) 612-2001
PAGER # 127		PAGER # 132	
E-MAIL ADDRESS (if any) 133b		E-MAIL ADDRESS (if any) 133b	bbrown@kikcorp.com

V. ADDITIONAL LOCALLY COLLECTED INFORMATION 133

FEDERAL TAX IDENTIFICATION NUMBER	522151205	133c
BUSINESS OWNER'S NAME AND DATE OF BIRTH	PUBLICLY OWNED	
BUSINESS OWNER'S DRIVER'S LICENSE NUMBER AND STATE	PUBLICLY OWNED	

MAILING/ BILLING INFORMATION

ADDRESS 133d	CITY 133e	STATE 133f	ZIP CODE 133g
9028 Dice Road	Santa Fe Springs	CA	90670

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134	NAME OF DOCUMENT PREPARER 135
	3-26-07	US Compliance Corp.
NAME OF SIGNER (pnnt) 136	TITLE OF SIGNER 137	
Bob Brown	General Manager	

OFFICIAL USE ONLY	UP Form	HW	HM	ARP	APST	UST	TP	CUPA	PA
SPECTOR	DISTRICT	DATE OF INSP	DIVISION	BATTALION	STATION				

Unified Program (UP) Form
CONSOLIDATED CONTINGENCY PLAN

COVER PAGE

FACILITY IDENTIFICATION			
BUSINESS NAME 3 KIK SoCal			FACILITY ID # 1 CAD051482784
SITE ADDRESS 103 9028 Dice Road		CITY 104 Santa Fe Springs	ZIP CODE 105 90670

The Consolidated Contingency Plan provides businesses a format to comply with the emergency planning requirements of the following three written hazardous materials emergency response plans required in California:

- Hazardous Materials Business Plan (HSC Chapter 6.95 Section 25504 (b) and 19 CCR Sections 2729-2732),
- Hazardous Waste Generator Contingency Plan (22 CCR Section 66264.52), and,
- Underground Storage Tank Emergency Response Plan and Monitoring Program (23 CCR Sections 2632 and 2641).

This format is designed to reduce duplication in the preparation and use of emergency response plans at the same facility, and to improve the coordination between facility response personnel and local, state and federal emergency responders during an emergency. Use the chart below to determine which sections of the Consolidated Contingency Plan need to be completed for your facility. If you are unsure as to which programs your facility is subject to, refer to the Business Activities Page.

PROGRAMS	SECTION(S) TO BE COMPLETED
Hazardous Materials Business Plan (HMBP)	Cover Page, Section I, and Site Map(s)
Hazardous Waste Generator (HWG)	Cover Page, Section I, and Site Map(s)
Underground Storage Tank (UST)	Cover Page, Sections I and II, and Site Map(s)
HMBP, HWG, UST	Cover Page, Sections I and II, and Site Map(s)

A copy of the plan shall be submitted to your local CUPA and at least one copy of the plan shall be maintained at the facility for use in the event of an emergency and for inspection by the local agency. Describe below where a copy of your Contingency Plan, including the hazardous material inventories and Site Map(s), is located at your business:

Inside main office entrance.

PLAN CERTIFICATION	
I certify under penalty of law that I have personally examined and I am familiar with the information provided by this plan and to the best of my knowledge the information is accurate, complete, and true.	
Printed Name of Owner/ Operator Bob Brown	Title of Owner/Operator General Manager
Signature of Owner/ Operator	Date 3-26-07

We appreciate the effort of local businesses in completing these plans and will assist in every possible way. If you have any questions, please contact your local CUPA or PA.

OFFICIAL USE ONLY		DATE RECEIVED		REVIEWED BY		
DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

Unified Program (UP) Form
CONSOLIDATED CONTINGENCY PLAN

SECTION I: BUSINESS PLAN AND CONTINGENCY PLAN

I. FACILITY IDENTIFICATION

BUSINESS NAME		FACILITY ID # 1
KIK SoCal	3	CAD051482784

SITE ADDRESS	CITY	ZIP CODE
9028 Dice Road 103	Santa Fe Springs 104	90670 105

II. EMERGENCY CONTACTS

PRIMARY		SECONDARY	
NAME	123	NAME	128
Ray Wetter		Bob Brown	
TITLE	124	TITLE	129
EHS Manager		General Manager	
BUSINESS PHONE	125	BUSINESS PHONE	130
(562) 906-2215		(562) 906-2244	
24-HOUR PHONE	126	24-HOUR PHONE	131
(562) 865-3995		(310) 612-2001	
PAGER #	127	PAGER #	132

III. EMERGENCY RESPONSE PLANS AND PROCEDURES

A. Notifications

Your business is required by State Law to provide an immediate verbal report of any release or threatened release of a hazardous material to local fire emergency response personnel, this Unified Program Agency (CUPA or PA), and the Office of Emergency Services. If you have a release or threatened release of hazardous materials, immediately call:

FIRE/PARAMEDICS/POLICE/SHERIFF
PHONE: 911

AFTER the local emergency response personnel are notified, you shall then notify this Unified Program Agency and the ffice of Emergency Services.

Local Unified Program Agency: (323) 890-4317
State Office of Emergency Service: *(800) 852-7550*
National Response Center: (800) 424-8802

Information to be provided during Notification:

- Your Name and the Telephone Number from where you are calling.
- Exact address of the release or threatened release.
- Date, time, cause, and type of incident (e.g. fire, air release, spill etc.)
- Material and quantity of the release, to the extent known.
- Current condition of the facility.
- Extent of injuries, if any.
- Possible hazards to public health and/ or the environment outside of the facility.

B. Emergency Medical Facility

List the local emergency medical facility that will be used by your business in the event of an accident or injury caused by a release or threatened release of hazardous material.

HOSPITAL/CLINIC:	PHONE NO:
Presbyterian Hospital	562-698-0811
ADDRESS:	
12401 Washington Blvd.	
CITY:	ZIP CODE:
Whittier	90602

OFFICIAL USE ONLY		DATE RECEIVED		REVIEWED BY		
√	BN	STA	OTHER	DISTRICT	CUPA	PA

Unified Program (UP) Form
CONSOLIDATED CONTINGENCY PLAN

SECTION I: BUSINESS PLAN AND CONTINGENCY PLAN

C. Private Emergency Response

DOES YOUR BUSINESS HAVE A PRIVATE ON-SITE EMERGENCY RESPONSE TEAM? ☒ Yes ☐ No

If yes, provide an attachment that describes what policies and procedures your business will follow to notify your on-site emergency response team in the event of a release or threatened release of hazardous materials.

CLEANUP/DISPOSAL CONTRACTOR

List the contractor that will provide cleanup services in the event of a release.

NAME OF CONTRACTOR:	PHONE NO:
Circle Green Environmental Inc.	626-398-4400
ADDRESS: 732 North Lake Avenue	
CITY: Pasadena	ZIP CODE: 91104

D. Arrangements With Emergency Responders

If you have made special (i.e. contractual) arrangements with any police department, fire department, hospital, contractor, or State or local emergency response team to coordinate emergency services, describe those arrangements on the lines below:

Circle Green Environmental is available for KIK SoCal to contact at any time in the event of a spill or release and will aid in the containment and clean up process.

E. Evacuation Plan

1. The following alarm signal(s) will be used to begin evacuation of the facility *(check all which apply)*:

☐ Verbal ☐ Telephone *(including cellular)* ☐ Alarm System ☐ Public Address System ☒ Intercom
☐ Pagers ☐ Portable Radio ☐ Other *(specify)*:

2. ☒ Evacuation map is prominently displayed throughout the facility.

3. ☒ Individual(s) responsible for coordinating evacuation including spreading the alarm and confirming the business has been evacuated:

Ray Wetter, Bob Brown

F. Earthquake Vulnerability

Identify areas of the facility where releases could occur or would require immediate inspection or isolation because of the vulnerability to earthquake related ground motion.

☐ Hazardous Waste/ Hazardous Materials Storage Areas ☐ Production Floor ☐ Process Lines
☐ Bench/ Lab ☐ Waste Treatment ☒ Other: Tank Farm

Identify mechanical systems where releases could occur or would require immediate inspection or isolation because of the vulnerability to earthquake related ground motion.

☐ Utilities ☐ Sprinkler Systems ☐ Cabinets ☐ Shelves
☐ Racks ☒ Pressure Vessels ☐ Gas Cylinders ☒ Tanks
☒ Process Piping ☐ Shutoff Valves ☐ Other:

SECTION I: BUSINESS PLAN AND CONTINGENCY PLAN

3. Emergency Procedures

Briefly describe your business standard operating procedures in the event of a release or threatened release of hazardous materials:

1. **PREVENTION** (prevent the hazard) - Describe the kinds of hazards associated with the hazardous materials present at your facility. What actions would your business take to prevent these hazards from occurring? You may include a discussion of safety and storage procedures.

The largest potential for incident is a chlorine rgas release. Other types of incidents could involve caustic spills, fires, or an earthquake.

KIK SoCal completes regular inspection & routine maintenance of the Cl_2 system.

KIK SoCal performs regular Hazardous Material inspections. Each of the employees at KIK SoCal is trained in the proper handling of Hazardous Materials and waste streams generated at KIK SoCal.

For more detailed information, please see the attached Contingency Plan

2. **MITIGATION** (reduce the hazard) - Describe what is done to lessen the harm or the damage to person(s), property, or the environment, and prevent what has occurred from getting worse or spreading. What is your immediate response to a leak, spill, fire, explosion, or airborne release at your business?

All personnel will be thoroughly familiar with the alarm system and the evacuation plan with alternate routes to get out of the building in case of an emergency.

Chlorine operators can complete emergency system shutdowns & install chlorine C-Kits for valve leaks.

The chlorine system is automated to sound an alarm when Cl_2 is detected at low levels and shut down at higher levels.

The Cl_2 system diverts Cl_2 through a scrubber tank upon a potential emergency release.

Designated evacuation areas have been assigned for emergencies

Please see the attached contingency plan for more detailed information.

3. **ABATEMENT** (remove the hazard) - Describe what you would do to stop and remove the hazard. How do you handle the complete process of stopping a release, cleaning up, and disposing of released materials at your facility?

The Emergency Response Team and KIK SoCal follow control and decontamination procedures if the hazards are not too great or does not put the Emergency Response Team in danger.

Emergency cleanup contractors such as Circle Green Environmental are notified in the case of a spill to aid in the cleanup process

The Santa Fe Fire Department is familiar with the KIK SoCal facility in the case of a leak or spill at the facility.

There is a protocol in place for emergencies such as chemical releases at KIK SoCal.

A chlorine scrubber system capable of treating a full rail car of Cl2 has been installed as an emergency chlorine gas removal system.

Please see the attached contingency plan for more information.

SECTION I: BUSINESS PLAN AND CONTINGENCY PLAN

IV. Emergency Equipment

22 CCR, Section 66265.52(e) [as referenced by Section 66262.34(a)(3)] requires that emergency equipment at the facility be listed. Completion of the following Emergency Equipment Inventory Table meets this requirement.

EMERGENCY EQUIPMENT INVENTORY TABLE

1. Equipment Category	2. Equipment Type	3. Location *	4. Description**
Personal Protective, Equipment, Safety Equipment, and First Aid Equipment	☒ Cartridge Respirators		
	☒Chemical Monitoring Equipment *(describe)* Gas Monitor	Haz Mat Room	
	☐ Chemical Protective Aprons/Coats		
	☒ Chemical Protective Boots	Crash Carts	4 pairs of boots in 4 Crash Carts
	☒Chemical Protective Gloves	Haz Mat Room	Glove rings, chemical resist, rubber, liners.
	☒ Chemical Protective Suits *(describe)*	Haz Mat Room	Level "A", "B", and "C" suits.
	☐Face Shields		
	☒ First Aid Kits/Stations *(describe)*	Crash Carts	First Aid Kits located in twelve different Crash Carts
	☒ Hard Hats		
	☒Plumbed Eye Wash Stations	Throughout Facility	
	☐ Portable Eye Wash Kits *(i.e. bottle type)*		
	☒ Respirator Cartridges *(describe)*	Haz Mat Room	Acid Gas – 0 Gray and Yellow, Ammonia - Green
	☒ Safety Glasses/Splash Goggles	Throughout Facility	
	☒ Safety Showers	Throughout Facility	
	☒ Self-Contained Breathing Apparatuses (SCBA)	Haz Mat Room, Tank Farm, Maintenance Room	Scott SCBA's with communication. Spares also available.
	☐ Other *(describe)*		
Fire Extinguishing Systems	☒ Automatic Fire Sprinkler Systems	Throughout Facility	Automatic – Fire Emergency and Chlorine Alarms
	☒ Fire Alarm Boxes/Stations	Throughout Facility	Automatic
	☒ Fire Extinguisher Systems *(describe)*	See Map	
	☐ Other *(describe)*		
Spill Control Equipment and Decontamination Equipment	☐ Absorbents (describe)		
	☐ Berms/Dikes (describe)		
	☐ Decontamination Equipment (describe)		
	☐ Emergency Tanks (describe)		
	☐ Exhaust Hoods		
	☐ Gas Cylinders Leak Repair Kits (describe)		
	☐ Neutralizers (describe)		
	☐ Overpack Drums		
	☐ Sumps (describe)		
	☒ Other (describe) Emergency "C" Kit	Haz Mat Room, CI-2 CAR	
Communications and Alarm	☒ Chemical Alarms (describe)	Tank Farm	Chlorine Gas Sensors
	☒ Intercoms/ PA Systems		
	☒ Portable Radios	Haz Mat Room	Radios with batteries and Communication Cords

Systems	☒ Telephones	Throughout Facility	
	☐ Underground Tank Leak Detection Monitors		
	☐ Other (describe)		
Additional Equipment (Use Additional Pages if Needed.)			
	Emergency Response Book – Job Descriptions	Haz Mat Room, Tank Farm OFC	
	SfSFD Response Info Book	Haz Mat Room, Maintenance OFC	
	Crash Cart	Haz Mat Room	Crash cart with decontamination equipment available for spills or releases.

* *Use the Location Codes (LC) from the Site Map(s) prepared for your Contingency Plan.*

** *Describe the equipment and its capabilities. If applicable, specify any testing/maintenance procedures/intervals. Attach additional pages, numbered appropriately, if needed.*

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 9 of 65

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm, Tank #'s 6 & 7

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

I. CHEMICAL INFORMATION

CHEMICAL NAME 205

Caustic Soda 50%

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Caustic Soda 50%

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b. MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212 | CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 20000 215

FED HAZARD CATEGORIES (Check all that apply) 216

☐ a FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10000	230000		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221

* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER 223

☒ a ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 50.00% 226	Sodium Hydroxide 227	☐Yes 228	☐Yes	1310-73-2 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

II. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm, Northeast Side of Building

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

Chlorine

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Chlorine

EHS* ☒ Yes ☐ No 208 | RS* ☒Yes ☐No 246a

CAS# 209

7782-50-5

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐b. MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐b. LIQUID ☒ c GAS 214

LARGEST CONTAINER 180000 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b. REACTIVE ☒ c PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
540000	900000		

UNITS* (Check one item only) ☐a. GALLONS ☐b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE: 365 222

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k BOX ☐ l CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☒ q. RAIL CAR ☐ r. OTHER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☐ a AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 11 of 65

III. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm, Tank #27

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1 | MAP# (optional) 203 | GRID# (optional) 204

III. CHEMICAL INFORMATION

CHEMICAL NAME 205: Ammonia Aqueous

TRADE SECRET ☐ Yes ☒ No 206 — If Subject to EPCRA, refer to instructions

COMMON NAME 207: Ammonia Aqueous

EHS* ☐ Yes ☒ No 208 | RS* ☒Yes ☐No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒b. MIXTURE ☐ c WASTE 211 | RADIOACTIVE ☐Yes ☒No 212 | CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b. LIQUID ☐ c. GAS 214 | LARGEST CONTAINER 6000 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
29,992	44,988		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221 — * If EHS, amount must be in pounds

DAYS ON SITE: 365 222

STORAGE CONTAINER ☒ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l CYLINDER ☐ m. GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p TANK WAGON ☐ q. RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 29.00% 226	Ammonia 227	☒Yes 228	☒Yes	7664-41-7 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 12 of 65

IV. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm Tank #s 23,25,26,33 & 48 and Warehouse

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

IV. CHEMICAL INFORMATION

CHEMICAL NAME 205

Household Ammonia

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Household Ammonia

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 6200 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20000	28000		

UNITS* (Check one item only) ☒a. GALLONS ☐b. CUBIC FEET ☐ c. POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE: 365 222

STORAGE CONTAINER 223

☒ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g. CARBOY ☐ h. SILO ☐ i FIBER DRUM ☐ j. BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☒ n PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 2.50% 226	Aqua Ammonia 227	☒Yes 228	☒Yes	1336-21-6 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 13 of 65

V. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm, WW & Tank #13

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

V. CHEMICAL INFORMATION

CHEMICAL NAME 205

Hydrogen Peroxide 50%

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Hydrogen Peroxide 50%

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10000 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☒ b REACTIVE ☐ c PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5000	10000		

UNITS* (Check one item only) ☒a. GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d. TONS 221

* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER 223

☒ a ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1	50.00% 226	Hydrogen Peroxide 227	☐Yes 228	☐Yes	7722-84-1 229
2	230	231	☐Yes 232	☐Yes	233
3	234	235	☐Yes 236	☐Yes	237
4	238	239	☐Yes 240	☐Yes	241
5	242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

VI. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm, Tank 15

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID #	1	9	[illegible]	0	4	9	[illegible]	6	0	0	0	9	1	1

MAP# (optional) 203

GRID# (optional) 204

VI. CHEMICAL INFORMATION

CHEMICAL NAME 205

Surfonic N-102

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Surfonic N-102

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 12000 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5000	12000		

UNITS* (Check one item only) ☒a. GALLONS ☐b. CUBIC FEET ☐ c POUNDS ☐ d. TONS 221

* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER 223

☒ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j BAG ☐ k. BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r OTHER

STORAGE PRESSURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226 100.0%	Poly(oxy-1,2-ethanediyl), alpha-(nonylphenol-omega-hydroxy- 227	☐Yes 228	☐Yes	9016-45-9 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 Page 15 of 65

VII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm, Northeast Side of Building

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

VII. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propane

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propane

EHS* ☐ Yes ☒ No 208

RS* ☒Yes ☐No 246a

CAS# 209
74-98-6

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐b. LIQUID ☒ c GAS 214

LARGEST CONTAINER 18231 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10950	18231		

UNITS* (Check one item only) ☐a. GALLONS ☒b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE 222
365

STORAGE CONTAINER
☒ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p TANK WAGON ☐ q. RAIL CAR ☐ r. OTHER 223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 97.00% 226	Propane 227	☐Yes 228	☒Yes	74-98-6 229
2 1.00% 230	Propylene 231	☐Yes 232	☒Yes	155-07-1 233
3 1.00% 234	Butane 235	☐Yes 236	☒Yes	106-97-8 237
4 1.00% 238	Ethane 239	☐Yes 240	☒Yes	74-84-0 241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 16 of 65

VIII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Maintenance Shop

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

VIII. CHEMICAL INFORMATION

CHEMICAL NAME 205

Acetylene

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Acetylene

EHS* ☐ Yes ☒ No 208 | RS* ☒Yes ☐No 246a

CAS# 209

74-86-2

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 130 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☒ b REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
200	390		

UNITS* (Check one item only) ☐a. GALLONS ☒b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r. OTHER 223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 90.00% 226	Propane 227	☐Yes 228	☒Yes	74-98-6 229
2 5.00% 230	Propylene 231	☐Yes 232	☒Yes	115-07-1 233
3 2.50% 234	n-Butane 235	☐Yes 236	☒Yes	106-97-8 237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

IX. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Maintenance Shop

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

IX. CHEMICAL INFORMATION

CHEMICAL NAME 205

Oxygen

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Oxygen

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

7782-44-7

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐b MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☐b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 249 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
350	747		

UNITS* (Check one item only) ☐a. GALLONS ☒b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h SILO ☒ l. CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 18 of 65

X. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Maintenance Shop

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 [illegible] 0 4 9 [illegible] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

X. CHEMICAL INFORMATION

CHEMICAL NAME 205

Argon

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Argon

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

7440-37-1

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐b LIQUID ☒ c GAS 214

LARGEST CONTAINER 250 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
150	250		

UNITS* (Check one item only) ☐a. GALLONS ☒b. CUBIC FEET ☐ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER

☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h SILO ☐ i. FIBER DRUM ☐ j BAG ☐ k. BOX ☒ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r. OTHER 223

STORAGE PRESSURE ☐ a AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

XI. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Blowmold Department

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XI. CHEMICAL INFORMATION

CHEMICAL NAME 205

Multi Gear Oil API GL-S SAE 85 W150

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Multi Gear Oil API GL-S SAE 85 W150

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b. MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
200	330		

UNITS* (Check one item only) ☒a. GALLONS ☐b. CUBIC FEET ☐ c POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222: 365

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o TOTE BIN
☒ d. STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 94.00% 226	Solvent Refined Residual Oil 227	☐Yes 228	☐Yes	64742-01-4 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 20 of 65

XII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Blowmold Department

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [illegible] 0 4 9 [illegible] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XII. CHEMICAL INFORMATION

CHEMICAL NAME 205

Nitrogen

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Nitrogen

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

7727-37-9

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐b. MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☐b LIQUID ☒c GAS 214

LARGEST CONTAINER 304 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2128	3648		

UNITS* (Check one item only) ☐a. GALLONS ☒b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE: 365 222

STORAGE CONTAINER

☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m. GLASS BOTTLE ☐ q RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j BAG ☐ n. PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d STEEL DRUM ☐ h. SILO ☒ l. CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☐ a AMBIENT ☒ b. ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 21 of 65

XIII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm (Bag/Drum Storage Area)

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XIII. CHEMICAL INFORMATION

CHEMICAL NAME 205
Soda Ash (Sodium Carbonate, Anhydrous)

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Soda Ash

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐b. MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐b. LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
775	3070		

UNITS* (Check one item only) ☐a. GALLONS ☐b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☒ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 22 of 65

XIV. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Blowmold Department

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XIV. CHEMICAL INFORMATION

CHEMICAL NAME 205

Anti-Freeze & Summer Coolant

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Anti-Freeze & Summer Coolant

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
33	55		

UNITS* (Check one item only) ☒a. GALLONS ☐b. CUBIC FEET ☐ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f. CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c. TANK INSIDE BUILDING ☐ g CARBOY ☐ k. BOX ☐ o TOTE BIN
☒ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226 100.0%	Ethylene Glycol 227	☐Yes 228	☐Yes	107-21-1 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 23 of 65

XV. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm, Tank #'s 1,2,3, 5, and Warehouse

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XV. CHEMICAL INFORMATION

CHEMICAL NAME 205

Sodium Hypochlorite Bleach

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Sodium Hypochlorite Bleach

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b. MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒b. LIQUID ☐ c GAS 214

LARGEST CONTAINER 22500 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
208000	208000		

UNITS* (Check one item only) ☒a. GALLONS ☐b. CUBIC FEET ☐ c POUNDS ☐ d. TONS 221

* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER

☒ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☐ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER ☐ m. GLASS BOTTLE ☒ n PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 11.00% 226	Sodium Hypochlorite 227	☐Yes 228	☐Yes	7681-52-9 229
2 1.50% 230	Sodium Hydroxide 231	☐Yes 232	☐Yes	1310-73-2 233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 Page 24 of 65

XVI. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm Compressor Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XVI. CHEMICAL INFORMATION

CHEMICAL NAME 205

Waste Oil

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Waste Oil

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐b MIXTURE ☒c WASTE 211

RADIOACTIVE ☐Yes ☒No 212 CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐c GAS 214

LARGEST CONTAINER 300 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
30	300	300	221

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE 222

365

STORAGE CONTAINER

☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☐ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☒ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 25 of 65

XVII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Waste Water Treatment Drum Storage Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 [illegible] 0 4 9 [illegible] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XVII. CHEMICAL INFORMATION

CHEMICAL NAME 205
T-10FS Hydrochloric Acid Solution

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Hydrochloric Acid

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
110	220		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☒ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 1 00% 226	Hydrochloric Acid 227	☐Yes 228	☐Yes	7647-01-0 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 26 of 65

XVIII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm Flammable Storage Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XVIII. CHEMICAL INFORMATION

CHEMICAL NAME 205

Bleach & Ammonia Product Fragrances

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Perfumes

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
185	330		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE 222

365

STORAGE CONTAINER 223

☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☒ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 27 of 65

XIX. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Flammable Drum Storage Area Site SE Lot

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XIX. CHEMICAL INFORMATION

CHEMICAL NAME 205

Bleach & Ammonia Fragrances

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Perfumes

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
385	770		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE 222

365

STORAGE CONTAINER

☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☒ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)
(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 28 of 65

XX. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Flammable Drum Storage Area Site SE Lot

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XX. CHEMICAL INFORMATION

CHEMICAL NAME 205
Phosphoric Acid

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Phosphoric Acid

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209
7664-38-2

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
575	700		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☐ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☒ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 75.00% 226	Phosphoric Acid 227	☐Yes 228	☐Yes	7664-38-2 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 29 of 65

XXI. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Back Up Generator Tank

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXI. CHEMICAL INFORMATION

CHEMICAL NAME 205

Diesel Fuel No 2

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Diesel Fuel No. 2

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a PURE ☐b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 110 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
55	220		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d. TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE 222

365

STORAGE CONTAINER

☒ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☐ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j BAG ☐ k. BOX ☐ l. CYLINDER ☐ m GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 100.0% 226	Diesel Fuel No 2 227	☐Yes 228	☐Yes	68476-34-6 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Boiler Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXII. CHEMICAL INFORMATION

CHEMICAL NAME 205
BWT-OD-PPSA CR3057

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Boiler Treatment

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
30	55		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☒ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l CYLINDER ☐ m. GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 20.00% 226	Sodium Hydroxide 227	☐Yes 228	☐Yes	1310-73-2 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 31 of 65

XXIII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm Boiler Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXIII. CHEMICAL INFORMATION

CHEMICAL NAME 205

Potassium Hydroxide

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Caustic Potash – Liquid 50%

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 12000 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
8000	12000		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE 222

365

STORAGE CONTAINER 223

☒ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☐ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 50.00% 226	Potassium Hydroxide 227	☐Yes 228	☐Yes	1310-58-3 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXIV.FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank #45 In Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [illegible] 0 4 9 [illegible] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXIV. CHEMICAL INFORMATION

CHEMICAL NAME 205

Potassium Hypochlorite Bleach 7-15%

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Potassium Hypochlorite Bleach

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 6000 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2000	6000		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE 222

365

STORAGE CONTAINER

☒ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☐ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1	11 00% 226	Potassium Hypochlorite 227	☐Yes 228	☐Yes	7778-66-7 229
2	230	231	☐Yes 232	☐Yes	233
3	234	235	☐Yes 236	☐Yes	237
4	238	239	☐Yes 240	☐Yes	241
5	242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)
(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 33 of 65

XXV. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXV. CHEMICAL INFORMATION

CHEMICAL NAME 205
Chelating Liquid 100

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Versene 100

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b. MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
4785	6582		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE: 365 222

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☒ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 37 00% 226	Tetrasodium salt of *Ethylenedediaminetetraacetic acid* 227	☐Yes 228	☐Yes	64-02-08 229
2 1.00% 230	Disodium Ethylenediaminediacetate 231	☐Yes 232	☐Yes	38011-25-5 233
3 1.00% 234	Trisodium Ethylenediaminetracetate 235	☐Yes 236	☐Yes	19019-43-3 237
4 1.00% 238	Trisodium Nitrolotriacetate 239	☐Yes 240	☐Yes	5064-31-3 241
5 1 00% 242	Sodium Hydroxide 243	☐Yes 244	☐Yes	1310-73-2 245
6 3 00%	Sodium Glycolate	☐Yes	☐Yes	2836-32-0

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)
(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

XXVI.FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 . 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXVI. CHEMICAL INFORMATION

CHEMICAL NAME 205
DGC WinSurf

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Aqueous Synthetic Detergent/Chelate

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☐ d ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3800	8460		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365 222

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☒ d STEEL DRUM ☐ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226 7.50%	Aminocarboxylic Acid 227	☐Yes 228	☐Yes	60-00-4 229
2 230 2.00%	Potassium Hydroxide 231	☐Yes 232	☐Yes	1310-58-3 233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☒ADD ☐DELETE ☐REVISE REPORTING YEAR 2006 200 | Page 35 of 65

XXVII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Storage Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXVII. CHEMICAL INFORMATION

CHEMICAL NAME 205

Dantogard DMDMHydantoin

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

DMDM Hydantoin

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
55	110		

UNITS* (Check one item only) ☒a GALLONS ☐b CUBIC FEET ☐ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE 222

365

STORAGE CONTAINER (Check one item only) 223

☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☐ d STEEL DRUM ☒ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1	1.5% 226	Formaldehyde 227	☒Yes 228	☒Yes	50-00-0 229
2	* 230	Dihydroxymethyl-5 231	☐Yes 232	☐Yes	6440-58-0 233
3	* 234	Hydroxymethyl-5 235	☐Yes 236	☐Yes	27636-82-4 237
4	* 238	5,5 Dimethylhydantion 239	☐Yes 240	☐Yes	77-71-4 241
5	2 6% 242	3-Iodo-2-propynyl butyl carbomate 243	☐Yes 244	☐Yes	55406-53-6 245
6	4 5%	1,3-Butylene Glycol	☐Yes	☐Yes	107-83-0

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

*- The sum of the three asterisked components is approximately 39 5% These three components, along with Formaldehyde, are present as an equilibrium mixture The total available Formaldehyde moiety in this product is 13.6%, of which up to 0 09% is present as free Formaldehyde in solution

If EPCRA, *Please Sign Here*

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

XXVIII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Storage Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXVIII. CHEMICAL INFORMATION

CHEMICAL NAME 205
FMB 1210-8

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
FMB 1210-8

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
820	1640		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE. 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l. CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 34 00% 226	Alkylbenzyldimethylammonium CL 227	☐Yes 228	☐Yes	8001-54-5 229
2 50.00% 230	Didecyl Dimethyl Ammonium CL 231	☐Yes 232	☐Yes	7173-51-5 233
3 12 50% 234	Ethanol / Ethyl Alchohol 235	☐Yes 236	☐Yes	64-117-5 237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 37 of 65

XXIX.FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Storage Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXIX.CHEMICAL INFORMATION

CHEMICAL NAME 205
Calfoam ES-603

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Anionic Surfactant

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1500	9000		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f. CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o. TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 60.00% 226	Sodium Lauryl Ether Sulfate 227	☐Yes 228	☐Yes	9004-82-4 229
2 14.00% 230	Ethyl Alcohol 231	☐Yes 232	☐Yes	64-17-5 233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

XXX. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Storage Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [illegible] 0 4 9 [illegible] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXX. CHEMICAL INFORMATION

CHEMICAL NAME 205

Stepanate SXS

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Hydrotrope

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2050	8200		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds.

DAYS ON SITE 222

365

STORAGE CONTAINER ☐ a ABOVE GROUND TANK ☐ b UNDERGROUND TANK ☐ c TANK INSIDE BUILDING ☐ d STEEL DRUM ☒ e PLASTIC/NONMETALLIC DRUM ☐ f CAN ☐ g CARBOY ☐ h SILO ☐ i FIBER DRUM ☐ j BAG ☐ k BOX ☐ l CYLINDER ☐ m GLASS BOTTLE ☐ n PLASTIC BOTTLE ☐ o TOTE BIN ☐ p TANK WAGON ☐ q RAIL CAR ☐ r OTHER 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 41 00% 226	Sodium Xylenesulphonate 227	☐Yes 228	☐Yes	1300-72-7 229
2 1 00% 230	Sodium Sulfate 231	☐Yes 232	☐Yes	7757-82-6 233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXXI.FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Storage Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

XXXI.CHEMICAL INFORMATION

CHEMICAL NAME 205
Glycol Ether DB

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Glycol Ether

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a PURE ☐b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1900	7672		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE. 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 99 00% 226	Diethylene Glycol Monobutyl Ether 227	☐Yes 228	☐Yes	112-34-5 229
2 1.50% 230	Ethylene Glycol Monobutyl Ether 231	☐Yes 232	☐Yes	111-76-2 233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXXII. FACILITY INFORMATION

SINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

..K SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 [illegible] 0 4 9 [illegible] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Sodium Chloride TopFlo

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Sodium Chloride TopFlo

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a SOLID ☐b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2250	4050		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXXIII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

Sodium Chloride Select

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Sodium Chloride Select

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a SOLID ☐b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
31685	43700		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE. 222

365

STORAGE CONTAINER

☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m. GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n. PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 Page 42 of 65

XXXIV. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Antifoam XFO30

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Antifoam XFO30

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
285	550		

UNITS* (Check one item only) ☐a GALLONS ☐b. CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

TORAGE NTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXXV. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Tomadol ® 91-6

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Detergent Range Alcohol Ethoxylate

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209
68439-46-3

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a PURE ☐ b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒ b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) 216
☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1100	4400		

UNITS* (Check one item only) 221 ☐a. GALLONS ☑b CUBIC FEET ☒ c. POUNDS ☐ d TONS
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER 223
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j. BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON

STORAGE PRESSURE 224 ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE 225 ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXXVI. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Coconut Diethanolamide

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Calamide C (Ninol 40-CO)

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARDOUS CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2400	4730		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 82.00% 226	Coco Diethanolamide 227	☐Yes 228	☐Yes	68603-42-9 229
2 10.00% 230	Glycerine 231	☐Yes 232	☐Yes	56-18-5 233
3 8.00% 234	Diethanolamine 235	☐Yes 236	☐Yes	111-42-2 237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXXVII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

KIK SoCal

CHEMICAL LOCATION 201

Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1 MAP# (optional) 203 GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

Accosoft 550-PG

TRADE SECRET ☐ Yes ☒ No 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Accosoft 550-PG

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
26540	51817		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221

* If EHS, amount must be in pounds

DAYS ON SITE 222

365

STORAGE CONTAINER

☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 85 00% 226	Methyl Tallow diethylene triamine condensate 227	☐Yes 228	☐Yes	68410-69-5 229
2 7 50% 230	Diethylene Glycol 231	☐Yes 232	☐Yes	111-46-6 233
3 5.00% 234	Propylene Glycol 235	☐Yes 236	☐Yes	57-55-6 237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

XXXVIII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3

JK SoCal

CHEMICAL LOCATION 201: Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202: ☐ YES ☒ NO

FACILITY ID # 202: 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205: Ucarcide 50 Antimicrobial

TRADE SECRET ☐ Yes ☒ No 206 — If Subject to EPCRA, refer to instructions

COMMON NAME 207: Ucarcide 50 Antimicrobial

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☒ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
685	1377		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222: 365

STORAGE CONTAINER 223
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g. CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON

STORAGE PRESSURE 224: ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 50.00% 226	Glutaraldehyde 227	☐Yes 228	☐Yes	111-30-8 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

✓	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XXXIX. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
FIC 200

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
FIC 200

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a SOLID ☐b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
440	930		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k. BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 48 of 65

XL. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Amorphous Alumina Silicate

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Harborlite H-700

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209
130885-09-5

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a PURE ☐b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a SOLID ☐b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
4250	7740		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k. BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY | DATE RECEIVED | REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200

XLI. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 [redacted] 0 4 9 [redacted] 6 0 0 0 9 1 1 MAP# (optional) 203 GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Magnesium Chloride

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Magnesium Chloride

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 7706-30-3 209

*If EHS or RS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a PURE ☐b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a SOLID ☐b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1050	2330		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	☐Yes 228	☐Yes	229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 50 of 65

XII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1 | MAP# (optional) 203 | GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Bio-Soft D-40

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Bio-Soft D-40

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211 | RADIOACTIVE ☐Yes ☒No 212 | CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214 | LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
9500	19133		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221 | DAYS ON SITE. 365 222
* If EHS, amount must be in pounds

CONTAINER/STORAGE
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j. BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k. BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l. CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1	35.00% 226	Sodium dodecylbenzenesulfonate 227	☐Yes 228	☐Yes	25155-30-0 229
2	3 00% 230	Sodium xylenesulphonate 231	☐Yes 232	☐Yes	1300-72-7 233
3	1 00% 234	Dodecyl benzene - Ln 235	☐Yes 236	☐Yes	123-01-3 237
4	1 00% 238	Sodium sulfate 239	☐Yes 240	☐Yes	7757-82-6 241
5	242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 | Page 51 of 65

XIII. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1 MAP# (optional) 203 GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Citric Acid Granular

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Citric Acid Granular

EHS* ☐ Yes ☒ No 208 RS* ☐Yes ☒No 246a

CAS# 77-92-9 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a PURE ☐b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a SOLID ☐b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
810	1300		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q. RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k. BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1	226	227	☐Yes 228	☐Yes	229
2	230	231	☐Yes 232	☐Yes	233
3	234	235	☐Yes 236	☐Yes	237
4	238	239	☐Yes 240	☐Yes	241
5	242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY DATE RECEIVED REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 Page 52 of 65

XLIV. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Bio-Terge AS-40

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Bio-Terge AS-40

EHS* ☐ Yes ☒ No 208

RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211

RADIOACTIVE ☐Yes ☒No 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1675	3456		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE: 365 222

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c. TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 40 00% 226	Sodium (C14-16) olefin sulfonate 227	☐Yes 228	☐Yes	68439-57-6 229
2 230	231	☐Yes 232	☐Yes	233
3 234	235	☐Yes 236	☐Yes	237
4 238	239	☐Yes 240	☐Yes	241
5 242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

☐ADD ☐DELETE ☒REVISE REPORTING YEAR 2006 200 |

XLV. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
KIK SoCal

CHEMICAL LOCATION 201
Tank Farm Area

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # 1 9 0 4 9 6 0 0 0 9 1 1 | MAP# (optional) 203 | GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Opacifier E305

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Lytron 305

EHS* ☐ Yes ☒ No 208 | RS* ☐Yes ☒No 246a

CAS# 209

*If EHS or RS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a PURE ☒b MIXTURE ☐ c WASTE 211 | RADIOACTIVE ☐Yes ☒No 212 | CURIES 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☒b LIQUID ☐ c GAS 214 | LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a FIRE ☐ b REACTIVE ☐ c PRESSURE RELEASE ☒ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
360	900		

UNITS* (Check one item only) ☐a GALLONS ☐b CUBIC FEET ☒ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE. 222
365

STORAGE CONTAINER
☐ a ABOVE GROUND TANK ☒ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAIL CAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d STEEL DRUM ☐ h SILO ☐ l CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1	1 60% 226	Nonylphenol, sulfated and ethoxylated 227	☐Yes 228	☐Yes	68649-55-8 229
2	230	231	☐Yes 232	☐Yes	233
3	234	235	☐Yes 236	☐Yes	237
4	238	239	☐Yes 240	☐Yes	241
5	242	243	☐Yes 244	☐Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM
CalARP PROGRAM REGULATED SUBSTANCE REGISTRATION

THIS PAGE IS TO BE COMPLETED FOR A STATIONARY SOURCE THAT HANDLES A REGULATED SUBSTANCE (RS) IN A PROCESS AT OR ABOVE THE THRESHOLD QUANTITY. REGULATED SUBSTANCES (INCLUDING FEDERAL LISTED AND STATE LISTED REGULATED SUBSTANCES) MUST BE REGISTERED FOR THE PURPOSE OF COMPLYING WITH THE Cal ARP (CALIFORNIA ACCIDENTAL RELEASE PREVENTION) PROGRAM THE OWNER OR OPERATOR SHALL COMPLETE A HAZARDOUS MATERIALS INVENTORY FORM AND A REGISTRATION FOR EACH REGULATED SUBSTANCE PER EACH PROCESS.

REASON FORM IS BEING SUBMITTED ☒ UPDATE ☐ CORRECTION ☐ DE-REGISTRATION ☐ WITHDRAWAL			247
BUSINESS NAME KIK SoCal			3
FACILITY ID# 1 19049600091	USEPA FACILITY ID # 2 CAD051482784	PROGRAM LEVEL ☐ 1 ☐ 2 ☒ 3	246c
NAME OF CORPORATE PARENT COMPANY 246d KIK Custom Products		DUN & BRADSTREET 249112814	106
PERSON RESPONSIBLE FOR RMP (First Name, Last Name) Ray Wetter	TITLE EHS Manager	E-MAIL ADDRESS (Optional)	246e
PARENT COMPANY E-MAIL ADDRESS (Optional) 246f	COMPANY HOMEPAGE ADDRESS (Optional)		246g
NAME OF RMP PREPARER Ray Wetter	PHONE NUMBER 562-946-6427		246h
RMP PREPARER MAILING ADDRESS 246i 9028 Dice Road, Santa Fe Springs, CA 90670	PHONE NUMBER FOR PUBLIC INQUIRIES (Optional)		246j
LATITUDE 246k 33°57'25"	LONGITUDE 246l -118°03'59"	METHOD USED TO OBTAIN LATITUDE AND LONGITUDE EPA TRI Facility Siting Tool	246m
LOCATION DESCRIPTION 246n Southeast Corner of Los Angeles County	NUMBER OF EMPLOYEES 246o 75	PROCESS NAICS 325611	107a
LEPC COMMITTEE (Optional) 246p	OSHA VOLUNTARY PROTECTION PROGRAM STATUS (Optional)		246q
DOES THE FACILITY HAVE SUBSTANCES LISTED IN 40 CFR 355 APPENDIX A (EHS)? ☒YES ☐ NO 208	DO ANY PROCESSES REQUIRE A CLEAN AIR ACT TITLE V OPERATING PERMIT? ☐YES ☒NO 246r	PERMIT NO 246s	
IS FACILITY SUBJECT TO 29CFR 1910 119/CCR 8 SEC 5189(PSM) ? ☒YES ☐ NO 246t	LAST SAFETY INSPECTION DATE 8/2/06 AGENCY Cal OSHA		246u
CHEMICAL NAME 205 Chlorine		CAS# 7782-50-5	209
MAXIMUM DAILY AMOUNT 218a 900000		UNITS IN POUNDS 900000	221
PROCESS DESCRIPTION KIK SoCal manufactures private label household bleach A tank car containing chlorine is piped into a continuous processing system where it is converted into sodium hypochlorite (bleach)			246v
PRINCIPAL EQUIPMENT Railcar, Emergency Scrubber System, Powell bleach skid (processing unit)			246w

CERTIFICATION

I, the owner or operator of the aforementioned business, hereby certify that the registration information provided above is true, accurate, and complete to the best of my knowledge based upon reasonable inquiry. I am fully aware that this certification executed on the date indicated below is made under penalty of perjury under the laws of the State of California.

OWNER/OPERATOR NAME Bob Brown 246x	OWNER/OPERATOR TITLE Plant Manager	246y
OWNER/OPERATOR SIGNATURE	DATE 3-26-07	246z

UNIFIED PROGRAM (UP) FORM
HAZARDOUS WASTE GENERATOR

BUSINESS NAME: KIK SoCal			3
FACILITY ID # 1 19049600091	NO. OF EMPLOYEES: 133b 75	EPA ID # 2 CAD051482784	

I. TYPE OF GENERATOR

A

PLEASE CHECK THE FOLLOWING BOXES THAT APPLY (Check no more than one box per column)

	RCRA GENERATOR (FEDERAL WASTE)	NON –RCRA GENERATOR (CALIFORNIA ONLY WASTE)
LARGE QUANTITY GENERATOR (>1000 KG HAZARDOUS WASTE PER MONTH)	☐	☐
SMALL QUANTITY GENERATOR (>100 KG BUT <1000 KG HAZARDOUS WASTE PER MONTH)	☐	☒
CONDITIONALLY EXEMPT SMALL QUANTITY GENERATOR (< 100 KG HAZARDOUS WASTE PER MONTH)	☒	☐

II. WASTE STREAM IDENTIFICATION

PLEASE COMPLETE THE TABLE BELOW. SEE INSTRUCTIONS FOR CODES AND EXPLANATION

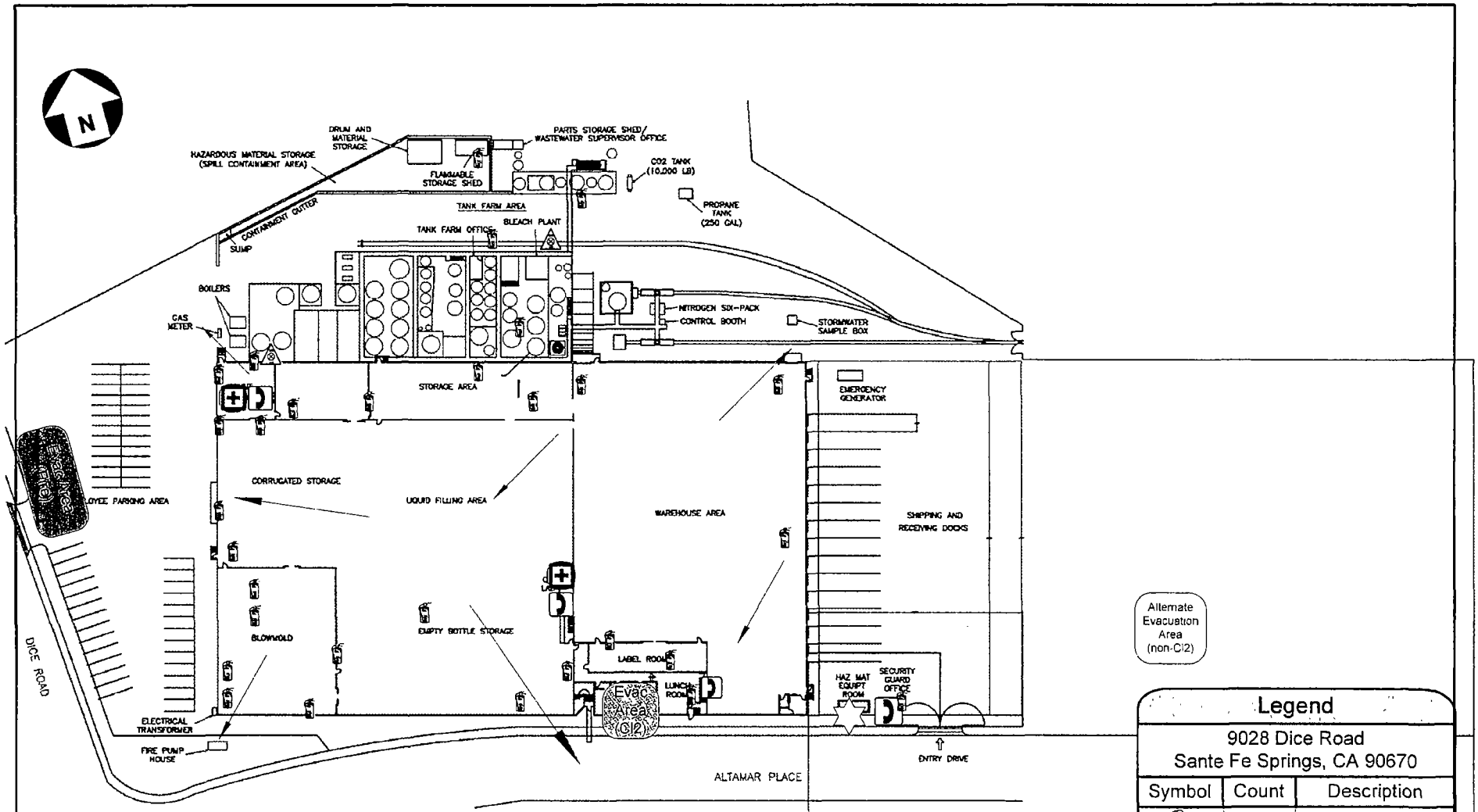
PROCESS B	WASTE DESCRIPTION C	WASTE ID D	AMOUNT PER YEAR E	STORAGE METHOD F	DISPOSAL METHOD G
Maintenance	Oily Pads	352	8800 lbs	D	D
Maintenance	Used Oil	221	300 Gal	C	D

I certify that the information provided herein is true and accurate to the best of my knowledge

OWNER/OPERATOR NAME H	OWNER/OPERATOR TITLE I
Bob Brown	Plant Manager
OWNER/OPERATOR SIGNATURE	DATE 3-26-07 J

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY	
CUPA	PA	DISTRICT	INSPECTOR

KIK SoCal Emergency Map



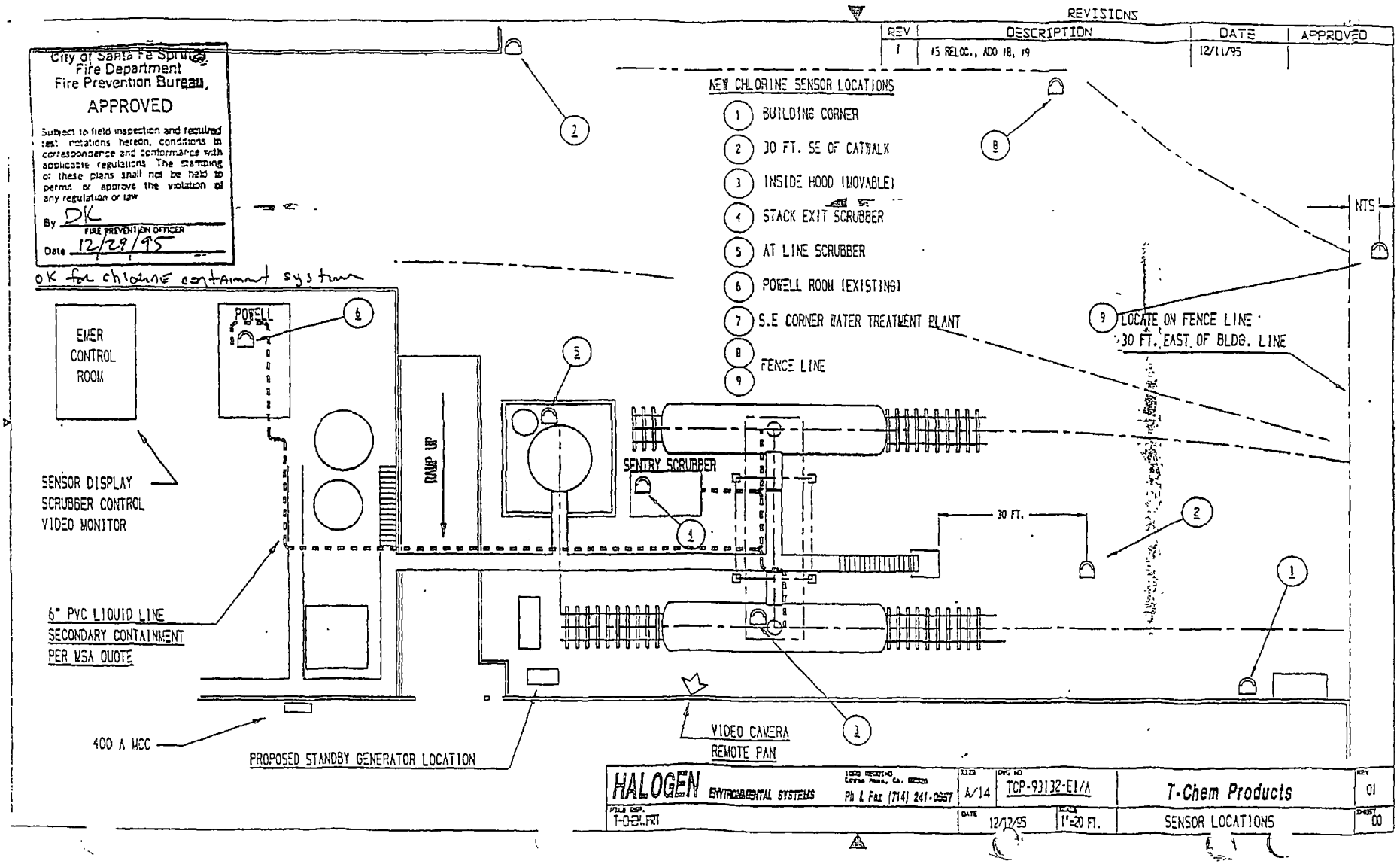
Legend

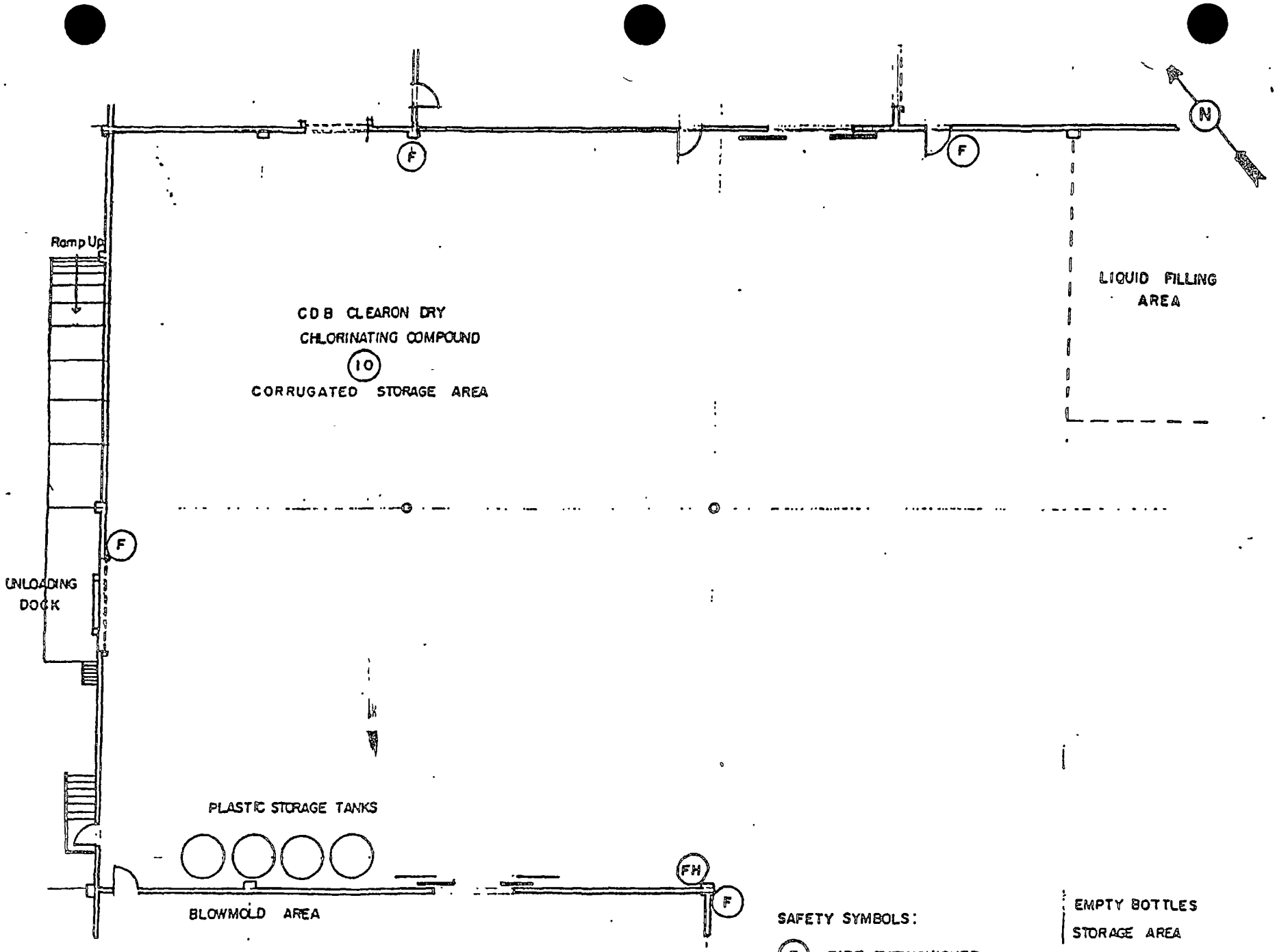
9028 Dice Road
Sante Fe Springs, CA 90670

Symbol	Count	Description
	1	Fire Evac
	1	Cl2 Evac
	2	First Aid
	1	Hazmat Spill Kit
	4	Telephone
	30	Fire Extinguisher
	2	Gas Shutoff

Scale 1/8" 8'
Created March 1, 2007

Adjacent Property Use Area is industrial with the sole exception of a residence located on the south side of the facility


REVISIONS
REV | DESCRIPTION | DATE | APPROVED
1 | 15 RELOC., ADD 18, 19 | 12/11/95
City of Santa Fe Springs
Fire Department
Fire Prevention Bureau
APPROVED
Subject to field inspection and required test notations hereon, conditions in correspondence and conformance with applicable regulations. The stamping of these plans shall not be held to permit or approve the violation of any regulation or law
By DK
FIRE PREVENTION OFFICER
Date 12/29/95
OK for chlorine containment system
NEW CHLORINE SENSOR LOCATIONS
1 BUILDING CORNER
2 30 FT. SE OF CATWALK
3 INSIDE HOOD (MOVABLE)
4 STACK EXIT SCRUBBER
5 AT LINE SCRUBBER
6 POWELL ROOM (EXISTING)
7 S.E CORNER WATER TREATMENT PLANT
8 FENCE LINE
9 LOCATE ON FENCE LINE 30 FT. EAST OF BLDG. LINE
NTS
EMER CONTROL ROOM
POWELL
RAMP UP
SENTRY SCRUBBER
30 FT.
SENSOR DISPLAY
SCRUBBER CONTROL
VIDEO MONITOR
6" PVC LIQUID LINE
SECONDARY CONTAINMENT
PER MSA QUOTE
400 A MCC
PROPOSED STANDBY GENERATOR LOCATION
VIDEO CAMERA
REMOTE PAN
HALOGEN ENVIRONMENTAL SYSTEMS
Ph & Fax (714) 241-0657
A/14
TCP-93132-E1/A
T-Chem Products
01
T-CHEM.PRT
12/12/95
1"=20 FT.
SENSOR LOCATIONS
00



PLAN (CORRUGATED STORAGE)

SCALE : 1/16" = 1'-0"

SAFETY SYMBOLS:

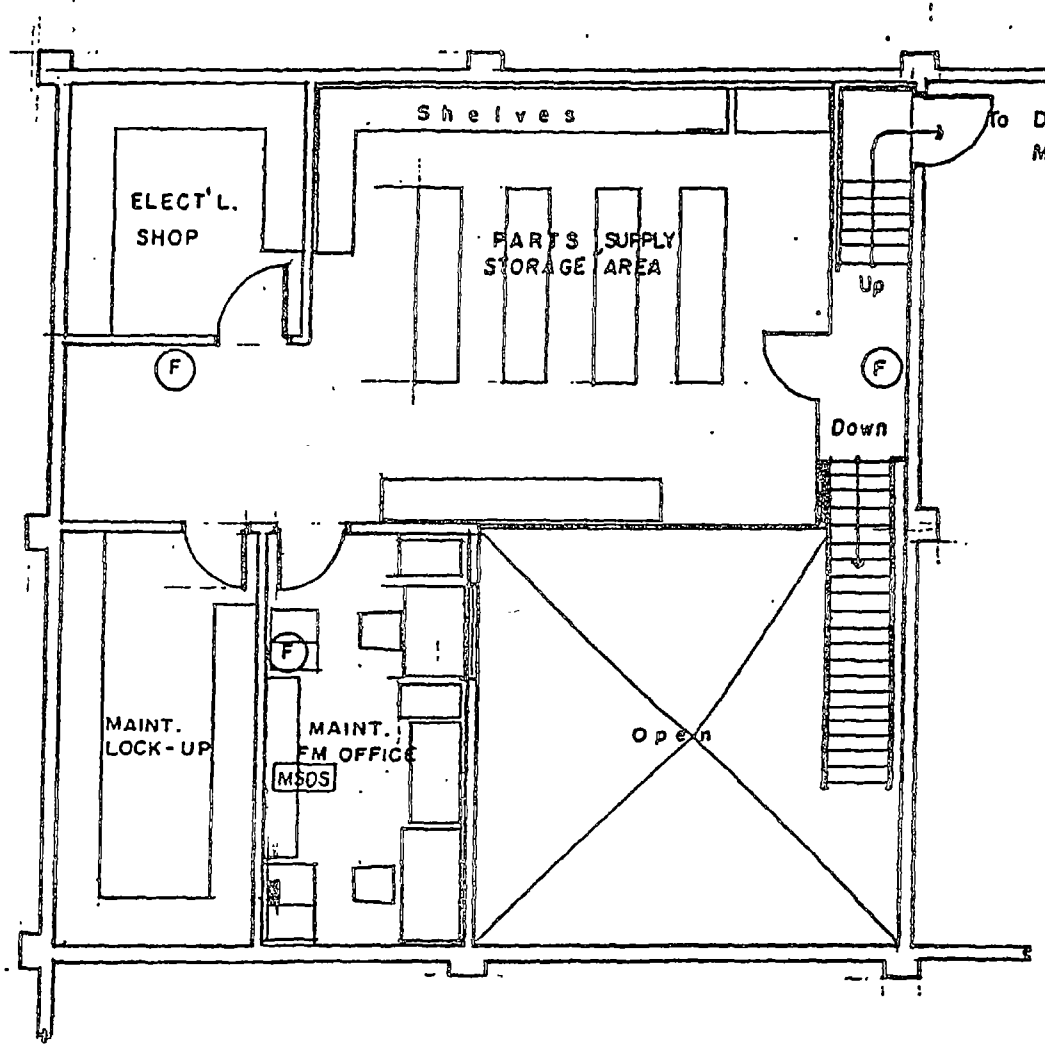
(F) FIRE EXTINGUISHER

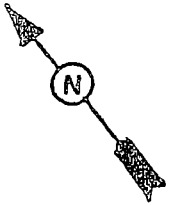
(FH) FIRE HOSE

EMPTY BOTTLES
STORAGE AREA

NOTE:

FOR PRODUCT NOTIFICATION





FIRE DEPT. ACCESS SYMBOL

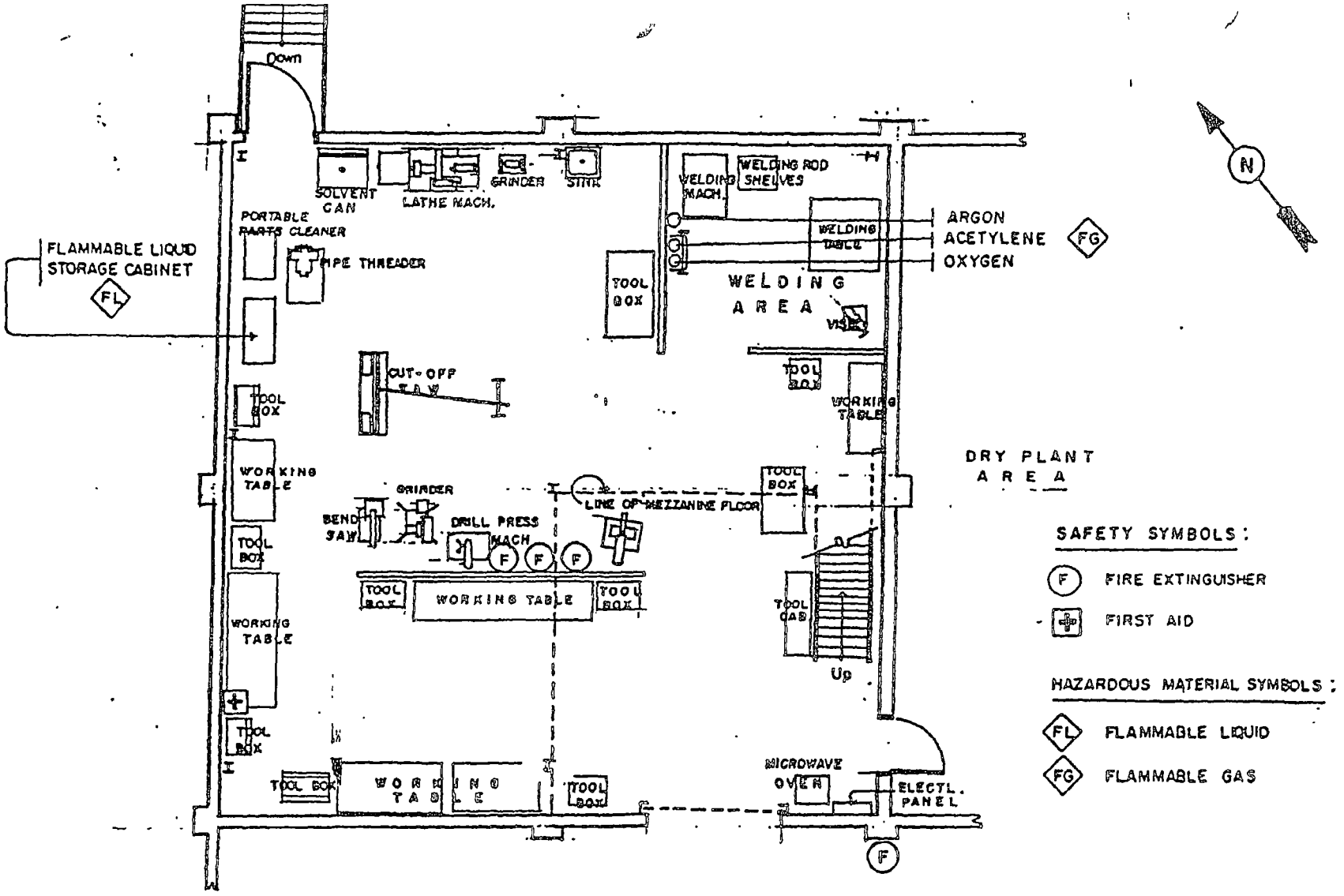
MSDS MATL. SAFETY DATA SHEET

SAFETY SYMBOLS

(F) FIRE EXTINGUISHER

MEZZANINE PLAN (MAINT. SHOP)

SCALE : 1/8" = 1'-0"



SAFETY SYMBOLS :

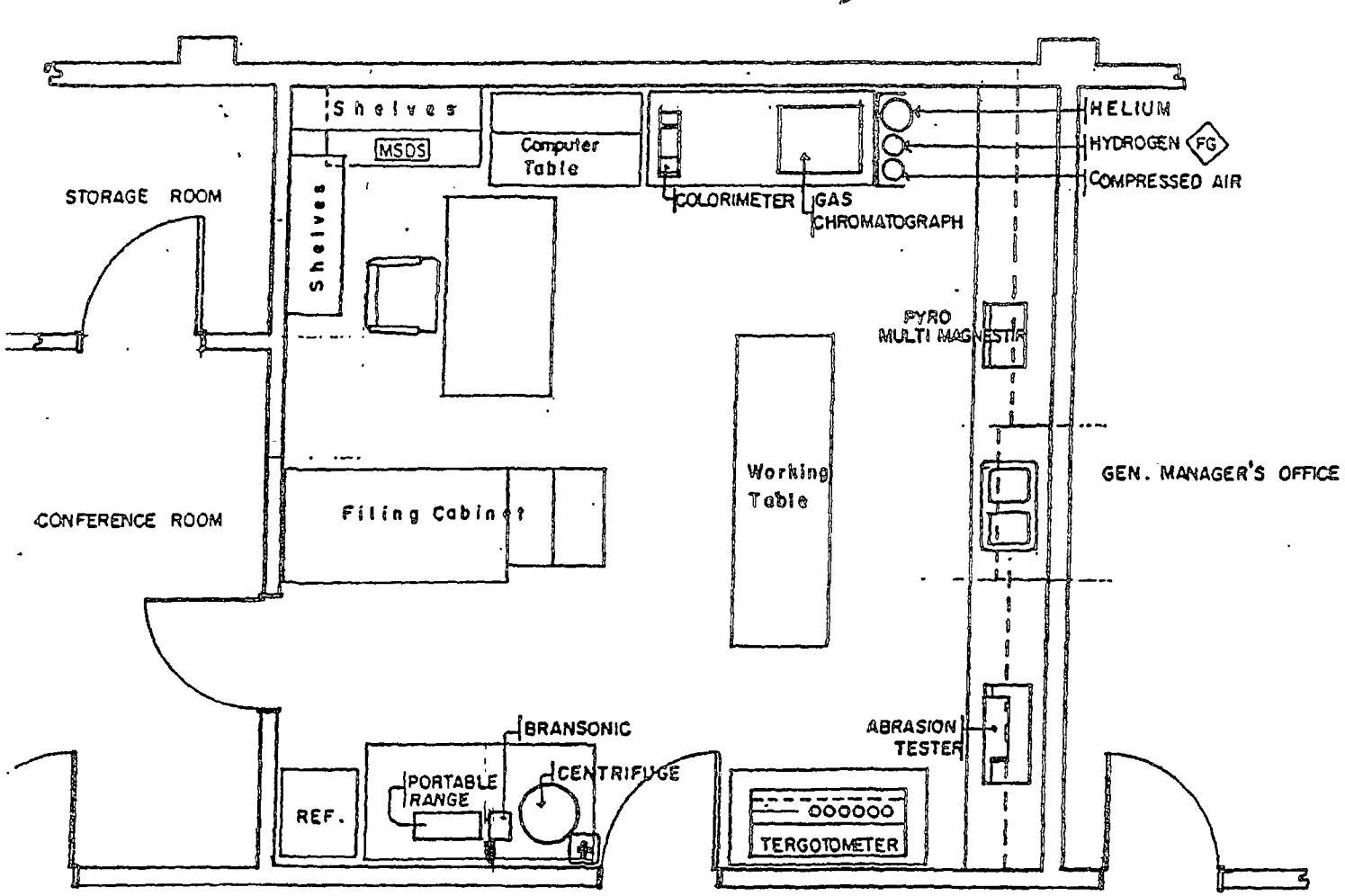
- (F) FIRE EXTINGUISHER
- FIRST AID

HAZARDOUS MATERIAL SYMBOLS :

- (FL) FLAMMABLE LIQUID
- (FG) FLAMMABLE GAS

PLAN (MAINT. SHOP)

SCALE : 1/8" = 1'-0"



SAFETY SYMBOL

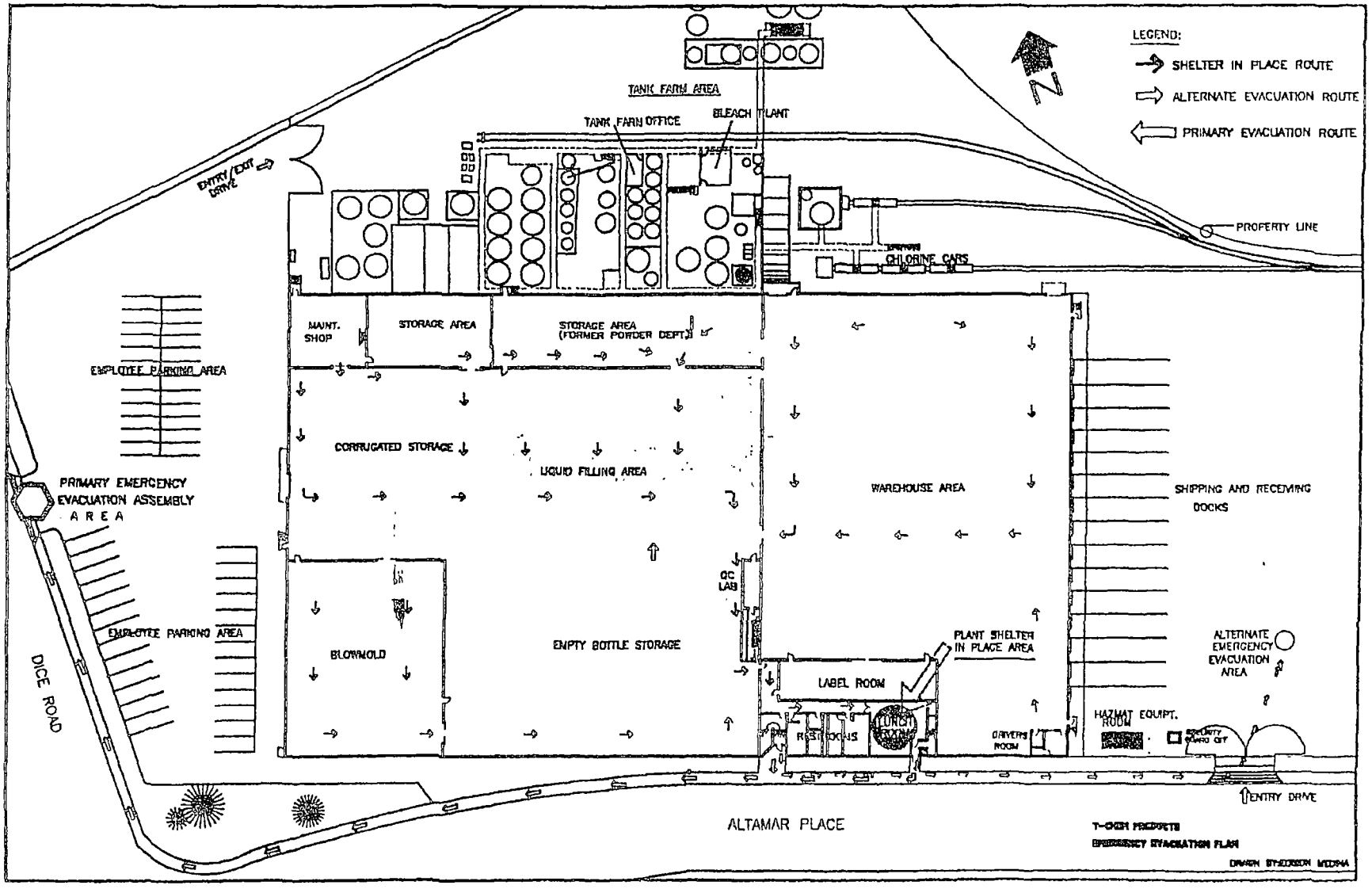
FIRST AID

FIRE DEPT. ACCESS SYMBOL

MSDS MATERIAL SAFETY DATA SHEET

PLAN (LABORATORY)

SCALE : 1/4" = 1'-0"


LEGEND:
SHELTER IN PLACE ROUTE
ALTERNATE EVACUATION ROUTE
PRIMARY EVACUATION ROUTE
N
TANK FARM AREA
TANK FARM OFFICE
BLEACH PLANT
ENTRY/EXIT DRIVE
PROPERTY LINE
CHLORINE CARS
MAINT. SHOP
STORAGE AREA
STORAGE AREA (FORMER POWDER DEPT.)
EMPLOYEE PARKING AREA
CORRUGATED STORAGE
LIQUID FILLING AREA
WAREHOUSE AREA
SHIPPING AND RECEIVING DOCKS
PRIMARY EMERGENCY EVACUATION ASSEMBLY AREA
QC LAB
EMPLOYEE PARKING AREA
BLOWMOLD
EMPTY BOTTLE STORAGE
PLANT SHELTER IN PLACE AREA
ALTERNATE EMERGENCY EVACUATION AREA
LABEL ROOM
HAZMAT EQUIPT. ROOM
DRIVERS ROOM
DICE ROAD
ENTRY DRIVE
ALTAMAR PLACE

TANK FARM LEGEND

Rev5/14/02dj

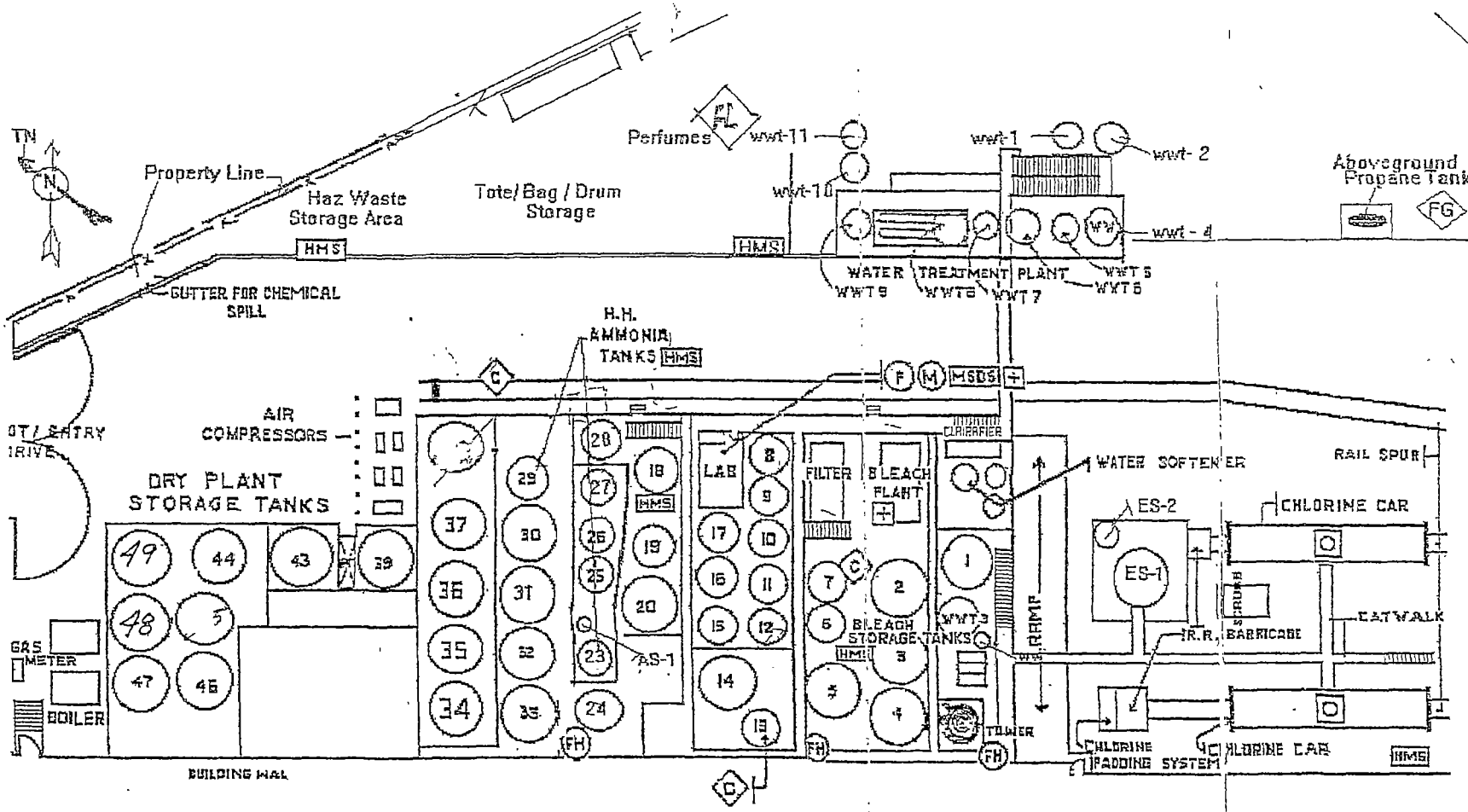
LEGEND

Blue = Health
Red = Flammability
Yellow = Reactivity

At KIK So Cal, all product is stored in tanks that are located in the Tank Farm area on the site map. The Tank Farm is located on the north side of the building. On the following legend, the tank numbers, correspond to the attached map.

umber	Capacity	Substance Ident.	Blue	Red	Yellow	Health Hazards
crubber	545 ga.	18% Caustic Soda	3	0	2	Eyes / Skin & Resp. Tract
S-1	23,000 ga.	18% Caustic Soda	3	0	2	Eyes / Skin
S-2	1,200 ga.	18% Caustic Soda	3	0	2	Eyes / Skin
1	24,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
2	24,000 ga	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
3	23,000 ga,	Sodium Hypochlorite	3	0	2	Eyes/Skin & Resp. Tract
4	23,000 ga.	Soft Water Storage	0	0	0	
5	24,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
6	9,000 ga.	50% Caustic Soda	3	0	2	Eyes / Skin
7	9,000 ga.	50% Caustic Soda	3	0	2	Eyes/ Skin
WW	500 ga.	50%Hydrogen Perox	2	0	2	Eyes / Skin & Resp. Tract
WW-3	9,500 ga.	Waste Water	2	0	2	Eyes / Skin
8	6,000 ga.	Soft Water	0	0	0	Eyes
9	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
10	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
11	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
12	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
13	10,000 ga.	50% Hydrogen Perox	2	0	2	Eyes / Skin & Resp. Tract
14	12,000 ga.	5%Peroxide Blendng	2	0	2	Eyes / Skin & Resp. Tract
15	10,000 ga.	NP-9 Surfactant	1	1	0	Eyes / Skin & Resp. Tract
16	12,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
17	12,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
18	10,000 ga.	Fabric Softner Base	1	3	2	Eyes / Skin & Resp. Tract
19	5,500 ga	Rinse Mix Tank	1	0	2	Eyes / Skin & Resp. Tract
20	13,500 ga.	Fabric Softner	0	0	0	Eyes / Skin & Resp. Tract
23	2,300 ga.	Lemon Ammonia	2	1	0	Eyes / Skin & Resp. Tract
AS-1	300 ga.	Ammonia Scrubber	2	1	0	Eyes / Skin & Resp. Tract
24	12,000 ga.	Sudsy Ammonia	2	1	0	Eyes/Skin& Resp. Trac
25	6,000 ga.	Lemon Ammonia	2	1	0	Eyes / Skin & Resp. Tract
26	6,000 ga.	Pure Ammonia	2	1	0	Eyes / Skin & Resp. Tract
27	6,000 ga.	29% Ammonia	2	1	0	Eyes / Skin & Resp. Tract
28	3,000 ga.	Bio Soft	0	0	0	
29	8,700 ga.	Dilute Ammonia	2	1	0	Eyes / Skin & Resp. Tract
30	12,000 ga.	Windshield Wash	1	0	0	Eyes / Skin
31	9,500 ga.	Windshield Wash	0	0	0	Eyes
32	12,000 ga.	Blend Tank	0	0	0	Empty
33	9,400 ga.	Sudsy Ammonia	2	1	0	Eyes/Skin & Resp.Trac
34	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
35	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
36	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
37	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
38		VACANT	0	0	0	

ber	Capacity	Substance Ident	Blue	Red	Yellow	Health Hazards
39	113,300 lb	HDPE Polyethylene	0	1	0	
43	88,500 lb	Polyethylene	0	1	0	
44	12,000 SS	Blending Tank	1	0	0	Eyes
45		VACANT	1	0	0	Eyes
46	10,000	Steel Storage Tank	1	0	0	Eyes
47	12,000	Steel Storage Tank	1	0	0	Eyes
48	11,000	Steel Storage Tank	1	0	0	Eyes
49	5,000	Steel Blending Tank	1	0	0	Eyes
		WATER TREATMENT PLANT				
WWT-1	24,000 ga.	Processed Water Storage	0	0	0	Eyes
WWT-2	16,000 ga.	Processed Water Storage	0	0	0	Eyes
WWT-4	6,200 ga	Waste Water Influent Tank	1	0	1	Eyes / Skin
WWT-5	2,300ga.	Mixing Tank	2	0	0	Eyes / Skin
WWT-6	3,200ga.	50% Alum Tank	1	0	0	Eyes / Skin
WWT-7	1,580ga.	Floc Tank	1	0	0	Eyes / Skin
WWT-8	2,400ga.	Thickner Tank	1	0	0	Eyes / Skin
WWT-9	500ga.	Filter Tank	0	0	0	Eyes
WWT-10	6,200ga.	Processed Water Storage	0	0	0	Eyes
WWT-11	6,000ga.	Processed Water Storage	0	0	0	Eyes



PLOT PLAN (TANK FARM)

SCALE : 30'-0"

6/08/00 PROPOSED LAYOUT/dj

FIRE DEPT. ACCESS SYMSOL

MSDS MATL. SAFETY DATA SHEET

SAFETY SYMBOLS

- FH FIRE HOSE
- F FIRE EXTINGUISHER
- C PROTECTIVE CLOTHING
- M PROTECTIVE MASK
- FIRST AID

HAZARDOUS MATL. SYMBOLS

- ABOVEGROUND TANK
- FL FLAMAIBLE LIQUID
- FG FLAMAIBLE GAS
- C CORROSIVE
- HMS HAZARDOUS MTL

CHEMICAL PLANT - KIK SOCAL INC. SANTA FE SPRINGS, CALIFORNIA	
SCALE -	BY - JIM RISSMAN
DATE -	
PLOT PLAN - TANK FARM	
REVISED : 7/04/00 dj	

CONTINGENCY & EMERGENCY PLAN

KIK-SoCal Inc.

9028 Dice Road
Sante Fe Springs, CA 90670
(562) 946-6427
EPA ID# CAD051482784

Emergency Response Coordinator:
Ray Wetter
Alternate Coordinator:
Bob Brown

Developed: July 21, 2003
Revised: March 6, 2007

Dial 911 when life or property is threatened.

TABLE OF CONTENTS

AUTHORITY TO ACT 4

EMERGENCY RESPONSE PHONE NUMBERS 5

REGULATORY AGENCIES 6

EMERGENCY RESPONSE TEAM 7

Response Team Objectives 7

Emergency Response Coordinator Functions 8

Emergency Response Team Duties 10

EMERGENCY CONTACT INFORMATION 11

EMERGENCY RESPONSE TEAM MEMBERS 12

CERTIFIED HAZMAT PERSONNEL 13

The present personnel on GRAVE shift WILL NOT allow ENTRY until after SFSFD arrives. 13

OUTSIDE SUPPORT SERVICES 15

BASIC EMERGENCY RESPONSE 16

EMERGENCY CONTROL CENTER 17

BASIC EVACUATION PLAN 18

Employees 18

Supervisors 18

Emergency Response Team (ERT) 18

CHEMICAL RELEASE PROCEDURES 19

Identifying Employee 19

Emergency Response Team 19

CHLORINE LEAK PROCEDURES 21

SCENARIO 1: CRITICAL 21

SCENARIO 2: SERIOUS 22

FIRE 23

Identifying Employee 23

Emergency Response Team (ERT) 23

EXPLOSION 25

Identifying Employee 25

Emergency Response Team (ERT).....25
MEDICAL EMERGENCY.....27
Identifying Employee.....27
Emergency Response Team (ERT).....27
FIRST AID/CPR RESPONDERS.....28
EARTHQUAKE.....29
CIVIL DISTURBANCE EMERGENCY RESPONSE.....31
BOMB THREAT EMERGENCY RESPONSE.....32
BOMB THREAT REPORTING FORM.....33
FACILITY DESCRIPTION.....34
HAZARDOUS WASTE GENERATED ON-SITE.....35
EVACUATION PLAN.....36
HAZARDOUS WASTE MANAGEMENT PREVENTION MEASURES.....37
Material/Process/Waste Inspection.....37
Hazardous Waste Management and Training.....37
HAZARDOUS WASTE STORAGE INSPECTION CHECKLIST.....38
HAZARDOUS WASTE MANAGEMENT.....40
HAZARDOUS WASTE INSPECTION SIGN OFF.....43
Warning Protection Devices.....44
Emergency Personal Protective Equipment Available.....45
Spill Kit Contents.....46
HAZARDOUS WASTE GENERATOR LOCAL AUTHORITY NOTIFICATION 51
ACKNOWLEDGMENT OF SERVICES FORM.....52
Emergency Response Incident Report.....53
HAZARDOUS WASTE.....55
STORAGE INSPECTION LOG.....55
ANNUAL HAZARDOUS MATERIALS & WASTE.....56
MANAGEMENT TRAINING.....56

AUTHORITY TO ACT

Management of KIK-SoCal Inc. gives the Emergency Response Coordinator and the Emergency Response Team Members the authority to act in accordance with this Emergency Plan.

Bob Brown, General Manager

32607

Date:

EMERGENCY RESPONSE PHONE NUMBERS

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670
(562) 946-6427
EPA ID# CAD051482784

EMERGENCY: CALL 9-1-1

FIRE:	Santa Fe Springs Fire Department 11300 Greenstone Ave. Santa Fe Springs, CA 90670	562-944-9713
POLICE:	Los Angeles County Sheriff	
LOCAL REGULATING AGENCY:	Santa Fe Springs Fire Department Contact: Richard Kaulman	562-944-9713
HOSPITAL:	Presbyterian Hospital 12401 Washington Blvd. Whittier, CA 90602	562-698-0811
EMERGENCY COORDINATOR:	Ray Wetter	(H) (909) 875-9578 (Cell) FOIA ex 6, Personal Privacy
SPILL REPORTING AGENCY:	Health Hazmat Division 5825 Rickenbacker Rd. Commerce, CA	Emergency: (323) 890-4317
LOCATION OF EMERGENCY EQUIPMENT:	See facility map	
COMPLIANCE CONSULTANTS:	United States Compliance Corp. 301 Carlson Parkway Minnetonka, MN 55345	952-252-3000 Monday - Friday 8:00AM to 4:30PM

Be prepared to give company name, address, EPA #, date and time of incident, type of emergency, name and quantity of material involved, extent of injuries, and possible hazards to human health and environment outside the facility.

REGULATORY AGENCIES

LOCAL:	
STATE:	California Environmental Protection Agency 1001 I Street P.O. Box 2815 Sacramento, CA 95812 916-445-3844
FEDERAL EPA REGIONAL ADMINISTRATOR:	U.S. EPA Region 9 75 Hawthorne Street San Francisco, CA 94105 866-EPA-WEST 415-947-8000
COAST GUARD:	
NATIONAL RESPONSE CENTER:	1-800-424-8802

EMERGENCY RESPONSE TEAM

Response Team Objectives

The Emergency Response Team concept as defined by this plan combines elements of numerous private and government interest groups into one functional, safety aware and responsive group of company employees. This group of company employees, termed "The Emergency Response Team," consists of:

1. An Emergency Response Coordinator
2. An Emergency Response Communicator
3. Several Emergency Response Area Directors
4. Several Emergency Response Area Assistants

The structure of the team is consistent with the Community Right to Know Response Team outline.

The charge given to the team is a preventative or loss deterrent team as well as a first response team.

The team members are responsible for the maintenance of company safety standards, policies, procedures, and the execution of those safety standards.

The Emergency Response Team is trained to use special equipment effectively in the response procedure. This equipment is generally contained within various response carts, which are located strategically throughout the facility. These carts contain such elements as leak stop material, medical material, personal protective equipment, spill absorption material, shovels, oxygen, and other response materials including DOT and NFPA response guides outlining the correct applicable procedure.

Emergency Response Coordinator Functions

Whenever there is an imminent or actual emergency situation, the Emergency Response Coordinator (or designee when the Emergency Response Coordinator is not available) must immediately:

1. Activate internal facility alarms or communication systems, where applicable, to notify all facility personnel; and
2. Notify appropriate state or local agencies with designated response roles if their help is needed.

Whenever there is a release, fire or explosion, the Emergency Response Coordinator must immediately identify the character, exact source, amount and real extent of any released materials. This may be done by observation or review of facility records or manifests and, if necessary, by chemical analysis.

Concurrently, the Emergency Response Coordinator must access possible hazards to human's health or the environment that may result from the release, fire, or explosion. This assessment must consider both direct and indirect effects of the release, fire, or explosion (e.g. the effects of any toxic, irritating, or asphyxiating gases that are generated or the effects of any hazardous surface water run-offs from water or chemical agents used to control fire and heat-induced explosions.

If the Emergency Response Coordinator determines that the facility has had a release, fire, or explosion, which could threaten human health or the environment outside the facility, he must report his findings as follows:

1. If his assessment indicates that evacuation of local areas may be advisable, he must immediately notify appropriate local authorities.
2. He must be available to help appropriate local authorities decide whether local area should be evacuated; and
3. He must immediately notify either the government official designated as the on-scene coordinator for the geographical area (in the applicable regional contingency plan under 40 CFR Part 1510) or the National Response Center (using their 24-hour toll free numbers 800-424-8802). This report must include:
   a. Name and telephone number of reporter
   b. Name and address of facility
   c. Time and type of incidents
   d. Name and quantity of material(s) involved, to the extent known:
   e. The extent of injuries, if any: and
   f. An assessment of actual or potential hazards to human health or the environment, where this is applicable; and
   g. The possible hazards to human health or the environment outside the facility.

During an emergency the Emergency Response Coordinator must take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other hazardous waste at the facility. These

measures must include, where applicable, stopping processes and operations, collecting and containing released waste and removing or isolating containers.

If the facility stops operations in response to a fire, explosion, or release, the Emergency Response Coordinator must monitor for leaks, pressure build-up, gas generation or ruptures in valves, pipes or other equipment, whenever this is appropriate.

Immediately after an emergency, the Emergency Response Coordinator must provide for treating, storing, or disposing of recovered waste, contaminated soil or surface water, or any other material that results from release, fire, or explosion at the facility.

The Emergency Response Coordinator must ensure that, in the affected area(s) of the facility:

1. No waste that may be incompatible with the released material is treated, stored, or disposed of until clean-up procedures are completed; and
2. All emergency equipment listed in the contingency plan is cleaned and fit for its intended use before operations are resumed.

The owner or operator must notify the appropriate state and local authorities that the facility has been restored to an acceptable condition before operations are resumed in the affected area(s) of the facility.

The owner or operator must note in the operating record the time, date, and details of any incident that requires implementing the contingency plan. Within five days after the incident, the Coordinator must submit a written report on the incident to management. The report must include:

a. Name, address and telephone number of the owner operator;
b. Name, address, and telephone number of the facility;
c. Date, time and type of incident (e.g. fire, explosion);
d. Name and quantity of material(s) involved;
e. The extent of injuries, if any;
f. An assessment of actual or potential hazards to human health or the environment, where this is applicable;
g. Estimated quantity and disposition of recovered material that resulted from the incident.

Emergency Response Team Duties

See Page 10 for list of Responders

Emergency Response Coordinator/Hazardous Material and Waste Director:

- Coordinates the resources and procedures of the company to most effectively support the response team.
- Responsible for the acquisition and maintenance of necessary resources for the team.
- Directs the clean up, documentation assignments and pollution issues surrounding any incident.
- Also responsible for weekly hazardous material inspections.
- Trained in the proper management and handling of hazardous materials and waste streams.

Emergency Response Communicator/Hazardous Material and Waste Handler:

- Handles all in-house communication needs relating to the response, medical care, transportation, and call list.
- Communicates to response team outside response area to the nature of loss or damage, response being taken, evacuation communication, assembly communication and recall.
- Communicates to coordinator any request for resources necessary for response.
- Handles media and non-participant communications.
- Trained in the proper management and handling of hazardous materials and waste streams.

Emergency Response Area Director/Hazardous Material and Waste Handler:

- The person responsible as the first responder to the incident within there assigned area.
- Performs and directs any required response.
- Trained in the proper management and handling of hazardous materials and waste streams.

Emergency Response Area Assistant/Hazardous Material and Waste Handler:

- Person responsible for evacuating and controlling the employees within their assigned area.
- Leads evacuations, assembly, communicates to his/her assembly, directs next action to his/her assembly.
- Trained in the proper management and handling of hazardous materials and waste streams.

EMERGENCY CONTACT INFORMATION

The following procedures are to be used in case of a fire, explosion, or release (spill) involving hazardous materials. Each situation should be approached with utmost caution with regards to safety. In each case, the Emergency Response Coordinator at KIK-SoCal Inc. must be notified.

The Emergency Response Coordinators are:

PRIMARY:	Ray Wetter (Cell) FOIA ex 6, Personal Privacy (W) (562) 906-2215
SECONDARY:	Bob Brown (Cell) FOIA ex 6, Personal Privacy (W) (562) 906-2244

The following emergency numbers are to be used if any of these support departments are required. Each of these departments has been notified and is aware of the Contingency Plan procedures.

FIRE DEPARTMENT:	DIAL 911
RESCUE SQUAD:	DIAL 911
LOCAL SHERIFF:	Dial 911
P.A. SYSTEM:	Dial "70"
HOSPITAL:	Presbyterian Hospital and Clinic 12401 Washington Blvd. Whittier, CA 90602 562-698-0811
FIRST AID PERSONNEL:	See Page

EMERGENCY RESPONSE TEAM MEMBERS

The following individuals are assigned to the facility's Emergency Response Team. These individuals are familiar with the facility's emergency procedures and have received training in the use of facility fire fighting equipment and/or hazardous waste spills containment and clean up. Designated individuals are familiar with the facility's utilities and with proper procedures for facility power isolation and shut down of fuel supplies.

Title:	Emergency Response Coordinator/Communicator
Name:	Ray Wetter - EHS Manager
Cell Phone:	FOIA ex 6, Personal Privacy
Work Phone:	(562) 946-6427

Title:	Emergency Response Assistant Coordinator/Communicator
Name:	Bob Brown - General Manager
Pager:	310-875-0638
Cell Phone:	FOIA ex 6, Personal Privacy
Work Phone:	(562) 946-6427

Title:	Emergency Response Area Director
Name:	Bill Lamey - Maintenance
Pager:	310-875-0632
Cell Phone:	FOIA ex 6, Personal Privacy
Work Phone:	(562) 946-6427

Title:	Emergency Response Area Director
Name:	Charles Hemphill - Tank Farm
Pager:	310-875-2375
Work Phone:	(562) 946-6427

Title:	Emergency Response Area Director
Name:	Frank Calvo - Tank Farm
Pager:	310-875-0414
Work Phone:	(562) 946-6427

Title:	Emergency Response Area Director
Name:	Jim Rissman - Maintenance Supervisor
Pager:	310-875-0640
Cell Phone:	FOIA ex 6, Personal Privacy
Work Phone:	(562) 946-6427

Title:	Emergency Response Area Director
Name:	Manuel Ortiz - Swing Shift Maintenance
Pager:	310-875-1937
Cell Phone:	FOIA ex 6, Personal Privacy
Work Phone:	(562) 946-6427

CERTIFIED HAZMAT PERSONNEL

GRAVE	DAY	SWING
	Walter Avalos	
Jose Gonzalez		Manual Boja
Robert Rodriquez		Manuel Ortiz
Angel Marias	Ernesto Romo	
Ramon Munoz >2:30 am	Bill Lamey	Ramon Munoz <6:00 pm
	Edison Medina	Santiago Hernandez Jr.
Phillip Glock	Frank Calvo	
Brandon Lopez	Jim Rissman	
Charles Hempill	Bob Brown	
Pat Ryan	Elias Sanchez	
	Richard Lehman****	
	Priscilla Prentiss****	
	Pete Perez****	

The present personnel on GRAVE shift WILL NOT allow ENTRY until after SFSFD arrives.

* Use only as Evacuation Supervisor
** New, do not use on Entry Team until receive more Training
*** Unable to use SCBA
**** First Aid/CPR trained only
> Before
> After

Distribution:
Greg Wiese
Bob Brown
Manual Ortiz
Jim Rissman
Ray Wetter
Linda Wright
Training Manuals
Haz Mat Room
UICS Operations Manual
U.S.C.C. Emergency Response Plan

PAGERS and CELL PHONES

NAME	PAGER #	CELL PHONE #
Bill Lamey	**310-875-0632**	FOIA ex 6, Personal Privacy
Bill Tidmore		FOIA ex 6,
Bob Brown	**310-875-0638**	FOIA ex 6, Personal Privacy
Charles Hemphill	**310-875-2375**	
Frank Calvo	**310-875-0414**	
Greg Wiese		FOIA ex 6, Personal Privacy
Jim Rissman	**310-875-0640**	FOIA ex 6, Personal Privacy
Juan Villalta	310-875-4642	
Manuel Ortiz	**310-875-1937**	FOIA ex 6,
Priscilla Prentiss		FOIA ex 6,
Raul Alvarez	310-875-0639	
Ray Wetter	**310-875-0633**	FOIA ex 6,
Richard Lehman		FOIA ex 6,
Walter Avalos	310-875-0637	

Those bolded are the Emergency Response Personnel for Group Pages. Dial to Page All Bold Members: 310-875-3695.

When Paging:

1. Dial pager number and wait for beep.
2. Dial your number (area code first).
3. Press the pound sign (#) until you hear beep and hang up.

OUTSIDE SUPPORT SERVICES

Police Department

Police are available to direct traffic, handle crowds, and provide security services. The police department has a copy of the Contingency and Emergency Response Plan.

Fire Department

The fire department will respond to fires and other emergency incidents providing primary fire protection and rescue services. The fire department has a copy of the Contingency and Emergency Response Plan.

Hospital

The hospital is available to provide medical service. The hospital has a copy of the Contingency and Emergency Response Plan.

Spill Response Services

Spill response services will be delegated to an outside licensed Service Company.

BASIC EMERGENCY RESPONSE

8 STEP PROTOCOL

- CALL 911, if necessary

1. Isolate and Deny Entry
2. ID Material and/or Cause of Incident
3. Risk/Hazard Assessment
4. Emergency Equipment
5. Notification
6. Control
7. Decontamination
8. Termination

EMERGENCY CONTROL CENTER

In the event of an emergency, where it is feasible to remain on the premises without unduly endangering facility personnel, the following procedures will be followed:

1. An Emergency Control Center will be established at the Hazardous Materials Equipment Storage Trailer.
2. The Emergency Response Coordinator will report immediately to the Emergency Control Center.
3. The Area Response Directors will report immediately to the Emergency Control Center. The Emergency Response Area Director whose area is affected will stay at the incident site and execute, by protocol, the indicated response.

In the event of an emergency where it is necessary to evacuate the facility, the following procedure will be followed.

1. An alternate emergency control area will be established outside the facility at the parking lot on Dice Road (fire) and downstairs lunchroom for (chlorine release). The Emergency Response Coordinator will report immediately to the alternate emergency control area where he/she will carry out his/her duties.
2. The Response Communicator will contact the fire department, police department, and ambulance service required.
3. Each Emergency Response Area Assistant will be responsible for ensuring that all personnel have vacated their area of responsibility. They will then meet with the Emergency Response Coordinator at the emergency control area to report on area of assembly, control of situation and to be briefed on what to communicate to their employees.
4. The Emergency Response Team will report immediately to the emergency control area after completing their required protocol.
5. Maintenance will report immediately to the emergency control area.

All personnel will be thoroughly familiar with the alarm system and the evacuation plan with alternate routes. The evacuation plan is posted conspicuously. The evacuation plan is a block layout of the facility showing all exits, aisles, alarm stations and preferred exit routes for personnel during any evacuation.

BASIC EVACUATION PLAN

In the event of an evacuation, the following procedure should be followed.

Employees

Upon notification of evacuation via alarms, verbal or PA, employee must evacuate area immediately through the nearest unobstructed exit. Walk to your designated area at the parking lot on Dice Road (fire) and downstairs lunchroom for (chlorine release).
Report to designated area for head count.
Follow instructions of ERT Coordinator and Members.

Supervisors

1. Upon notification of evacuation via alarms, verbal or PA, employee must evacuate area immediately through the nearest unobstructed exit. Walk to your designated area at the parking lot on Dice Road (fire) and downstairs lunchroom for (chlorine release).
2. Report to designated area for head count. Perform head count for the department.
3. Report head count to the Emergency Coordinator.
4. If emergency incident happened in the supervisor's area, detailed information must be reported to Emergency Coordinator immediately.

Emergency Response Team (ERT)

1. Call 911, if immediate emergency services are needed.
2. ERT members will assist in the orderly evacuation of their assigned areas. They will initiate search of their designated areas including the restrooms, and closed rooms if safe to do so to assure all employees, visitors, and contractors, etc. have left the building.
3. The team members will then proceed to the command center to report all information (evacuation status, hazards in the area, etc.) to the Emergency Response Coordinator.
4. The Emergency Response Coordinator will relay the evacuation status and hazard information to necessary outside emergency services (i.e. fire department).
5. A decision will be made by the Emergency Response Coordinator and key company personnel to determine the status of the evacuation
6. Personnel may not enter the area until the fire department releases the site and indicates it is safe to do so.

CHEMICAL RELEASE PROCEDURES

(Other than Chlorine)

The Emergency Procedures required in the event of a release of hazardous waste or materials are as follows:

Identifying Employee

1. Evacuate out of immediate area. Also notify employees in the immediate area to keep out of area. **Protect Personnel** – Anyone exposed to hazardous chemicals should be removed contaminated clothing and seek medical attention on immediately. Personnel close to the spills potentially harmfully vapors should evacuate.

2. Eliminate ignition sources - Cigarettes should be extinguished and any spark or flame producing operation should be shut down within the vapor-spread area of the spill.

3. Notify the Emergency Response Coordinator/Emergency Response Team via the PA system. Notify your immediate supervisor. The emergency response team will be directed to call 911 if emergency services are needed.

4. **DO NOT ATTEMP TO CLEAN UP THE SPILL OR TO STOP THE LEAK WITHOUT DIRECTION FROM THE EMERGENCY RESPONSE TEAM.**

Emergency Response Team

Call 911, if immediate emergency services are needed.

1. Isolate immediate area.
   - ~ Evacuate all non-essential personnel.
   - ~ Keep all personnel out of spill or release area. The area should be secured.

2. Identify the spilled/released material
   - ~ Identify the cause of the spill/release.

3. Determine the risk and hazards associated with the release.
   - ~ MSDS are available on site.
   - ~ Hazardous chemical exposure levels must be quantified.
   - ~ Determine the direction of wind

If the hazards are not too great and are manageable with proper procedures and protective equipment, the ERT may follow control and decontamination procedure if they choose to do so.

4. Obtain the required personal protective equipment for the incident.
   - ~ All personnel entering the area must don the required personal protective equipment.
   - ~ Please refer to the emergency equipment section of the Emergency Plan.
5. Notify ERT members before entering area for control.
   - ~ No ERT member may act alone.
6. Control the hazards.
   - ~ ONLY IF IT IS SAFE TO DO SO!
   - ~ If material is flammable, shut down or eliminate all sources of ignition.
   - ~ Ventilate where possible.
   - ~ Contain the spill if safe to do so. Contain the spill - Attempt to restrict the spread of the spill. Minimizing the surface area of the spill reduces the formation of flammable vapors.
   - ~ Spill containment tools include absorbents (pillows, socks and pads), non-sparking shovel and squeegees, etc. Sufficient absorbent material to control a possible spill should be kept on hand.
   - ~ All spill control equipment must be spark-proof.
   - ~ If a drum was punctured turn the drum so the puncture is facing up thus preventing more material to be released.
7. Decontaminate area using approved materials.
   - ~ Any material that can be reused should be cleaned up first. The remaining waste should be cleaned up and placed in clean drum.
   - ~ All contaminated material is to be removed and handled in the same manner. All equipment used during the clean up operation should be cleaned and put back in the proper location. After the clean up is complete, the supervisor of the department should be notified that plant operation might continue.
   - ~ All emergency response personnel involved with the clean up of the spill must go through decontamination.
8. Termination
   - ~ Emergency Response Team must gather and complete the Incident Report.
   - ~ Call United States Compliance for guidance (952) 938-2228.
   - ~ Appropriate agencies must be called if release thresholds or reportable quantities (RQ) are exceeded.
   - ~ Steps must be taken to prevent a similar event from occurring.
   - ~ Retraining to be scheduled as needed.

CHLORINE LEAK PROCEDURES

When making a connection from the KIK process to a chlorine rail car, the operator must be wearing an MSA Ultravue full-face respirator with the appropriate chlorine/acid gas canister. Additionally, during the hooking up procedure, there must be an observer watching to make sure that there is no incident during the tapping procedure.

A minimum of two, qualified, emergency responders and/or ERT members must be on site during the unloading of chlorine at the facility.

SCENARIO 1: CRITICAL

The following emergency procedures will be followed if a leak is detected which may threaten the employees, local residents, or the environment, and/or is detected at a concentration at any location greater than 5 ppm.

1. In the event of a chlorine alarm and a greater than 5ppm reading on a chlorine sensor, the operator will notify plant personnel via the plant pager system. All employees will evacuate to the employee lunchroom (shelter in place) unless notified otherwise by the Emergency Coordinator. Supervisors will perform a head count to ensure all employees have evacuated to the employee lunchroom.
2. If there is the potential of any offsite impact due to the release, the Emergency Coordinator or designee will make further notifications to the police, fire department, the State Warning Center (800 852-750), the National Response Center (800 852-7750), and local business as needed.
3. ERT members will immediately meet at the Hazmat room to secure a self-contained breathing apparatus and proceed to the release area to assess and secure the leak. A minimum of five members must be present in order to proceed with a response. The graveyard shift must call the Fire Department to assist with the response.
4. If the leak occurs on a tank car, the chlorine emergency "C" kit is located on the platforms.
5. Water should not be applied to a chlorine leak. The corrosive action of chlorine and water will make the leak worse.
6. If the leak is determined to be significant and a plant evacuation is required the Department supervisors should ensure that all employees evacuate the building. The Emergency Coordinator and the ERT will note the wind direction using the two wind socks located on the plant property and instruct Department Supervisors and proceed to the outside assembly area (Parking lot on Dice Road) or to the alternate assembly point (dirt area east of the facility).
7. All employees not involved in leak response must keep upwind of the leak. Chlorine is approximately two and one-half time as heavy as air and

typically settles near the ground; however, this may not hold true inside buildings and where local air currents are present.

8. Employees must wait for the all clear from the Emergency Coordinator or designee before returning to the building.

SCENARIO 2: SERIOUS

The following emergency procedures will be followed if a minor leak is detected on a rail car which can be contained through a minor adjustment of a valve or use of a "C kit" and does not threaten the employees, local residents, or the environment, nor is detected at a concentration at any location greater than 5 ppm.

If a rail car leak is discovered by a chlorine alarm, the operator should immediately notify the ERT. The ERT should don SCBAs and investigate the incident to determine what action should be taken. If release could degrade significantly or leak is significant in nature, i.e. ruptured transfer hose, etc, Emergency coordinator should follow the evacuation procedures outlined in Scerario 1.

If rail car leak is discovered during the hooking up to KIK's systems, operator should immediately notify observer of the incident and determine whether SCBA should be donned.

If possible, operator should make minor repairs to eliminate the leak, such as tightening the packing. If minor repairs are not possible and the release cannot be stopped easily, operator should leave the rail car and:

- notify the ERT team that a C-kit must be applied
- steps should be taken notify all shift supervisors to be prepared for a shelter in place or plant evacuation
- A courtesy call to Oxy (local Chlorep and vendor) should be made to make them aware of the situation.
- ERT team should don SCBAs, apply C-kit, then test to ensure that chlorine release has been contained. If C-kit repair is not successful, Oxy should be notified immediately and the area should be kept secure to ensure no unauthorized personnel comes near the cars. Emergency coordinator will decide, depending on the specific details, whether or not a plant evacuation or outside emergency notification is warranted.
- If C-kit repair is successful, Oxy should be notified to follow up and make necessary repairs and shift supervisors should be notified of the status.

In all cases follow up notification to Corporate HSE must be made as soon as possible so that an investigation can be made.

FIRE

The basic Emergency Procedures required in the event of a fire are as follows:

Identifying Employee

1. Evacuate area immediately through the nearest unobstructed exit.
2. Call 911 if necessary.
3. Alert plant personnel over the P.A. system. Dial "70" state and repeat message.
4. Walk to the emergency assembly area located at the parking lot on Dice Road.

MESSAGE: "Your attention please. Evacuate the building immediately through the nearest exit. Walk to the parking lot on Dice Road.

5. Notify Emergency Response Coordinator - to call Fire Department.
6. Department Supervisors are to check for injuries and missing personnel. If injuries occur, contact the First Aid Personnel or a Supervisor. Call the Rescue Squad and/or Fire Department, if needed.
7. After the fire is extinguished, all affected areas are to be cleaned up and wastes properly disposed of before resuming operations.

Emergency Response Team (ERT)

1. Call 911, if immediate emergency services are needed.
2. Isolate immediate area. Evacuate all personnel. Keep all personnel from entering the building and non-emergency personnel from entering the property. The area should be secured.
3. Conduct head count.
4. Remove materials from surrounding areas that might add to the fire if safe to do so.
5. Send individual out to meet the Emergency Vehicles.
6. Allow Emergency Response Coordinator and local Fire Department to take charge when they arrive.
7. Emergency Response Coordinator will relay all known information regarding the incident to the fire department upon arrival.
8. After the fire is extinguished, all areas affected are to be cleaned up and wastes properly disposed of before resuming operations.
9. If a hazardous substance has been released, the Emergency Response Coordinator is to notify the necessary Response Centers. Follow hazardous material release protocol.
10. Emergency Response Coordinator will notify personnel when it is safe to reenter the facility. This may not be done until the fire department says it is safe to do so.

11. Termination
    - ~ Emergency Response Team must gather and complete the Incident Report.
    - ~ Appropriate agencies must be called if certain release levels or reportable quantities (RQ) are exceeded.
    - ~ Call United States Compliance for guidance (952) 938-2228.
    - ~ Steps must be taken to prevent a similar event from occurring.
    - ~ Retraining to be scheduled as needed

EXPLOSION

The Emergency Procedures required for an explosion are as follows:

Identifying Employee

1. Evacuate area immediately through the nearest unobstructed exit. Walk to the emergency assembly area located at the parking lot on Dice Road (fire) and downstairs lunchroom for (chlorine release).
2. Dial 911.
3. Alert plant personnel over the P.A. system. Dial "70" state, and repeat message.

MESSAGE: "Your attention please. Evacuate the building immediately through the nearest exit. Walk to the parking lot on Dice Road (fire) and downstairs lunchroom for (chlorine release)."

4. Notify Emergency Response Coordinator - to call Fire Department.
5. Department Foremen are to check for injuries and missing personnel. If injuries occur, contact the First Aid Personnel or a Supervisor. Call the Rescue Squad and/ or Fire Department, if needed.
6. After the fire is extinguished, all areas affected are to be cleaned up and wastes properly disposed of before resuming operations.

Emergency Response Team (ERT)

1. Call 911, if immediate emergency services are needed.
   - ~ Isolate immediate area.
   - ~ Evacuate all personnel.
   - ~ Keep all personnel from entering the building or non-emergency personnel from entering the property. The area should be secured.
2. Conduct head count.
3. Remove materials from surrounding areas that might add to the fire if safe to do so.
4. Send individual out to meet the Emergency Vehicles.
5. Allow Emergency Response Coordinator and local Fire Department to take charge when they arrive.
6. Emergency Response Coordinator will relay all known information regarding the incident to the fire department upon arrival.
7. After the fire is extinguished, all areas affected are to be cleaned up and wastes properly disposed of before resuming operations.
8. If a hazardous substance has been released, the Emergency Response Coordinator is to notify the necessary Response Centers. Follow hazardous material release protocol.

9. Emergency Response Coordinator will notify personnel when it is safe to reenter the facility.
10. This may not be done until the fire department says it is safe to do so.
11. Termination
    - ~ Emergency Response Team must gather and complete the Incident Report.
    - ~ Appropriate agencies must be called if certain release levels or reportable quantities (RQ) are exceeded.
    - ~ Call United States Compliance for guidance (952) 938-2228.
    - ~ Steps must be taken to prevent a similar event from occurring.
    - ~ Retraining to be scheduled as needed.

MEDICAL EMERGENCY

This procedure will be followed when an injury or sudden illness occurs. The designated company emergency responders will assess the situation to determine the need for outside emergency response. The responders will err on the side of caution when in question.

Identifying Employee

1. If an employee becomes injured or suddenly ill, the employee shall notify the emergency response personnel via the P.A. system.
2. 911 will be called if the condition appears to be severe.
3. When paging, the requesting person should clearly state where the emergency responders are needed.
4. The immediate supervisor and emergency response personnel will be summoned immediately for all medical emergencies.
5. Isolate immediate area.
6. Stay with victim until help arrives.

Emergency Response Team (ERT)

1. Individuals designated to respond to medical emergencies are to immediately go to the location indicated on the page.
2. Area will be assessed for all relevant hazards.
3. The injury or illness will be assessed to determine if additional assistance is necessary. Call 911, if immediate emergency services are needed.
4. If 911 is called someone will be assigned to wait near the entrance of the property to meet the paramedics at the door and to guide them to the victim.
5. Isolate immediate area. Keep all non-essential personnel from entering the area.
6. Identify hazard or cause. All hazards must be controlled.
7. All responders must don appropriate personal protective equipment (see Blood Borne Pathogen and Personal Protective Equipment Programs).
8. Notification of team members.
9. Care to be given to victim in accordance with First Aid & CPR Training.
10. All injured personnel will be accompanied by a supervisor or assigned personnel if sent off-site for medical treatment.
11. Once victim has been taken care of, decontamination procedures will begin in accordance with the Bloodborne Pathogen Program.
12. After decontamination of the area and response personnel, the team will meet to complete the appropriate paperwork.

FIRST AID/CPR RESPONDERS

Name:
Richard Lehman
Priscilla Prentiss
Pete Perez
Bob Brown
Frank Calvo
Bill Lamey
Edison Medina
Charles Hemphill
Pat Ryan
Walter Avalos
Ray Wetter
Manuel Boja
Ernesto Romo
Robert Rodriquez
Elias Sanchez

EARTHQUAKE

In the event of an earthquake, the following procedure should be followed.

1. **Drop, Cover, and hold on!** Move only a few steps to a nearby safe place.
    a. Most injured persons in earthquakes move more than five feet during the shaking.
    b. It is very dangerous to try to leave a building during an earthquake because objects can fall on you.
    c. Pick a safe place where things will not fall on you, away from windows, bookcases, or tall, heavy furniture. If you are in the warehouse, move as far away from the shelving as possible as it is likely to tip over or collapse.
    d. An interior wall is less likely to collapse than a wall on the outside shell of the building.

i. **If you are outdoors, find a clear spot away from buildings, trees, streetlights and power lines. Drop to the ground, cover your head and stay there until the shaking stops.**
    e. Injuries can occur from falling trees, streetlights, power lines, or building debris.

➢ **If you are in a vehicle, pull over to a clear location, stop and stay there with your seatbelt fastened until the shaking has stopped.**
    f. Once the shaking has stopped, proceed with caution. Avoid bridges or ramps that might have been damaged by the quake.

2. Stay indoors until the shaking stops and you're sure that it's safe to exit.
3. After the shaking has stopped, proceed outside and move quickly away from the building to prevent injury from falling debris.
    a. Move carefully and watch out for things that have fallen or broke creating hazards.
    b. Remember to use the stairs, not the elevator.
4. Report to designated area for headcount. Stay in this location until further notice.
    - Do not drive anywhere.
    - Do not call home as this will tie up phone lines for emergency responders.
5. Follow instructions of the ERT Coordinator and members.
6. Be ready for additional earthquakes called "aftershocks."

Supervisors:

1. **Drop, Cover and hold on!** Move only a few steps to a nearby safe place.
2. Stay indoors until the shaking stops and you're sure that it's safe to exit.
3. After the shaking has stopped, report to designated area for head count. Perform head count for the department.
4. Report head count to the Emergency Coordinator.
5. If additional damage, fire, spills, injury, etc. happened in the supervisor's area, detailed information must be reported to Emergency Coordinator immediately.

Emergency Response Team (ERT)

1. Call 911 if immediate emergency services are needed.
2. ERT members will assist in the orderly evacuation of their assigned areas. They will initiate search of their designated areas including the restrooms, and closed rooms if safe to do so to assure all employees, visitors, and contractors, etc. have left the building.
3. ERT members will check themselves for injuries. After taking care of themselves, they will help injured or trapped persons.
4. Look for and extinguish small fires. Eliminate fire hazards.
   - Fire is the most common earthquake related hazard due to broken gas lines, damaged electrical lines, etc.
5. Clean up spilled solvents, bleaches, gasoline, oil or other flammable liquids immediately.
6. The team members will then proceed to the command center to report all information (evacuation status, hazards in the area, etc.) to the Emergency Response Coordinator.
7. The Emergency Response Coordinator will relay the evacuation status and hazard information to necessary outside emergency services (i.e. fire department, ambulance, etc.)
8. Inspect facility for damage.
   - Examine walls, floor, doors, staircases and windows to make sure that the building is not in danger of collapsing.
   - Check for gas leaks.
   - Look for electrical system damage.
   - Check for sewage and water line damage.
   - Check shelving, tanks, process piping, sprinkler systems and gas cylinders for damage.
   - Watch for loose plaster, drywall, ceilings or shelving that could fall.
9. A decision will be made by the Emergency Response Coordinator and key company personnel to determine the status of the evacuation.
10. Personnel may not enter the area until the Emergency Response Coordinator indicates that it is safe to do so.

CIVIL DISTURBANCE EMERGENCY RESPONSE

The police department is available to direct traffic, handle crowds, and provide security services. The police department has a copy of the Contingency and Emergency Response Plan.

In the event of a civil disturbance, the Emergency Response Coordinator will direct the following activities:

1. Ensure that all personnel have vacated areas.
2. Close and lock all exterior building doors and windows.
3. Activate all exterior alarm systems.
4. Alert facility personnel that an emergency condition exists and emergency procedures are to be followed immediately.
5. Notify the police department - Call 911.

BOMB THREAT EMERGENCY RESPONSE

In the event that a bomb threat is received, the following action will be taken.

1. The person receiving the threat will attempt to obtain as much information as possible. See Bomb Threat Reporting Form.
2. The person receiving the threat will immediately notify the Coordinator.
3. The Coordinator will notify the police department. Subsequent action will be taken in conjunction with the police department and in accordance with emergency procedures.
4. Evacuate the premises.

In the event that evacuation of the building(s) becomes necessary, the Emergency Response Coordinator will direct any of the following activities judged necessary by the nature of the emergency:

1. Notify the police department of the evacuation activity and obtain their assistance in providing the safest route for evacuation for the general area.
2. Activate alarm systems.
3. Assign personnel to direct traffic to leave company property in an orderly, coordinated manner.
4. Organize transportation away from company property.
5. Shut down building utilities that will not be required.
6. Leave all exterior doors and windows unlocked.

BOMB THREAT REPORTING FORM

Instructions: Be calm and courteous. Listen and do not interrupt the caller. Notify your supervisor of your activity by prearranged sign, if possible.

DATE:_____ TIME:_____

Exact words of person placing the call:_____

_____

_____

Questions to ask.

1. When is the bomb going to explode?_____
2. Where is the bomb right now?_____
3. What kind of bomb is it?_____
4. What does it look like?_____
5. Why did you place the bomb?_____

TRY TO DETERMINE THE FOLLOWING (circle the appropriate):

Callers Identity:	Male	Female	Adult	Juvenile	
	Age:_____				
	Name:_____				
Voice:	Loud	Soft	High-pitched	Deep	
	Intoxicated				
	Other:_____				
Accent.	Local	Foreign	Region		
	Description:_____				
Speech:	Fast	Slow	Distinct	Distorted	
	Stuttered	Slurred	Nasal		
Language.	Excellent	Good	Fair	Poor	Foul
	Other:_____				
Manner:	Calm	Angry	Rational	Irrational	
	Coherent	Incoherent	Deliberate	Emotional	
	Righteous	Laughing	Intoxicated		
Background Noises:	Office Machines		Factory Machines		
	Bedlam	Trains	Music	Voices	
	Airplanes	Traffic	Party atmosphere	Mixed	
	Other._____				

Additional Information:_____

_____

Immediately after the call, notify the police (911) and then your supervisor and ERT.

_____ _____

Receiving Phone Number Person Receiving Call

FACILITY DESCRIPTION

KIK-SoCal Inc.

General Description of Facility

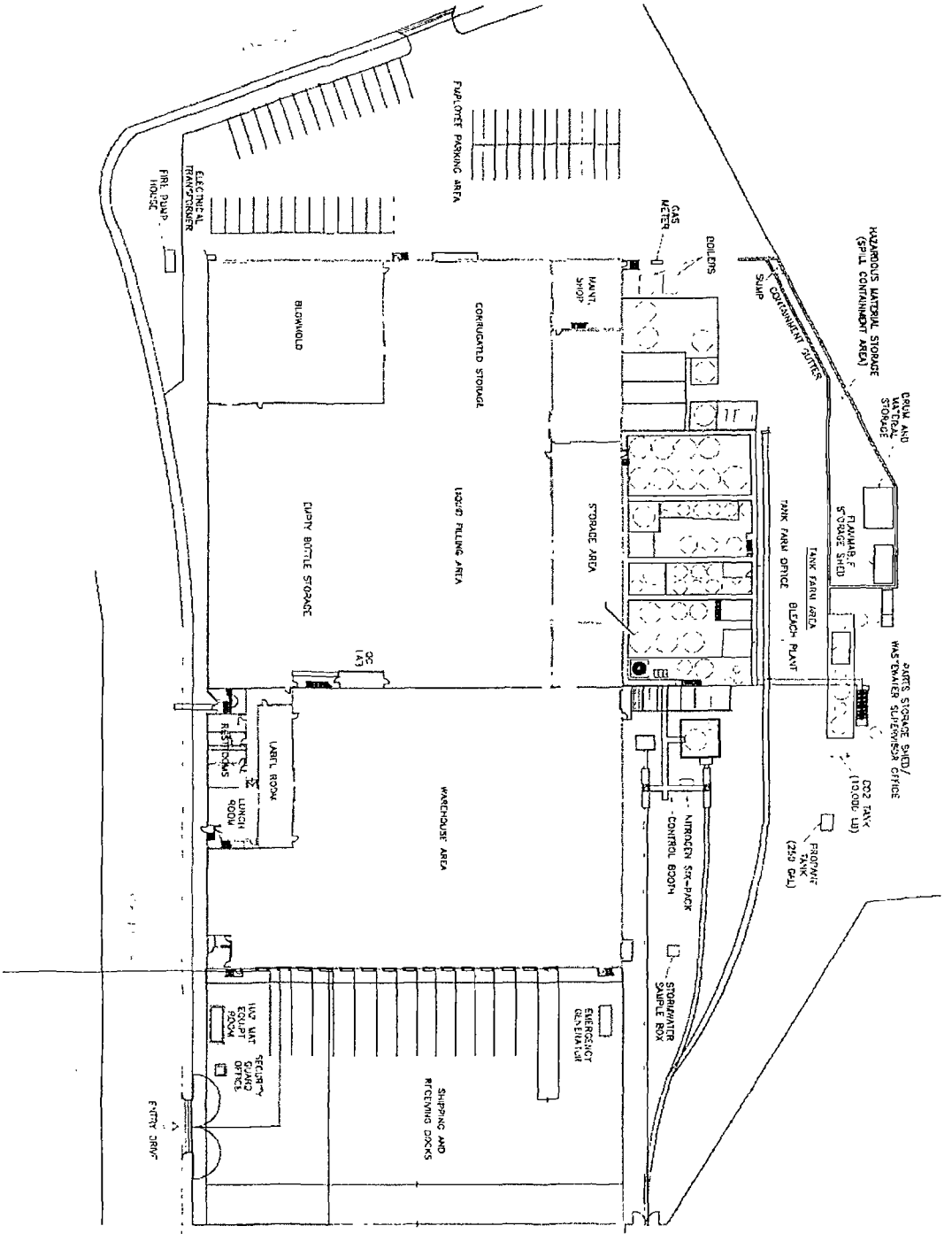
Type of Materials Handled:	Bleach ingredients Chlorine Sodium Hydroxide Hydrogen Peroxide Ammonia
Previous Emergency Incidents: (*Describe briefly the hazardous waste spills that occurred at this location.*)	None
Potential for Emergency Incidents: (*Describe briefly the conditions in hazardous waste areas that could increase the potential for an incident, e.g. storm sewers, heavy trucks machinery with the potential to damage property.*)	• Chlorine release • Chemical spills • Fire • Earthquakes • Medical Emergency

HAZARDOUS WASTE GENERATED ON-SITE

EPA ID# CAD051482784

WASTE STREAM	STORAGE LOCATION	WASTE ID #	ANNUAL GENERATION	MAX AMOUNT STORED
Used oil	Maintenance Storage Area	221	300 gal. a year	300 gal.

EVACUATION PLAN



HAZARDOUS WASTE MANAGEMENT PREVENTION MEASURES

Material/Process/Waste Inspection

All drums are inspected once a week and documented for:

1. Leaks, if found stop leak and clean up measures activated.
2. To ensure that lids and bungs are in place.
3. Ensure that drums are labeled properly.
4. Ensure waste and materials are in control and labeled properly

The storage area has:

1. Correct aisle spacing.
2. A spill kit available.
3. Records available and up to date.
4. Security measures in place.
5. Compatible materials.

Hazardous Waste Management and Training

All hazardous waste and materials are handled in accordance with federal, state, and local regulations.

Annual Right to Know Training (all employees)

1. All employees are trained in the proper handling and management of hazardous materials.
2. All employees are trained on the possible hazards associated with the materials in the workplace.

Annual Waste Management Training

1. Each employee that handles hazardous materials will be trained in the management of hazardous waste in accordance with the Code of Federal Regulations.
2. The Following issues are covered in this training:
    a. Basic Chemistry
    b. Hazardous Waste and Material Handling
    c. Hazardous Waste Determination
        i. Ignitable
        ii. Oxidizers
        iii. Corrosives
        iv. Reactive
        v. Toxicity
        vi. Lethal
        vii. Listed Hazardous Waste
    d. Waste Evaluations
    e. Disclosing a Waste Stream to Local County
    f. Generator Status
    g. Waste Accumulation
    h. Waste Labeling and Storage
    i. Weekly Waste Inspections
    j. Manifesting Procedures/Land Ban
    k. Restriction Forms
    l. Annual Reporting
    m. Record Keeping

HAZARDOUS WASTE STORAGE INSPECTION CHECKLIST

The following inspection of hazardous materials storage is completed on a weekly basis for the following:

1. All hazardous waste barrels should be kept closed except to add or remove waste. After adding or removing waste, remove funnels and replace container's bung or lid.
2. Aisles are to be maintained between all containers for inspection personnel and, in an emergency, fire and spill control equipment.
3. Inspect all containers for leaks or deterioration of containers.
4. Care is to be taken not to spill any materials, virgin or waste, on the ground, either inside or outside the plant. No spills are allowed. In case of a spill, report to your supervisor immediately.
5. Incompatible wastes must be separated by dike, berm, or wall (a strong acid and an organic solvent).
6. Waste materials are monitored to make sure like materials are stored together and not mixed. For example, catalyst-type solvent and paint are kept separate from non-catalyst materials as well as any latex materials.
7. All hazardous waste containers must be properly labeled with appropriate labels noting "Hazardous Waste", identification of contents along with accumulation start date, etc. All labels must be placed slightly to the side of the bung, but barrels must be positioned to be able to read all waste labels.
8. Waste must be stored in a secure area, protected from unauthorized access and damage from vehicles or equipment.
9. Check materials for accumulation and shipping deadlines.
10. All containers storing hazardous materials must be sheltered from outside elements (including sunlight). Additionally, containers must be placed on a curbed, impermeable surface with other compatible materials. (No asphalt floor materials.)
11. Barrels and containers must be emptied of all their contents before removal from inside the building and stored outside. ("Brush clean" or "drip clean" should be the empty test.) All empty barrels stored outside should be stored in horizontal position with both all covers and bungs in place or no covers on at all.
12. Containers may be thrown into the trash or dumpster under certain circumstances. Containers are defined as plastic jugs, cans, pails or barrels. No containers should be put in a dumpster unless they are brush clean or drip clean. Additionally, the containers should be slashed or crushed so they cannot accumulate any liquid on a secondary use.

HAZARDOUS WASTE MANAGEMENT
JOB DESCRIPTION

Emergency Response Team Members

KNOWLEDGE NEEDED

- Must be familiar with local, state and federal regulations pertaining to hazardous waste management and response action.
- Must have good working knowledge of the hazards associated with the chemicals used at the facility and related processes.
- Must have good working knowledge of the personal protective and emergency response equipment provided.
- Must have good working knowledge of the facilities Emergency Response Plan.
- Spill response individuals must be versed in hazardous material handling techniques.

TRAINING REQUIRED

- Initial and Annual Right to Know/Hazard Communication Training.
- Annual Hazardous Waste Management Training
- On-going Emergency Response Team Training Sessions
- Hazardous Material training and refresher training needed for all members that have been approved for initial chemical spill response.

DUTIES INCLUDE

- Responsible for initiating a facility evacuation if needed. Responsible for conducting a head count at the evacuation meeting area.
- Will respond to any emergency situation that may arise.
- The ERT members will respond to a waste related incident in accordance with the Emergency Response Contingency Plan.
- Responsible to interface with local first responders. Will give first responders as much pertinent information regarding the emergency as possible.
- Responsible for making sure Hazardous Waste Director/ERT Coordinator is notified all incidents as soon as possible.

HAZARDOUS WASTE MANAGEMENT
JOB DESCRIPTION

Hazardous Waste Director/ERT Coordinator

KNOWLEDGE NEEDED

- Must be familiar with local, state and federal regulations pertaining to hazardous waste management and response action.
- Must have good working knowledge of the hazards associated with the chemicals used at the facility and related processes.
- Must have good working knowledge of all related facility programs.
- Must have good working knowledge of the facilities Emergency Response Plan.
- Must be well versed in hazardous material handling techniques.

TRAINING REQUIRED

- Initial and Annual Right to Know/Hazard Communication Training.
- Annual Hazardous Waste Management Training
- On-going Emergency Response Team Training Sessions
- Hazardous Material training and refresher training

DUTIES INCLUDE

- Has the overall responsibility for all hazardous waste activities.
- Will assure all personnel working with hazardous waste are properly trained.
- Will organize all related training sessions.
- Will assign hazardous waste duties and ensure they are completed correctly.
- Will periodically assess the Hazardous Waste Management Program.
- Will organize and maintain all relevant hazardous waste documentation (i.e.,, reports, manifests, LDRs, analysis, training sign-offs, etc.).
- Will coordinate the shipment of hazardous waste to licensed TSDFs through licensed carriers.
- Will coordinate response to any emergency situation, which may arise.
- Responsible to interface with local first responders. Will give first responders as much pertinent information regarding the emergency as possible.
- Responsible for making sure the appropriate authorities are notified of the incident (i.e., 9-1-1, Spill Response Service, National Response Center, etc.).
- Employ an outside Hazardous Waste Reclamation, Clean Up and Response Company whenever necessary.

HAZARDOUS WASTE MANAGEMENT
JOB DESCRIPTION

Hazardous Waste Handler

KNOWLEDGE NEEDED

- Must be familiar with local, state and federal regulations pertaining to hazardous waste management.
- Must have good working knowledge of the hazards associated with the chemicals used at the facility and related processes.
- Must have good working knowledge of the personal protective equipment provided.
- Must have good working knowledge of who to contact and what to do in an emergency.
- Must have good working knowledge of the waste streams generated.
- Must have good working knowledge of labeling and grounding/bonding procedures.

TRAINING REQUIRED

- Initial and Annual Right to Know/Hazard Communication Training.
- Annual Hazardous Waste Management Training

DUTIES INCLUDE

- Responsible for properly labeling the waste containers.
- Responsible for placing waste in the correct containers.
- Responsible for transferring waste to storage containers.
- Responsible for wearing the required personal protective equipment when handling waste.
- Responsible for keeping waste containers closed when not in use.
- Responsible for grounding and bonding during the transfer of flammables.
- Responsible for notifying the ERT Coordinator or team member of any incident relating to hazardous waste. This must be done immediately.
- **Hazardous waste handlers are NOT to clean up chemical spills.** The ERT or out-sourced response/reclamation company may only do this.
- Designated handler is responsible for conducting weekly inspections of waste storage areas.
- Designated personnel are responsible for reviewing and signing manifests. Copies are then given to the Director for retention.

KIK-SoCal Inc.
EPA ID# CAD051482784
HAZARDOUS WASTE INSPECTION SIGN OFF

INSPECTOR	BARRELS	DATE	COMMENTS

The following should be checking during the weekly inspections of hazardous waste storage containers/areas·

- Containers are closed
- Containers are properly labeled
- Flammable materials are properly grounded/bonded during transfer.
- Aisle space is adequate
- There is no leakage or container deterioration

Warning Protection Devices

TYPE	LOCATION	ACTIVATION	LIMITATIONS
Portable Fire Extinguishers	See facility map	Manual	Small fires
Sprinkler Systems	Throughout facility	Automatic	Large Fires
Alarm Systems	Fire, Emergency and Chlorine alarms	Automatic	Power Outage or Electrical Fire
Alarm Company Contracts	Throughout Facility at Doors and Motion Sensors	Automatic, Motion Sensors, Armed Doors: Parking Lot, Warehouse, Maintenance, Lunch Room and Tank Farm Doors	Power Outage or Electrical Fire
Telephone	Throughout facility	Dial 9 for Outside Line	Power Outage or Electrical Fire
Intercom	Telephones/2-way radios	Dial 70 For Page	Power Outage or Electrical Fire

Emergency Personal Protective Equipment Available

TYPE	MODEL
"C" kit	
Respirators	Scott Air Supply
Air supply tanks	
Extra Scott Masks	
Level "A" suits	
Level "B" suits	
Level "C" suits	
Position vests	
Air purifier mask	
Alcohol wipes	
Air purifier cartridge	Acid gas – 0 gray and yellow Ammonia – green
Glove rings	
Thermal/chemical resistant gloves	
Rubber gloves	
Liners	
Hard hats	
Safety glasses	
Boots	Sizes: 11-15
Boot covers	
Shoe covers	
Tape	
Traffic cones	
Sports bottle	
Blankets	
B/P Band	
Thermometer	
Stethoscope	
Stokes stretcher	
Folding stretcher	
Chairs	
Bolt cutters	
Shovels	

Spill Kit Contents

TYPE	LOCATION	LIMITATIONS
Brooms	Maintenance and Haz Room	
Squeegee	Maintenance and Haz Room	18", 24", 36"
Plastic trash bags	Maintenance	
Pig absorbent	Maintenance and Haz Room	
Corn absorbent	Maintenance and Haz Room	
Clay absorbent	Maintenance	
EZ-Up shelter	Haz Room	
Air pump & hose	Maintenance	
Liquid pump	Maintenance	Gas powered
Light stand	Haz. Room and Maintenance	
9'x15' salvage cover	Haz Room	
25' length garden hose	Haz Room	
Pools	Haz Room	
Sponge	Haz Room	
Gong brush	Haz Room	
5 gal. Bucket (measured)	Maintenance and Haz Room	
Traffic cones	Haz Room	
Chairs	Maintenance and Haz Room	
Rinse wands	Haz Room	
Alcohol respirator wipes	Maintenance and Haz Room	
Glove liners	Maintenance and Haz Room	
First aid kit	Maintenance and Haz Room	
Boots	Maintenance and Haz Room	Size 11-15
Chemical resistant gloves	Maintenance and Haz Room	
Scissors	Maintenance and Haz Room	
Tape	Maintenance and Haz Room	
30 gal. Trash bags 30 gal. Trash container with lid	Maintenance and Haz Room	

Kik Custom Products - So Cal.
EMERGENCY/HAZ MAT RESPONSE EQUIPMENT INVENTORY

Eployee Signature: _____ Date. _____

STOCK DESCRIPTION	LOCATION	ON HAND INVENTORY	COMMENTS
		COUNT	
EMER RESP BOOK-Job Descriptions	HAZ-MAT ROOM	1	
	TANK FARM OFC	1	
SfSFD RESPONSE INFO BOOK	HAZ-MAT ROOM	1	
	TANK FARM OFC	1	
"C" KIT INSTRUCTION BOOK	HAZ-MAT ROOM	1	
	TANK FARM OFC	1	
EMERGENCY "C" KIT	HAZ-MAT ROOM	1 (SEAL #0001062)	
	CI-2 CAR	1 (SEAL #0001062)	
GAS MONITOR - AIM 500 SERIES	HAZ-MAT ROOM	1	
WIND INDICATOR AIRGUIIDE	MAINTENANCE OFC	1	
SCOTT SCBA's w/COMMUNICATIONS	TANK FARM OFC	1 (2 2 unit)	
	MAINTENANCE OFC	1 (2.2.unit)	
	HAZ-MAT ROOM	3 (2.2 units)	
	HAZ-MAT ROOM	4 (4.5 units)	
AIR SUPPLY TANKS (SPARES)	MAINTENANCE OFC	1 (30 min bottle)	
	HAZ-MAT ROOM	1 (45 min botte)	
	HAZ-MAT ROOM	2 (60 min bottle)	
SCOTT SCBA (spare) MASKS	HAZ-MAT ROOM	5 X-Lg RED	
	HAZ-MAT ROOM	5 Med BLACK	
	HAZ-MAT ROOM	2 Sml GREEN	
LEVEL "A" SUITS	HAZ-MAT ROOM		
LEVEL "B" SUITS	HAZ-MAT ROOM		
ORANGE VESTS	HAZ-MAT ROOM	IC	
	HAZ-MAT ROOM	EGM	
	HAZ-MAT ROOM	INFO OFFICER	
	HAZ-MAT ROOM	SAFETY OFFICER	
	HAZ-MAT ROOM	ENTRY TEAM LDR	
	HAZ-MAT ROOM	TECH SPEC	
	HAZ-MAT ROOM	HMGS	
GLOVES	HAZ-MAT ROOM	GLOVE RINGS	
	HAZ-MAT ROOM	CHEMICAL RESIST	
	HAZ-MAT ROOM	RUBBER	
	HAZ-MAT ROOM	LINERS	

Kik Custom Products - So Cal.
EMERGENCY/HAZ MAT RESPONSE EQUIPMENT INVENTORY

Eployee Signature: _____ Date: _____

STOCK DESCRIPTION	LOCATION	ON HAND INVENTORY	COMMENTS
		COUNT	
CRASH CART	HAZ-MAT ROOM	1	CRASH CART & DECON EQUIPMENT
9' X 15' GROUND COVER	CRASH CART	3	
5/8" X 25' GARDEN HOSE	CRASH CART	3	
WASH DOWN POOLS	CRASH CART	3	
WASH MITTENS	CRASH CART	3	
SPONGE	CRASH CART	3	
BUCKET - 3 gal/1 gal increments	CRASH CART	4	
GONG BRUSH	CRASH CART	2	
"E" SOLUTION (1 gallon)	CRASH CART	0	make up from FG stock
"A" - "E" SOLUTION (1 gallon)	CRASH CART	0	make up from FG stock
TRAFFIC CONES	CRASH CART	6	
SHOWER WANDS	CRASH CART	2	
CHAIRS	CRASH CART	4	
GLOVE LINERS (50 ea /box)	CRASH CART	1 box	
CHEMICAL RESISTANT GLOVES	CRASH CART	4 or	
RUBBER BOOTS	CRASH CART	1 pair ea.	Size 8
RUBBER BOOTS	CRASH CART	3 pair ea.	Size 13
FIRST RESPONDER/FIRST AID KIT	CRASH CART	1	FIRST AID KIT CONTENTS
	CRASH CART		

Kik Custom Products - So Cal.
HAZ-MAT ROOM

Employee Signature: _____ Date: _____

STOCK DESCRIPTION	LOCATION	ON HAND INVENTORY COUNT	COMMENTS
2 CHANNEL RADIO'S SP-50	HAZ-MAT ROOM	777YCY2289	
	HAZ-MAT ROOM	7773V66815	
	HAZ-MAT ROOM	777F3Y6790	
	HAZ-MAT ROOM	777FVN903	
	HAZ-MAT ROOM	777FVSF280	
	HAZ-MAT ROOM	777FALB670	
	HAZ-MAT ROOM	777FVN9041	
	HAZ-MAT ROOM	777FVNB697	
	HAZ-MAT ROOM	777FWS1927	
	HAZ-MAT ROOM	777FVW9044	
	HAZ-MAT ROOM	777FVNB895	
	HAZ-MAT ROOM	777FUNB867	
	HAZ-MAT ROOM	777FUN9032	
	HAZ-MAT ROOM	777FUSF276	
	HAZ-MAT ROOM	777FUSF263	
	HAZ-MAT ROOM	777FALB666	
1 CHANNEL RADIO'S 300 JOB COM	HAZ-MAT ROOM	1741SW5257	
		1741SW5292	
		1741SW5293	
		1741SW5251	
		1741sw5346	
		XXXXXXXXX	
		XXXXXXXXX	
		XXXXXXXXX	
		XXXXXXXXX	
		XXXXXXXXX	
		XXXXXXXXX	
		XXXXXXXXX	
SPARE COMMUNICATION BATTERY'S	HAZ-MAT ROOM	12	
COMMUNICATION CORDS	HAZ-MAT ROOM	4	

HAZARDOUS WASTE GENERATOR LOCAL AUTHORITY NOTIFICATION

March 8, 2007

Police, Fire Department, Hospital, County

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670
(562) 946-6427
EPA ID# CAD051482784

PREPARED BY: United States Compliance Corporation

The United States Environmental Protection Agency and your local regulatory agency require all businesses that produce hazardous waste to notify local emergency response personnel. This notification is meant to establish cooperation in case of a fire or unplanned release of hazardous waste that may require your emergency services. So that you may be prepared to properly respond to an emergency at this site, we are enclosing a copy of their contingency plan. We appreciate your assistance in this matter and look forward to any comments you may have on this plan.

Best Regards,

United States Compliance Corporation

ACKNOWLEDGMENT OF SERVICES FORM FOR KIK-SoCal Inc.

The following facility is providing your agency with their RCRA Contingency Plan:

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670
(562) 946-6427
EPA ID# CAD051482784

The undersigned acknowledges the receipt of this RCRA Contingency Plan for the above referenced facility and indicates that this agency ☐ will or ☐ will not provide appropriate services in the event of an emergency.

Date:_____

Name:_____
(Print)

Title:_____

Signature_____

Emergency Response Incident Report

Company Name:	Contact:	Phone:
Site Location:	Contact:	Phone:
Incident:		Date:
		Time:
		End:
Responsible Party:	Address:	Phone:
Location of Release/Incident:		

Name of Substance:	Qty Released:	Reportable Qty:	SARA:	Released To:

Hazards Associated with Incident/Release:
Apparent Cause of Incident:

Public Service(s) Called:	Phone:	Time:	Arrived:	Depart:

Time Site Released to Public Service:	Time Site Returned to Coordinator:

Regulatory Agencies Called:	Phone:	Spoke to:	Time:	Report:	Relayed to:

Action by Emergency Response Team:	Team Members Involved:	Time:

Evacuation Location:				
Injured Parties:	When:	How:	Injury:	Action Taken:
Additional Team Assignments:				
Preventative Measures Taken to Reduce Possibility of Similar Incident:				
Comments:				

HAZARDOUS WASTE
STORAGE INSPECTION LOG

Company: _____

EPA ID No: _____

FULL NAME	NUMBER OF BARRELS	INSPECTION DATE/TIME	COMMENTS

The following should be checked during the weekly inspection of hazardous waste storage containers/areas:

- *Containers are closed*
- *Containers are properly labeled*
- *Flammable materials are properly grounded/bonded during transfer*
- *Aisle space is adequate*
- *There is no leakage or container deterioration*

Please contact your US Compliance service representative if you have questions on the proper storage or labeling of hazardous waste containers.

ANNUAL HAZARDOUS MATERIALS & WASTE MANAGEMENT TRAINING

KIK-SoCal Inc.

1. Waste Streams and Codes
2. Hazards Associated with Materials and Wastes
3. Handling Materials (PPE)
4. Labeling
5. Containers
6. Storage Limits
7. Satellite Accumulation
8. Shipment Preparation
9. Manifests
10. Record Keeping
11. ERT/Contingency Plan
12. Shutdown Procedure
13. Alarms and Communication
14. Facility Evacuation
15. Review of Individual Job Descriptions
16. Question and Answer

INSTRUCTOR: _____ **DATE:** _____

NAME/TITLE	SIGNATURE

FIRE DRILL REPORT
KIK SOCAL

Facility Location:					
Time Evacuation Started:		Ended:		Total Time:	
Type of Drill:	Planned: ☐	Unplanned: ☐			
Number of Participants (approximately):		Date of Drill:			

	Yes	No
• Did occupants immediately begin to evacuate the building when alarm sounded?	☐	☐
• Did building staff check restrooms, office areas, stairwells and confined areas?	☐	☐
• Was building staff aware of handicapped person(s) and provide assistance?	☐	☐
• Were fire doors closed to contain smoke/fire?	☐	☐
• Did everyone evacuate the building?	☐	☐
• Did everyone remain outside the building and wait for further instructions?	☐	☐
• Was the staff knowledgeable in their assigned duties?	☐	☐
• Did everyone evacuate to the assigned assembly area?	☐	☐
• Was the drill conducted in an orderly manner?	☐	☐

Drill Rating:	Excellent	☐	Good	☐	Poor	☐	Failing ☐

Comments:

Observed/Rated By:		
Emergency Coordinator.		
Emergency Communicator:		

U.S. Compliance Corporation

Hazardous Waste Management

Exhibit E

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

Hazardous Materials/Waste Aboveground Storage Area Inspection Form

Area Inspected: TANK FARM

Date	Inspector's initials	Storage area free of spills and leaks	Containers and storage area properly labeled	Containers within secondary containment	Fire extinguishers serviced and tagged	Hazardous waste labels complete and visible	Eye wash, safety showers, ER equipment functional	Containers sealed with tight-fitting lids/bungs	Incompatibles properly separated	Waste not stored over allowable time	Comments
3-9											Bleach Plant Eyewash
3-16											"
3-23											"
3-30											"
4-5											"
4-13											"
4-20											"
4-27											"
5-4											Replaced Eyewash
5-11											Replaced B.P. Eyewash
5-18											
5-25											Replaced Ch Eyewash 5-19
6-1											
6-8											
6-15											
6-22											
6-29											
7-6											
7-13											
7-20											
7-27											
8-3											
8-10											
8-17											Pick up Rag Bales 8-14-07

Explain any problems found and corrective actions taken in the "Comments" section.

THIS FORM DOES NOT APPLY TO UNDERGROUND TANKS - Maintain completed form at Safety Station.

EQUIPMENT, STRUCTURES, AREAS TO BE CONSIDERED FOR INCLUSION IN AN INSPECTION SCHEDULE

Areas

* Loading Area
* Unloading Area
* Storage Area
* Main Roadways
* Gate Areas
* Periphery

Communication Equipment

* Telephones
* Radios
* Intercoms
* Public Address System

Emergency Equipment

* Fire Blankets
* Fire Extinguisher
* Fire Alarm System
* Emergency Lights
* Portable Pumps/Hose
* Fire Fighting Hoses
* Self-Contained Breathing Apparatus
* Absorbents

Structures

* Berms
* Tank Supports

Safety Equipment

* Emergency Shower/Eyewash
* Face Shields
* Protective Glasses
* Disposable Respirators
* First Aid/Equipment
* Supplies
* Protective Clothing
* Gas Masks
* Chemical Respirators

Security Equipment

* Fences-Facility/Area
* Signs
* Gates
* Locks

Monitoring Equipment

* Liquid Level Monitors
* Leak Detection System
* Fire Detection System
* Liquid Meters

Decontamination Equipment

* Brushes
* Detergent
* Steam Cleaner
* Buckets
* Pools

Hazardous Materials/Waste Aboveground Storage Area Inspection Form

Area Inspected: TANK FARM

Date	Inspector's initials	Storage area free of spills and leaks	Containers and storage area properly labeled	Containers within secondary containment	Fire extinguishers serviced and tagged	Hazardous waste labels complete and visible	Eye wash, safety showers, ER equipment functional	Containers sealed with tight-fitting lids/bungs	Incompatibles properly separated	Waste not stored over allowable time	Comments
9-22-06	CLB	RJW	RJW	RJW	RJW	RJW	STK	RJW	RJW	RJW	Repair Eye wash in Bleach Plant
9-28-06		RJW	RJW	RJW	RJW	RJW	CLB	RJW	RJW	RJW	
10-06-06		RJW	RJW	RJW	RJW	RJW	CLB	RJW	RJW	RJW	
10-13	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
10-20	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
10-27	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
11-3	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
11-10	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
11-17	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
11-24	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
12-1	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
12-8	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
12-15	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
12-22	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
12-29	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
1-5	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
1-12	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
1-19	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
1-26	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
2-2	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
2-9	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
2-16	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
2-23	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	
3-2	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	CLB	

Explain any problems found and corrective actions taken in the "Comments" section.

THIS FORM DOES NOT APPLY TO UNDERGROUND TANKS - Maintain completed form at Safety Station.

EQUIPMENT, STRUCTURES, AREAS TO BE CONSIDERED FOR INCLUSION IN AN INSPECTION SCHEDULE

Areas

* Loading Area
* Unloading Area
* Storage Area
* Main Roadways
* Gate Areas
* Periphery

Communication Equipment

* Telephones
* Radios
* Intercoms
* Public Address System

Emergency Equipment

* Fire Blankets
* Fire Extinguisher
* Fire Alarm System
* Emergency Lights
* Portable Pumps/Hose
* Fire Fighting Hoses
* Self-Contained Breathing Apparatus
* Absorbents

Structures

* Berms
* Tank Supports

Safety Equipment

* Emergency Shower/Eyewash
* Face Shields
* Protective Glasses
* Disposable Respirators
* First Aid/Equipment
* Supplies
* Protective Clothing
* Gas Masks
* Chemical Respirators

Security Equipment

* Fences-Facility/Area
* Signs
* Gates
* Locks

Monitoring Equipment

* Liquid Level Monitors
* Leak Detection System
* Fire Detection System
* Liquid Meters

Decontamination Equipment

* Brushes
* Detergent
* Steam Cleaner
* Buckets
* Pools

Hazardous Materials/Waste Aboveground Storage Area Inspection Form

Area Inspected: T-FARM

Date	Inspector's initials	Storage area free of spills and leaks	Containers and storage area properly labeled	Containers within secondary containment	Fire extinguishers serviced and tagged	Hazardous waste labels complete and visible	Eye wash, safety showers, ER equipment functional	Containers sealed with tight-fitting lids/bungs	Incompatibles properly separated	Waste not stored over allowable time	Comments
4-2-04	CH	✓	✓	✓	✓	✓	✓	✓	✓	✓	
4-9-04	CH	—	—	—	—	—	—	—	—	✓	
4-16-04	CH	—	—	—	—	—	—	—	—	✓	
4-23-04	CH	—	—	—	—	—	—	—	—	✓	
4-30-04	CH	—	—	—	—	—	—	—	—	✓	
5-7-04	CH	✓	—	—	—	—	—	—	—	—	
5-14-04	CH	—	—	—	—	—	—	—	—	—	
5-21-04	CH	—	—	—	—	—	—	—	—	—	
5-28-04	CH	—	—	—	—	—	—	—	—	—	
6-4-04	CH	✓	—	—	—	—	—	—	—	—	
6-11-04	CH	—	—	—	—	—	—	—	—	—	
6-18-04	CH	—	—	—	—	—	—	—	—	—	
6-25-04	CH	—	—	—	—	—	—	—	—	—	
7-2-04	CH	—	—	—	—	—	—	—	✓	—	
7-9-04	CH	✓	✓	✓	✓	✓	✓	✓	✓	✓	
7-16-04	CH	—	—	—	✓	✓	—	✓	✓	✓	
7-23-04	CH	—	—	✓	✓	✓	✓	✓	✓	✓	
7-30-04	CH	—	—	—	✓	✓	✓	✓	✓	✓	
8-6-04	CH	—	—	—	✓	✓	✓	✓	✓	✓	
8-13-04	CH	—	✓	✓	✓	✓	✓	✓	✓	✓	
8-20-04	CH	—	—	—	✓	✓	—	✓	✓	—	
8-27-04	CH	—	—	✓	✓	✓	—	✓	✓	✓	
9-3-04	CH	—	—	—	✓	✓	✓	✓	✓	✓	
9-10-04	CH	—	—	✓	—	—	✓	✓	✓	✓	

Explain any problems found and corrective actions taken in the "Comments" section.

THIS FORM DOES NOT APPLY TO UNDERGROUND TANKS - Maintain completed form at Safety Station.

EQUIPMENT, STRUCTURES, AREAS TO BE CONSIDERED FOR INCLUSION IN AN INSPECTION SCHEDULE

Areas

* Loading Area
* Unloading Area
* Storage Area
* Main Roadways
* Gate Areas
* Periphery

Safety Equipment

* Emergency Shower/Eyewash
* Face Shields
* Protective Glasses
* Disposable Respirators
* First Aid/Equipment
* Supplies
* Protective Clothing
* Gas Masks
* Chemical Respirators

Communication Equipment

* Telephones
* Radios
* Intercoms
* Public Address System

Security Equipment

* Fences-Facility/Area
* Signs
* Gates
* Locks

Emergency Equipment

* Fire Blankets
* Fire Extinguisher
* Fire Alarm System
* Emergency Lights
* Portable Pumps/Hose
* Fire Fighting Hoses
* Self-Contained Breathing Apparatus
* Absorbents.

Monitoring Equipment

* Liquid Level Monitors
* Leak Detection System
* Fire Detection System
* Liquid Meters

Structures

* Berms
* Tank Supports

Decontamination Equipment

* Brushes
* Detergent
* Steam Cleaner
* Buckets
* Pools

Hazardous Materials/Waste Aboveground Storage Area Inspection Form

Area Inspected: TANK FARM

Date	Inspector's initials	Storage area free of spills and leaks	Containers and storage area properly labeled	Containers within secondary containment	Fire extinguishers serviced and tagged	Hazardous waste labels complete and visible	Eye wash, safety showers, ER equipment functional	Containers sealed with tight-fitting lids/bungs	Incompatibles properly separated	Waste not stored over allowable time	Comments
4-7											
4-14											
4-21											
4-28											
5-5											
5-12											
5-19											
5-26											
6-2											
6-9											
6-16											
6-23											
6-30											
7-7											
7-14											
7-21											
7-28											
8-4											
8-11											
8-18											
8-25											
9-1											
9-8											
9-15											

Explain any problems found and corrective actions taken in the "Comments" section.

THIS FORM DOES NOT APPLY TO UNDERGROUND TANKS - Maintain completed form at Safety Station.

EQUIPMENT, STRUCTURES, AREAS TO BE CONSIDERED FOR INCLUSION IN AN INSPECTION SCHEDULE

Areas

* Loading Area
* Unloading Area
* Storage Area
* Main Roadways
* Gate Areas
* Periphery

Communication Equipment

* Telephones
* Radios
* Intercoms
* Public Address System

Emergency Equipment

* Fire Blankets
* Fire Extinguisher
* Fire Alarm System
* Emergency Lights
* Portable Pumps/Hose
* Fire Fighting Hoses
* Self-Contained Breathing Apparatus
* Absorbents

Structures

* Berms
* Tank Supports

Safety Equipment

* Emergency Shower/Eyewash
* Face Shields
* Protective Glasses
* Disposable Respirators
* First Aid/Equipment
* Supplies
* Protective Clothing
* Gas Masks
* Chemical Respirators

Security Equipment

* Fences-Facility/Area
* Signs
* Gates
* Locks

Monitoring Equipment

* Liquid Level Monitors
* Leak Detection System
* Fire Detection System
* Liquid Meters

Decontamination Equipment

* Brushes
* Detergent
* Steam Cleaner
* Buckets
* Pools

BOE-501-HG (S1F) REV. 14 (1-07)

P.O. BOX 942879
SACRAMENTO CA 94279-0057

916-323-9555

STATE OF CALIFORNIA
BOARD OF EQUALIZATION

HAZARDOUS WASTE GENERATOR FEE RETURN

BOARD USE ONLY		
RA-B/A	AUD	REG
RR-QS	FILE	REF
EFF		

RTS-HG
HWCA
9998

SHG

DUE ON OR BEFORE Feb 28, 2007 for Year - Jan through Dec 2006 | 4206

[FOID 23-130-262] 7 HG EF | YOUR ACCOUNT NO. 36-058032 | 6

READ INSTRUCTIONS BEFORE PREPARING

HG
Mail to:
BOARD OF EQUALIZATION
ENVIRONMENTAL FEES DIVISION
P.O.BOX 942879
SACRAMENTO CA 94279-6009

KIK-SOCAL INC
ATTN: GREG WIESE
9028 DICE RD
SANTA FE SPRINGS CA 90670-2520

CAD051482784
SANTA FE SPRINGS, 9028 DICE RD

If you are registered to make your payment for this account by Electronic Funds Transfer (EFT), you must still file your return timely. You may mail your return in the envelope provided or fax it to 916-327-0859. To register to make payments via EFT, please contact us at 916-322-9534.

1. ☐ Please check this box if you no longer generate hazardous waste at this site. Enter the date of last generation: _____. Your account will be closed as of the date entered. *For consolidated accounts, use the enclosed Schedule G to indicate the date each site last generated waste if hazardous waste is no longer being generated at that site.*

A CLASSIFICATION OF GENERATING SITES (Based on amounts of hazardous waste generated during the calendar year or portion thereof)		B NUMBER OF SITES (Do not list tonnage)	C AMOUNT OF FEES	D TOTAL FEES DUE (column B x C)
2. Generators which generate less than 5 tons	2.		0.00	$
3. Generators which generate an amount equal to or more than 5 tons, but less than 25 tons	3.		177.00	177.00
4. Generators which generate an amount equal to or more than 25 tons, but less than 50 tons	4.		1413.00	
5. Generators which generate an amount equal to or more than 50 tons, but less than 250 tons	5.		3533.00	
6. Generators which generate an amount equal to or more than 250 tons, but less than 500 tons	6.		17665.00	
7. Generators which generate an amount equal to or more than 500 tons, but less than 1,000 tons	7.		35330.00	
8. Generators which generate an amount equal to or more than 1,000 tons, but less than 2,000 tons	8.		52995.00	
9 Generators which generate an amount equal to or more than 2,000 tons	9.		70660.00	
10. Amount of fees *(add lines 2 through 9 in column D)*			10.	$ 177.00
11 Less prepayment credit			11.	$ —
12. Total fee due *(subtract line 11 from line 10)*			12.	$ 177.00
13. Penalty *[multiply line 12 by 10% (0.10) if payment is made after the due date shown above]*		PENALTY	13.	$ —
14. INTEREST. One month's interest is due on the total fee for each month or fraction of a month that payment is delayed after the due date The adjusted monthly interest rate is .00917 (11% divided by 12).		INTEREST	14.	$ —
15. TOTAL AMOUNT DUE AND PAYABLE *(add lines 12, 13, and 14)*			15.	$ 177.00

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return.

PRINT NAME AND TITLE	SIGNATURE	TELEPHONE NUMBER	DATE
ROBERT R BROWN GM		(562) 906-2244	1-30-07

Make check or money order payable to State Board of Equalization.
Always write your account number on your check or money order Make a copy of this document for your records

501HG 001

HG

EPA ID#

KIK Corporation Inc.

Hazardous Waste
Management Training

EPA Identification Number

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P.O. Box 806
Sacramento, CA 95812-0806

Generator Information Services Section
1-877-454-4012 (Calif Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif.)
www dtsc.ca gov

2006 VERIFICATION QUESTIONNAIRE

(See back of this form for instructions.)

Complete and return all forms with appropriate fees not later than 30 days from the date of receipt Failure to return all forms will lead to the suspension of your EPA Identification Number.

KIK INTERNATIONAL
9028 DICE RD
SANTA FE SPRINGS, CA 90670-2520

If your mailing address has changed, please PRINT or TYPE the correct address below: Do not abbreviate.

Address:_____

City/State/Zip _____

DO NOT ALTER INFORMATION IN THIS AREA

1. EPA ID Number: CAD051482784
2. Location address: 9028 DICE RD
SANTA FE SPRINGS, CA 90670-2520

If your business has moved, call GISS: Y

3.Federal Employer Number 52-2151205

4.BOE ID Number 36-058032

5. COMPANY OWNER INFO:

IK SOCAL INC
9028 DICE RD
SANTA FE SPRINGS, CA 90670-2520
(310)946-6427
(000)000-0000

NOTE: California EPA ID numbers issued by DTSC may not be transferred to another owner If the ownership of your organization has changed, please call GISS for assistance. Do NOT fill in new owner information below.

Company owner or Corp. name _____

Address _____

City/State/Zip _____

Telephone._____

Fax Number_____

Date of ownership change._____

6. ☐ My new EPA ID number is ___ ___ ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

7. COMPANY NAME:

KIK INTERNATIONAL

If printed company name is incorrect, please provide correct name:

Company name/ AKA: _____

8. CONTACT INFO:

DERRELL JOHNSON/SAFTY ENV SUP
9028 DICE RD
CA, CA 90670-2520
(310)946-6427
(000)000-0000

If printed contact is incorrect or blank, please provide correct information:

Name/Title _____

Address _____

City/State/Zip _____

Telephone:_____

Fax Number_____

Business email address _____

9. SIC CODE (4 digits):

2841

If printed SIC Code is incorrect or blank, please provide correct information:

___ ___ ___ ___

10.☐ **If the business has moved you must CANCEL the EPA ID number listed on Line 1. (See reverse side.) Check here if you wish to CANCEL the EPA ID number.**

Hazardous Waste Handlers:

This is your fee assessment for the Environmental Protection Agency Identification (EPA ID) Number Verification Fee and Manifest Fee as required by Health and Safety Code, Sections 25205.16 and 25205.15. The EPA ID Number Verification Fee is for all valid EPA ID numbers held by your organization during the fiscal year 2005/2006 (from **July 1, 2005 through June 30, 2006**) The Manifest Fee assessment is for all manifests used by your organization from **January 1, 2005 through December 31, 2005.**

Instructions are included to assist you in completing these forms and calculating the required fees, if applicable. Frequently asked questions and answers are available under "Managing Hazardous Waste" at our website www.dtsc.ca.gov If you have any questions, please contact DTSC's Generator Information Services Section (**GISS**) toll free at **1-877-454-4012** if you are dialing within California, or **1-916-255-4439** if you are outside California. The GISS operating hours are **8:30 a.m. to 4:30p.m.** (Pacific Standard Time), Monday through Friday. *(Note: The phone lines will be very busy Please be prepared to be placed on hold.)*

All forms and payment, if any, are due **30 days from the receipt of this assessment notice**. Checks are to be made payable to the Department of Toxic Substances Control or "DTSC" Return all forms and payment in the enclosed return envelope or to the following address:

Accounting Unit, EPA ID
Department of Toxic Substances Control
PO Box 806
Sacramento, CA 95812-0806

INSTRUCTIONS FOR COMPLETING THE VERIFICATION QUESTIONNAIRE

You are mandated by law to provide or verify the information on the verification questionnaire and return it to DTSC.

Printed organization name and mailing address:
Provide any correction to the organization's printed mailing address.

Lines 1 and 2 (shaded box):
Check your records to verify that the printed EPA ID number and location address are both correct Do not change, strike out, or write over this information If the information is incorrect, please call GISS for assistance. *(NOTE: EPA ID numbers are site specific to the location to which they are originally issued. EPA ID numbers cannot be moved to another location. If the location address printed on Line 2 is no longer the address of your site, please call GISS for assistance. You may need a new EPA ID number.)*

Lines 3 and 4:
Provide your Federal Employer Number and BOE ID Number, you may call BOE at (916) 322-9477 for more information

Lines 5 & 6
Provide any corrections and/or additions to the information pre-printed on this form. However, if there has been a change in ownership, call GISS. When there is a change in ownership, you must get a new EPA ID number. GISS staff will instruct you about Line 6 when you call.

Lines7 and 8.
Provide any corrections and/or additions to the information pre-printed on this form Please provide your business email address. This will be part of the facility record and can be used to send you information on the annual verification process. For security reasons, we do not accept personal Hotmail, Yahoo, or Juno email addresses.

Line 9
Provide any corrections to your SIC (Standard Industrial Classification) Code for your primary business activity. If no SIC Code is pre-printed on Line 9, please provide the primary SIC Code for your business The SIC Code is a four digit number that best describes your company's primary business activity If your company's SIC Code is unknown, you can obtain the number on the Internet at: www.osha.gov/oshstats/sicser.html

Line10:
Check this box ONLY if you wish to cancel the EPA ID number shown on Line 1 The cancellation date will be June 30, 2006 If your operations will continue after June 30, 2006, do not check the box at this time. Please notify DTSC when you cease operations. Please notify US EPA when canceling a US EPA ID number at (415) 495-8895.

If your organization has more than one EPA ID number, you should receive a Verification Questionnaire and a Schedule A – Manifest Calculation Sheet for each of your permanent EPA ID numbers. You must complete both forms for each EPA ID number assigned to your organization *(NOTE: The total dollar amount owed by your organization includes the manifest fees for all of your organization's EPA ID numbers The total manifest fee dollar amount must be entered in Section B of the Schedule B – Fees Summary Sheet.)*

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P O. Box 806
Sacramento, CA 95812-0806

Generator Information Services Section
1-877-454-4012 (Calif Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif)
www dtsc ca.gov

SCHEDULE A – MANIFEST FEE CALCULATION SHEET (2005 Manifests)

(See back of this form for sample manifest form.)

EPA ID Number: CAD051482784 **Name of organization:** KIK INTERNATIONAL

From **January 1, 2005 through December 31, 2005,** the Department of Toxic Substances Control recorded the number of California Manifests shown at the right using the EPA ID printed above.

Non-recycled: 7

Recycled: 6

(NOTE: There is no fee for solely recycled manifests.)

Manifest Fee Calculation:

a. Enter the total number of **non-recycled** manifests from above... 7

b. How many of the **non-recycled** manifests listed on Line a are non-recycled air compliance solvent manifests..... 0 X $3.50 = $ _____

c. Subtract the number of manifests on Line b. from Line a. ..... 7 X $7.50 = $ 52.50

d. No fee due for **recycled** manifests..... $ 0 00

e. Total of Line b. + Line c. .....= $ 52.50

Note: The manifest count on Lines b. and c. should equal the count on Line a.

INSTRUCTIONS FOR COMPLETING SCHEDULE A

1.
   - For lines a. – e. above, enter the numbers requested for each line.
   - For line b. multiply the number of manifests by $3.50 and record the dollar amount.
   - For line c. multiply the number of manifests by $7.50 and record the dollar amount.
   - For line e. add dollar amounts of lines b. and c. This total is the manifest fees due for the EPA ID number shown at the top of the page.

2. For this assessment there are three types of manifests. non-recycled, recycled and air compliance solvents manifests Manifests used *solely* for recycled waste will have a handling code reported as **"01"** or **"R01"** in item **K** on the manifest form (see circled area on manifest sample on the back of this form). All wastes listed on a manifest must have handling codes of "01" or "R01" to be counted as a solely recycled manifest. You need to pay manifest fees only for non-recycled manifests. There is no fee for recycled manifests

3. If you believe the manifest totals shown in the box above are incorrect, you may use the manifest totals from your own files to calculate the fee. However, please be aware that any difference between the amount you report and the amount printed above is subject to audit by DTSC.

4. On January 1, 1999 many businesses were required to switch from petroleum-based solvents to air compliance solvents (also called water-based cleaners). The fee for manifests used solely for hazardous waste derived from air compliance solvents was reduced from $7.50 to $3.50. Most air compliance solvent waste is now recyclable. Manifests used to ship air compliance solvents that were recycled should not be charged $3.50. The Manifest Fee Calculation above includes air compliance solvent manifests as part of the non-recycled manifest count. Businesses that do not recycle their air compliance solvent waste who desire to use the reduced $3.50 fee must use their internal records to identify manifests used solely for air compliance solvent wastes.

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No | 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 | A. State Manifest Document Number: 95302045

4. Generator's Phone ( ) | B. State Generator's ID

5. Transporter 1 Company Name | 6. US EPA ID Number | C. State Transporter's ID | D. Transporter's Phone

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

9. Designated Facility Name and Site Address | 10. US EPA ID Number | G. State Facility's ID | H. Facility's Phone

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	K. Waste Number
a.					State EPA/Other
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

SAMPLE ONLY! DO NOT FILL OUT!

This is a sample manifest included for your information only.

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information

In order to determine if your waste was recycled or non-recycled, look at the handling codes in Item K. (circled above) on your manifest copy(s).

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 | Signature | Month Day Year

TRANSPORTER

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

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

FACILITY

19. Discrepancy Indication Space

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

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

DTSC 8022A (9/94)
EPA 8700—22

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P.O. Box 806
Sacramento, CA 95812-0806

Generator Information Services Section
1-877-454-4012 (Calif Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif.)
www.dtsc ca gov
2006

SCHEDULE B – FEES SUMMARY SHEET

(See back of this form for complete instructions.)

All completed forms and appropriate fees must be submitted **not later than 30 days** from the date of receipt.

A. EPA ID NUMBER VERIFICATION FEE (July 1, 2005 through June 30, 2006)

1. Name of your organization: KIK INTERNATIONAL

2. Enter the total number of California employees in your entire organization: 78
   (Please read instructions for Line 2 on the back of this form.)

Number of Employees	1 – 49	50 – 74	75 – 99	100 – 249	250 – 499	500 or more
EPA ID Fee Rate	NO FEE	$150	$175	$200	$225	$250

(Total EPA ID Number Verification Fees not to exceed $5000)

3. Enter the EPA ID Number Verification Fee rate from the table above: $ 175

4. Enter the total number of **permanent** EPA ID numbers held by your organization: 1
   *(NOTE: Attach a VQ form and Schedule A for **each** permanent EPA ID number you are reporting. Numbers that begin with "CAC" should not be included in your total on Line 4. See instructions.)*

5. Multiply Line 3 by Line 4: =$ 175

6. **TOTAL** EPA ID Number Verification Fee due (Enter the dollar amount from Line 5 above **OR** $5000, whichever amount is less.): $ 175

B. MANIFEST FEE (January 1, 2005 through December 31, 2005)

1. Enter the dollar amount from Line e on your Schedule A – Manifest Fee Calculation Sheet.
   *(If you are reporting more than one ID number, enter the **TOTAL** of the dollar amounts from Line e on **all** of your Schedule A – Manifest Fee Calculation Sheets.)* $ 52.50

C. GRAND TOTAL OF EPA ID NUMBER VERIFICATION FEES AND MANIFEST FEES

1. **Add** Line **A6** and Line **B1**, enter the total dollar amount.
   It is not uncommon to not owe fees. You are still required to complete and submit all forms.
   If fee is due, please make your check payable to "DTSC" for the total amount on this line: =$ 227.50

*** **Please write one of your EPA ID numbers on your check.**

To pay your fees via **credit card**, complete the enclosed "EPA ID and Manifest Fee Credit Card Payment Form".

I hereby certify under penalty of perjury that the information on the Verification Questionnaire(s), Schedule A(s) and Schedule B is true and correct.

Signature of Preparer: ROBERT A BROWN Title: GENERAL MANAGER

Name (please print): ROBERT A BROWN Date: 6-29-05 Phone: 562) 906-2244

THIS SECTION FOR DEPARTMENT USE ONLY			
Check No.	$AMOUNT	DATE	CID NO
12560055	12560092	12560065.	
12560035	12560091	AMOUNT DUE	
12560075	12560096.	PRIMARY ID #:	

INSTRUCTIONS FOR COMPLETING SCHEDULE B – FEES SUMMARY SHEET

SECTION A (EPA ID Number Verification Fee for 2005/2006)

NOTE: Health and Safety Code, Section 25205.16 requires DTSC to verify the accuracy of information related to generators, transporters and facilities authorized to treat, dispose of, store, or recycle hazardous waste. DTSC captures this data through the Verification Questionnaire and uses the collected information to ensure that the Hazardous Waste Information Network database is current and accurate. The EPA ID Number Verification Fee, which has been established by State legislation, funds this effort.

Line 1: Enter the **full** name of your organization. Do not abbreviate.

Line 2: Enter the total number of individuals employed in California by your organization. An employee must have worked more than 500 hours during the calendar year 2005 to be included in your calculation. *("Organization" is defined as a registered corporation, sole proprietor, partnership, or company. For public agencies, "organization" is defined as a city, county, commission, agency, department or district.)*

Line 3: Based on the number of employees entered on Line 2, determine your EPA ID Number Verification Fee rate by using the table shown and then enter that rate on Line 3.

Line 4: Enter the total number of **permanent** EPA ID numbers assigned to your organization. Do not include "CAC" numbers in your total, as they are temporary and not subject to the EPA ID Number Verification Fee. If you indicated on the Verification Questionnaire that you wish to deactivate a permanent EPA ID number, **you must still include that number in this total.** The fee is required because that EPA ID number was active during the billing period (July 1, 2005 through June 30, 2006).

Line 5: Enter the EPA ID Number Verification Fee. This fee is determined by multiplying the fee rate (reported on Line 3) by the total of permanent EPA ID numbers assigned to your organization (reported on Line 4).

Line 6: Enter **either** the amount shown on Line 5, **OR** $5000 (whichever amount is **less**). The maximum EPA ID Number Verification Fee is $5000 per organization.

SECTION B (Manifest Fees for January 1, 2005 through December 31, 2005)

Line 1: Enter the **total** manifest fees due. This amount is shown on Line e on the **Schedule A** – Manifest Fee Calculation Sheet. If your organization has more than one EPA ID number, enter the **total** of the dollar amounts from **all** your Schedule A – Manifest Fee Calculation Sheets.

SECTION C (Grand total of all EPA ID Number Verification Fees and Manifest Fees owed)

Line 1: Add Line **A6** and **B1**. The sum of these two amounts is the total fee due from your organization. Please make your check payable to "DTSC" or use the credit card payment form Please write one of your EPA ID numbers on your check.

IMPORTANT: **YOU MUST RETURN THE ORIGINAL OF THE FOLLOWING DOCUMENTS WITHIN 30 DAYS:**

- ✓ **Verification Questionnaire** (one form for **each** EPA ID number)
- ✓ **Schedule A – Manifest Fee Calculation Sheet** (one form for **each** EPA ID number)
- ✓ **Schedule B – Fee Summary Sheet** (only **ONE** of these forms is needed for your entire organization)

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P.O. Box 806
Sacramento, CA 95812-0806

Generator Information Services Section
1-877-454-4012 (Calif Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif.)
www dtsc.ca gov

EPA ID AND MANIFEST FEE CREDIT CARD PAYMENT FORM

To pay your EPA ID number fee and manifest fees by credit card, complete this form and return it with your completed:

Verification Questionnaire(s) – one for each EPA ID number reported in this packet;
Manifest Fee Calculation Sheet Schedule A(s) – one for each EPA ID number reported in this packet; and
Fees Summary Sheet Schedule B – only one is required for your entire organization.
If you prefer to pay by check, please discard this form.

1) Company Name: KIK INTERNATIONAL

2) Name on Credit Card: ROBERT R. BROWN

3) Type of Card: ☐ AMERICAN EXPRESS ☐ DISCOVER ☐ MASTERCARD ☒ VISA

FOIA ex 6, Personal Privacy

6) Total Amount of Fee Being Paid: $ 227.50
(Should match the amount reported as grand total on the Fees Summary Sheet Schedule B)

7) Signature: [signature]
(The authorized credit card holder's original signature must be present in order for your payment request to be processed.)

8) Telephone Number: (562) 941-3681

Send completed forms and payment to the following address:

Accounting Unit, EPA ID
Department of Toxic Substances Control
P.O. Box 876
Sacramento, CA 95812-0876

If you want to ensure the confidentiality of your credit card information, please send all completed forms to this address. Do not use the envelope provided.

IMPORTANT: By completing and signing this form, you are authorizing DTSC to request funds from the credit card company you have indicated. If the request is denied by your credit card company, DTSC will contact you and require payment by another acceptable means.

PRIVACY STATEMENT: The information on this form is requested by the Department of Toxic Substances Control, Accounting Unit. All information is voluntary. The purpose of this information is to verify the authenticity of the credit card you wish to use to pay your EPA ID Number and Manifest Fees. Failure to provide answers to any of the questions may cause your credit card payment request to be denied. For more information or access to this record, please contact the DTSC Accounting Unit at (916) 327-8514 or you may write to the address shown above.

THIS SECTION FOR DEPARTMENT USE ONLY

PRIMARY ID NO: _____ **CID NO:** _____

APPROVED ☐
NOT APPROVED ☐

DEPARTMENT OF TOXIC SUBSTANCES CONTROL
P.O. BOX 806
SACRAMENTO, CA 95812-0806

FIRST CLASS

SACRAMENTO CA JUN-5'06 PB METER 6796981

U.S.POSTAGE 0.63

IMPORTANT ANNUAL VERIFICATION AND CRITICAL NEW FEDERAL MANIFEST CHANGES.

90670+2320-28 C021

Linda Adams
Agency Secretary
Cal/EPA

Department of Toxic Substances Control

Maureen F. Gorsen, Director
1001 "I" Street
P.O Box 806
Sacramento, California 95812-0806

Arnold Schwarzenegger
Governor

May 19, 2006

CRITICAL HAZARDOUS WASTE MANIFEST CHANGES
COMING SEPTEMBER 5, 2006

To All Hazardous Waste Handlers,

Federal and state hazardous waste manifest regulations change on September 5, 2006, and require you to use a new manifest form.

- **IF YOU MANIFEST HAZARDOUS WASTE, WE URGE YOU TO BECOME FAMILIAR WITH THESE NEW REQUIREMENTS TO DETERMINE HOW THEY AFFECT YOU AND YOUR BUSINESS.**
- **If you are a generator that uses a Consolidated Transporter and never directly manifest hazardous wastes, these changes will not affect you.**
- **If you only ship Universal Waste and do not manifest now, these changes do not affect you.**

What Are the Major Changes? U.S. EPA revised the Uniform Hazardous Waste Manifest and mandated its use throughout the nation, replacing all state versions. You cannot use current versions of California's manifest or manifests from other states for shipments that start after September 4, 2006

However, the new six-page manifest form is different. It is not color-coded and does not include a copy for generators to submit to the state. You must purchase manifests printed by a U.S. EPA-approved printer for shipping wastes on and after September 5, 2006. DTSC will not print manifests.

The new U.S. EPA manifest rules also change the hazardous waste label but you can use your current supply of labels as long as it contains the Generator ID number. Please see the Supplemental Instructions (attached) and fact sheet (online) for detailed changes including new handling codes, now called HW Report Management Method codes. Carefully review the form and federal instructions on our website to determine how the changes impact you. ***Supplemental California Manifest Instructions* contain instructions that WILL NOT APPEAR on the new federal manifest. *Retain these supplemental instructions!***

For More Information: Go to DTSC's webpage at www.dtsc.ca.gov/IDManifest. Send comments and questions to CAManRegs@dtsc.ca.gov or call the DTSC Public and Business Liaisons at 1-800-72-TOXIC. Your transporter and facility are also sources of manifest information.

Training Workshops This Summer: DTSC will present training workshops in coordination with the California Waste Association (CWA), the Independent Waste Oil Collectors and Transporters Association (IWOC) and other business groups. For only the CWA sessions (in June and July), register on line at **www.go2cwa.org or call 562-983-8142**. For dates and times, and for online copies of the training slides and handouts, check DTSC's website. Your local agencies (CUPAs) may also offer training. Please check with them

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4 Manifest Tracking Number

GENERATOR

5 Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Generator's Phone

6 Transporter 1 Company Name — U S EPA ID Number

7 Transporter 2 Company Name — U S EPA ID Number

8 Designated Facility Name and Site Address — U S EPA ID Number

Facility's Phone

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes		
	1							
	2							
	3							
	4							

14 Special Handling Instructions and Additional Information

15 **GENERATOR'S/OFFEROR'S CERTIFICATION** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name — Signature — Month Day Year

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit

Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name — Signature — Month Day Year

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) — U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) — Month Day Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name — Signature — Month Day Year

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

OSP 06 96210

Effective 09/05/2006

Supplemental California Manifest Instructions

Federal and State hazardous waste manifest regulations change on September 5, 2006.

Detailed manifest instructions are printed on the back of the new federal manifest These Supplemental California Instructions cover additional California requirements. Please use the instructions printed on the new manifest for item by item directions Materials are available at www dtsc ca gov (under Managing Hazardous Waste, Manifests), including fact sheets and California's manifest regulations, sample manifests, and federal instructions. For load rejections and consolidated manifesting, refer to the regulations and fact sheets.

IMPORTANT MANIFEST CHANGES - PLEASE READ AND SAVE AS A REFERENCE

The U S Environmental Protection Agency (EPA) revised the Uniform Hazardous Waste Manifest and requires the use of only the new version nationally after September 4, 2006 **States will no longer be allowed to modify the form or the instructions.** Old versions of the California manifest, or manifests from other states, **may not be used after September 4, 2006.** The new manifest form is no longer color coded, and the new six-part form does not include a copy for generators to submit to their state, although California requires generator to submit a copy

Additional Information and Instruction Changes

- Adds space for emergency response number,
- Adds Generator's site address,
- Allows up to six waste codes for each waste stream,
- Adds a check box to indicate if waste stream is U S DOT regulated,
- Adds space for import/export information,
- Adds room for destination facilities to note discrepancies or if container residues exceed empty levels,
- Adds a new field for a manifest reference number when waste is rejected or if container residues are shipped on a new manifest,
- Adds a separate field for alternative facility information and signatures,
- Uses HW Report Management Codes to replace handling codes,
- Prohibits the use of fractions or decimal points in waste quantities in Item 10, and
- Discourages use of large quantity units in Item 11 (e g tons or cubic yards) when other units, i e pounds, are more accurate

Where Do I Mail Manifests?
Same P O Boxes - No Change

GENERATORS SEND TO.

DTSC Generator Manifests
P O Box 400
Sacramento, CA 95812-0400

TSDFs/DESTINATION FACILITIES SEND TO·

DTSC Facility Manifests
P O Box 3000
Sacramento, CA 95812-3000

Where Do I Get Manifests?

California will not sell the new manifest forms. Forms are available only from private printers approved by EPA. EPA posts approved printers at www epa gov/epaoswer/hazwaste/gener/manifest/registry/index htm

Generators Must Submit Manifest Copies!

California requires generators and permitted transfer, treatment, storage, and disposal Facilities (Facilities) to submit manifests The federal manifest form does not include a Generator-to-State submittal page, like the old manifest does (the blue page) Within 30 days of shipping the waste, generators must submit a copy of each manifest to DTSC This copy could either be a legible photocopy or the "Generator Retains" copy, if generators receive a signed facility copy back within 30 days Generators may submit a copy of the "Generator Retains" copy (page 6), the top page (the most legible one - page 1), or any other page, as long as it is readable **and legible**

What About Submitting Manifests for Rejected Loads?

Generators should send copies of manifests they sign when **receiving** rejected waste or container residues to the Department of Toxic Substances Control's (DTSC) Facility Manifests at P O Box 3000 Facilities **signing** new manifests for rejected loads should submit the generator copy to DTSC Generator Manifests at P O Box 400 See the rejected load fact sheet on DTSC's web site

How Are California Manifest Requirements Different from Federal?

- California requires conditionally exempt small quantity generators to use manifests and regulates more waste as hazardous
- DTSC uses the submitted generator and facility manifest copies for cradle-to-grave tracking of waste.
- California's definition of an "empty" container is more stringent Non-empty containers must be manifested, including bulk containers, whether the waste is federal RCRA or non-RCRA
- Facilities in other states are required to submit copies to DTSC when waste generated in California is received out of state Out of State generators sending waste to California facilities, or that will be exported through California, are encouraged to submit manifest copies

Where Do I Find California Waste Codes?

The new manifest has six blank boxes for waste codes for each waste stream.
If the waste is RCRA regulated, at least one box must include a RCRA waste code For waste generated in or shipped to California, a CA state waste code is also required The additional boxes are for other states' codes when the waste is sent out of state to a state with codes, or for extra RCRA codes California Waste Codes are printed on the reverse side of these instructions only, not on the instructions printed on the manifest They are also found in Title 22, California Code of Regulations, Appendix XII to Chapter 12 of Division 4 5

What are Hazardous Waste Report Management Method Codes (HWRMM Codes)?

Previously, California's manifest instructions required Destination Facilities to use one of 10 handling codes to report how the waste was handled at that facility The new manifest uses 28 Management Method Codes These are the same codes used in Biennial Reports One of the HWRMM codes shown on the other side must be added on the manifest by the **Destination Facilities only Generators and transporters do not add these codes**

Contact Information:

First, visit the DTSC web page at www dtsc ca gov/IDManifest for training information and review the basic instructions printed on the manifest This document includes Supplemental Instructions only for use in California For more information, contact your transporter or facility, or call DTSC's Public and Business Liaisons at 800-72-TOXIC

CALIFORNIA WASTE CODES

California Restricted Wastes – Use First , if applicable	
711	Liquids with cyanides ≥ 1000 mg/l
721	Liquids with arsenic ≥ 500 mg/l
722	Liquids with cadmium ≥ 100 mg/l
723	Liquids with chromium (VI) ≥ 500 mg/l
724	Liquids with lead ≥ 500 mg/l
725	Liquids with mercury ≥ 20 mg/l
726	Liquids with nickel ≥ 134 mg/l
727	Liquids with selenium ≥ 100 mg/l
728	Liquids with thallium ≥ 130 mg/l
731	Liquids with polychlorinated biphenyls ≥ 50 mg/l
741	Liquids with halogenated organic compounds ≥ 1000 mg/l
751	Solids or sludges with halogenated organic comp 1000 mg/kg
791	Liquids with pH ≤ 2
792	Liquids with pH ≤ 2 with metals
801	Waste potentially containing dioxins
CALIFORNIA NON-RESTRICTED WASTES	
Inorganics	
121	Alkaline solution (pH ≥12 5) with metals (antimony, arsenic, barium, beryllium, cadmium, chromium, cobalt, copper, lead, mercury, molybdenum, nickel, selenium, silver, thallium, vanadium, and zinc)
122	Alkaline solution without metals (pH ≥ 12 5)
123	Unspecified alkaline solution
131	Aqueous solution (2 < pH < 12 5) containing reactive anions (azide, bromate, chlorate, cyanide, fluoride, hypochlorite, nitrite, perchlorate, and sulfide anions)
132	Aqueous solution w/metals (< restricted levels and see waste code 121 for a list of metals)
133	Aqueous solution with 10% or more total organic residues
134	Aqueous solution with <10% total organic residues
135	Unspecified aqueous solution
141	Off-specification, aged, or surplus inorganics
151	Asbestos-containing waste
161	Fluid-cracking catalyst (FCC) waste
162	Other spent catalyst
171	Metal sludge (see 121)
172	Metal dust (see 121) and machining waste
181	Other inorganic solid waste
Organics	
211	Halogenated solvents (chloroform, methyl chloride, perchloroethylene, etc)
212	Oxygenated solvents (acetone, butanol, ethyl acetate, etc)
213	Hydrocarbon solvents (benzene, hexane, Stoddard, etc)
214	Unspecified solvent mixture
221	Waste oil and mixed oil
222	Oil/water separation sludge
223	Unspecified oil-containing waste
231	Pesticide rinse water
232	Pesticides and other waste associated with pesticide production
241	Tank bottom waste
251	Still bottoms with halogenated organics
252	Other still bottom waste
261	Polychlorinated biphenyls and material containing PCB's
271	Organic monomer waste (includes unreacted resins)
272	Polymeric resin waste
281	Adhesives
291	Latex waste
311	Pharmaceutical waste
321	Sewage sludge
322	Biological waste other than sewage sludge
331	Off-specification, aged, or surplus organics
341	Organic liquids (nonsolvents) with halogens
342	Organic liquids with metals (see 121)
343	Unspecified organic liquid mixture
351	Organic solids with halogens
352	Other organic solids

Sludges	
411	Alum and gypsum sludge
421	Lime sludge
431	Phosphate sludge
441	Sulfur sludge
451	Degreasing sludge
461	Paint sludge
471	Paper sludge/pulp
481	Tetraethyl lead sludge
491	Unspecified sludge waste
Miscellaneous	
511	Empty pesticide containers 30 gallons or more
512	Other empty containers 30 gallons or more
513	Empty containers less than 30 gallons
521	Drilling mud
531	Chemical toilet waste
541	Photochemicals / photoprocessing waste
551	Laboratory waste chemicals
561	Detergent and soap
571	Fly ash, bottom ash, and retort ash
581	Gas scrubber waste
591	Baghouse waste
611	Contaminated soil from site clean-ups
612	Household waste
613	Auto shredder waste

HW REPORT MANAGEMENT METHOD CODES	
New Codes	**Descriptions**
H010	Metals recovery including retorting, smelting, chemicals, etc
H020	Solvents recovery
H039	Other recovery of reclamation for reuse including acid regeneration, organics recovery, etc
H050	Energy recovery at this site -- use as fuel (includes on-site fue blending)
H061	Fuel blending prior to energy recovery at another site
H040	Incineration--thermal destruction other than use as a fuel
H071	Chemical reduction with or without precipitation
H073	Cyanide destruction with or without precipitation
H075	Chemical oxidation
H076	Wet air oxidation
H077	Other chemical precipitation with or without pre-treatment
H081	Biological treatment with or without precipitation
H082	Adsorption
H083	Air or steam stripping
H101	Sludge treatment and/or dewatering
H103	Absorption
H111	Stabilization or chemical fixation prior to disposal at another site
H112	Macro-encapsulation prior to disposal at another site
H121	Neutralization only
H122	Evaporation
H123	Settling or clarification
H124	Phase separation
H129	Other treatment
H131	Land treatment or application (to include on-site treatment and/or stabilization)
H132	Landfill or surface impoundment that will be closed as landfill (to include on-site treatment and/or stabilization)
H134	Deepwell or underground injection (with or without treatment)
H135	Discharge to sewer/POTW or NPDES (with prior storage--with or without treatment)
H141	Storage, bulking, and/or transfer off site--no treatment/recovery (H010-H129), fuel blending (H061), or disposal (H131-H135) at this site

STATE OF CALIFORNIA
Dept. of Toxic Substances Control
P.O Box 806
Sacramento, CA 95812-0806

John 916-322-9534
Board of Equalization 916-323-9455
LIC. 2/2/2006
Copy from 9T -
Send Letter
TO DOTC
Status Cancelled
90 DS
Industrial
Waste

Mark Alley - Airbus
Take - will Charge

Mark Send LIC
Letter
~~Dept~~
9T.
~~Letter~~
Transportation -
ON DOTC
1-800-615-
6942
Left Answer Recd.

BOE-501-HG (S1F) REV 13 (1-05)

P.O BOX 942879
SACRAMENTO CA 94279-0057

916-323-9555

STATE OF CALIFORNIA
BOARD OF EQUALIZATION

HAZARDOUS WASTE GENERATOR FEE RETURN

BOARD USE ONLY		
RA-B/A	AUD	REG
RR-QS	FILE	REF
EFF		

RTS-HG
HWCA
9998

SHG

DUE ON OR BEFORE Feb 28, 2006 for Year - Jan through Dec 2005 | 4205

[FOID 18-646-818] 1 HG EF | YOUR ACCOUNT NO. 36-058032 | 7

HG
Mail to:
BOARD OF EQUALIZATION
EXCISE TAXES AND FEES DIVISION
P.O.BOX 942879
SACRAMENTO CA 94279-6009

KIK-SOCAL INC
ATTN: GREG WIESE
9028 DICE RD
SANTA FE SPRINGS CA 90670-2520

CAD051482784
SANTA FE SPRINGS, 9028 DICE RD

READ INSTRUCTIONS BEFORE PREPARING

If you are registered to make your payment for this account by electronic funds transfer (EFT), you must still file your return timely. You can mail your return in the envelope provided or fax it to 916-327-0859. To register to make payments via EFT, please contact us at 916-322-9534.

☐ Please check this box if you no longer generate hazardous waste at this site. Enter the date of last generation _____ Your account will be closed as of the date entered. *For consolidated a[illegible] Schedule G to indicate the date each site last generated waste, if hazardous waste is no lon[illegible]*

	CLASS (Based on [illegible] during		B NUMBER OF SITES (Do not list tonnage)	C AMOUNT OF FEES	D TOTAL FEES DUE (Column B x C)
2	Generators whi[illegible]			0.00	$
3	Generators wh[illegible] tons, but les[illegible]			172.00	172.00
4	Generators w[illegible] 25 tons, but [illegible]			1374.00	
5	Generators [illegible] 50 tons, bu[illegible]	5.		3436.00	
6	Generators [illegible] 250 tons, [illegible]	6.		17180.00	
7.	Generators which [illegible] 500 tons, but less than 1,000 tons	7		34360.00	
8	Generators which generate an amount equal to or [illegible] 1,000 tons, but less than 2,000 tons	8		51540.00	
9.	Generators which generate an amount equal to or more than 2,000 tons	9		68720.00	

10	Amount of fees *(add lines 2 through 9 in Column D)*	10	$ 172.00
11	Less prepayment credit	11.	$ —
12	Total fee due *(subtract line 11 from line 10)*	12	$ 172.00
13	Penalty *[multiply line 12 by 10% (10) if payment is made after the due date shown above]* — PENALTY	13.	$ —
14.	INTEREST One month's interest is due on tax for each month or fraction of a month that payment is delayed after the due date The adjusted monthly interest rate is 00750 (9% divided by 12) — INTEREST	14.	$ —
15	TOTAL AMOUNT DUE AND PAYABLE *(add lines 12, 13 and 14)*	15	$ 172.00

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return

YOUR SIGNATURE AND TITLE	DAYTIME TELEPHONE NUMBER	DATE
[illegible] SR/Accountant Supv	562-916-4678	2-2-06

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION
Always write your account number on your check or money order Make a copy of this document for your records

501HG 001

HG

CONTAINER SHIPPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST#	OUT OF STATE	DATE	NO
✓ 1	5000G	H2O/CHLORIDE	01	PHIBRO TECH	24403447	No	07/12/05	9
✓ 1	5000G	H2O/CHLORIDE	01	PHIBRO TECH	24507466	No	07/12/05	10
2	1500#	O &AB PADS	01	FILTER RECYC	24510383	No	07/21/05	11
1	62	LIGHT BULBS		Lighting Resource	#8040	No	08/03/05	12
3	1500#	O&AB PADS	01	FILTER RECYC.	24508440	No	09/02/05	13
2	1500#	O&AB PADS	01	FILTER RECYC.	24509511	No	10/18/05	14
2	200#	FLMBLE LIQD	01	PACIFIC RESRCE	21953050	No	11/03/05	15
2	1100#	O & AB PADS	01	FILTER RECYC.	24812269	No	12/05/05	16
26	**168000**	**<<

2	1000	O&AB Pads	02	FILTER RECYC.	21705750	No	12/28/01	8
1	38900	<<<

CONTAINER SHIPPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST#	OUT OF STATE	DATE	NO
X 1	5000G	H2O/CHLORIDE	01	PHIBRO TECH	24403447	No	07/12/05	9
X 1	5000G	H2O/CHLORIDE	01	PHIBRO TECH	24507466	No	07/12/05	10
2	1500#	O &AB PADS	01	FILTER RECYC.	24510383	No	07/21/05	11
1	62	LIGHT BULBS		Lighting Resource	#8040	No	08/03/05	12
3	1500#	O&AB PADS	01	FILTER RECYC	24508440	No	09/02/05	13
2	1500#	O&AB PADS	01	FILTER RECYC.	24509511	No	10/18/05	14
2	200#	FLMBLE LIQD	01	PACIFIC RESRCE	21953050	No	11/03/05	15
2	1100#	O & AB PADS	01	FILTER RECYC.	24812269	No	12/05/05	16
26	**168000**	**<<

2	1000	O&AB Pads	02	FILTER RECYC	21705750	No	12/28/01	8
1	38900	<<<

Privacy Notice

Information Provided to the Board of Equalization

We ask you for information so that we can administer the state's tax and fee laws (see list on reverse). We will use the information to determine whether you are paying the correct amount of tax or fees and to collect any amounts you owe. You must provide all of the information we request, including your social security number (used for identification purposes [see Title 42 U.S. Code sec. 405(c)(2)(C)(i)]).

What happens if I don't provide the information?

If your application is incomplete, we may not issue your permit, certificate, or license. If you do not file complete returns, you may have to pay penalties and interest. Penalties may also apply if you don't provide other information we request or that is required by law, or if you give us fraudulent information. In some cases, you may be subject to criminal prosecution.

In addition, if you don't provide information we request to support your exemptions, credits, exclusions, or adjustments, we may not allow them. You may end up owing more tax or fees or receiving a smaller refund.

Can anyone else see my information?

Your records are covered by state laws that protect your privacy. However, we may share information regarding your account with certain government agencies (see list on reverse). We may also share certain information with companies authorized to represent local governments.

Under some circumstances we may release to the public the information printed on your permit or license, account start and closeout dates, and names of business owners or partners. When you sell a business, we may give the buyer or other involved parties information regarding your outstanding tax liability.

With your written permission, we can release information regarding your account to anyone you designate.

Can I review my records?

Yes. Please contact your closest Board office (see the white pages of your phone book). If you need more information, you may contact our Disclosure Officer in Sacramento by calling 916-445-2918. You may also want to obtain publication 58-A, *How to Inspect and Correct Your Records*. You may download it from the Internet at *www.boe.ca.gov* (look under "Forms, Publications, Reports & News") or order a copy from our Information Center: 800-400-7115

Who is responsible for maintaining my records?

The officials listed below are responsible for maintaining your records. You may contact them by calling 916-445-6464 or writing to them at the addresses shown below:

Sales and Use Tax
State Board of Equalization
Deputy Director, Sales and Use Tax Department
MIC:43
450 N Street
Sacramento, CA 95814-4311

Property Taxes, Excise Taxes, Fuel Taxes, Environmental Fees, and Electronic Waste Recycling Fees.
State Board of Equalization
Deputy Director, Property and Special Taxes Department
MIC:63
450 N Street
Sacramento, CA 95814-4311

We must collect information in order to administer the state laws listed below.

Code sections are from the California Revenue and Taxation Code unless otherwise noted.

- Alcoholic Beverage Tax (sections 32001-32557)
- Ballast Water Management Fee (Marine Invasive Species) (sections 44000-44008, 55001-55381, Public Resources Code sections 71200-71271)
- California Tire Recycling Fee (sections 55001-55381, Public Resources Code sections 42860-42895)
- Childhood Lead Poisoning Prevention Fee (sections 43001-43651, Health and Safety Code section 105310)
- Cigarette and Tobacco Products Tax (sections 30001-30482, Health and Safety Code sections 104555-104558)
- Cigarette and Tobacco Products Licensing Act of 2003 (Business and Professions Code sections 22970-22995, Government Code section 15618.5, Penal Code section 830.11)
- Diesel Fuel Tax (sections 60001-60708)
- Electronic Waste Recycling Fee (sections 55001-55381, Health and Safety Code sections 25214.10-25214.10.2, Public Resources Code sections 42463-42485)
- Emergency Telephone Users Surcharge (sections 41001-41176)
- Energy Resources Surcharge (sections 40001-40216)
- Hazardous Substances Tax (sections 43001-43651, Health & Safety Code sections 25174-25174.11, 25205.1-25205.23)
- Integrated Waste Management Fee (sections 45001-45984, Public Resources Code sections 48000-48008)
- International Fuel Tax Agreement (sections 9401-9433)
- Motor Vehicle Fuel Tax, including Aircraft Jet Fuel Tax (sections 7301-8526)
- Natural Gas Surcharge (sections 55001-55381, Public Utilities Code sections 890-900)
- Occupational Lead Poisoning Prevention Fee (sections 43001-43651, Health and Safety Code sections 105190, 105195)
- Oil Spill Response, Prevention, and Administrative Fees (sections 46001-46751, Government Code sections 8670.40, 8670.48)
- Private Railroad Car Tax (sections 11201-11702)
- Publicly Owned Property (sections 1840-1841)
- Sales and Use Tax (sections 6001-7176, 7200-7226, 7251-7279.6, 7285-7288.6)
- State-Assessed Property (sections 721-868, 4876-4880, 5011-5014, 5148)
- Tax on Insurers (sections 12001-13170)
- Timber Yield Tax (sections 38101-38908)
- Underground Storage Tank Maintenance Fee (sections 50101-50162, Health and Safety Code sections 25299.10-25299.51)
- Use Fuel Tax (sections 8601-9355)
- Water Rights Fee (sections 55001-55381, Water Code sections 1525-1560)

We may disclose information to the proper officials of the following agencies, among others:

- United States government agencies: U.S. Attorney's Office; Bureau of Alcohol, Tobacco and Firearms; Departments of Agriculture, Defense, and Justice; Federal Bureau of Investigation; General Accounting Office; Internal Revenue Service; Interstate Commerce Commission
- State of California government agencies and officials: Air Resources Board; Department of Alcoholic Beverage Control; Department of Child Support Services; Department of Consumer Affairs; State Controller's Office; Employment Development Department; Energy Commission; Department of Fish and Game; Department of Food and Agriculture; Forest Products Commission; Board of Forestry and Fire Protection; Franchise Tax Board; Department of Health Services, California Highway Patrol; Department of Housing and Community Development; Integrated Waste Management Board; State Lands Commission; Department of Motor Vehicles; California Public Utilities Commission; Department of Toxic Substances Control; State Water Resources Control Board
- State agencies outside of California for tax enforcement purposes
- City attorneys and city prosecutors; county district attorneys, police and sheriff departments
- Any agency authorized to enforce local tobacco control ordinances

BOE-501-HG (S1F) REV. 12 (1-04)

PO BOX 942879
SACRAMENTO, CA 94279-0057

916-323-9555

STATE OF CALIFORNIA
BOARD OF EQUALIZATION

BOARD USE ONLY		
RR-B/A	AUD	REG
RR-QS	FILE	REF
EFF		

HAZARDOUS WASTE GENERATOR FEE RETURN

DUE ON OR BEFORE 02/29/04 FOR JANUARY - DECEMBER, 2003 | 9103

HWCA RVHG05 HA EF | YOUR ACCOUNT NO. 36-058032 | 2

BOARD OF EQUALIZATION
EXCISE TAXES AND FEES DIVISION
PO BOX 942879
SACRAMENTO CA 94279-6009

KIK-SOCAL INC
ATTEN: GREG WIESE
9028 DICE RD
SANTA FE SPRINGS CA 90670-2520

MAKE CHANGES IF NAME OR ADDRESS IS INCORRECT

READ INSTRUCTIONS BEFORE PREPARING

9028 DICE RD
CAD051482784

you are registered to make your payment by electronic funds transfer (EFT), you must still file your return timely. You can ail your return in the envelope provided or fax it to 916-327-0859. To register to make payments via EFT please contact at 916-322-9534.

☐ Please check this box if you no longer generate hazardous waste at this site. Enter the date of last generation _____. Your account will be closed as of the date entered. *For consolidated accounts, use the enclosed Schedule G to indicate the date each site last generated waste, if hazardous waste is no longer being generated at that site.*

A CLASSIFICATION OF GENERATING SITES (Based on amounts of hazardous waste generated during the calendar year or portion thereof)		B NUMBER OF SITES (Do not list tonnage)	C AMOUNT OF FEES	D TOTAL FEES DUE (Column B x C)
Generators which generate less than 5 tons	2.		0.00	$ 0
Generators which generate an amount equal to or more than 5 tons, but less than 25 tons	3.		163.00	
Generators which generate an amount equal to or more than 25 tons, but less than 50 tons	4.		1305.00	
Generators which generate an amount equal to or more than 50 tons, but less than 250 tons	5		3262.00	
Generators which generate an amount equal to or more than 250 tons, but less than 500 tons	6		16310.00	
Generators which generate an amount equal to or more than 500 tons, but less than 1,000 tons	7.		32620.00	
Generators which generate an amount equal to or more than 1,000 tons, but less than 2,000 tons	8		48930.00	
Generators which generate an amount equal to or more than 2,000 tons	9		65240.00	
Amount of fees *(add lines 2 through 9 in Column D)*			10.	$ 0
Less prepayment credit			11.	$ 0
Total fee due *(subtract line 11 from line 10)*			12.	$ 0
Penalty *(multiply line 12 by 10% (.10) if payment is made after the due date shown above)*			PENALTY 13.	$ 0
Interest of 08% per annum (0.006670 per month) ...e if payment is made after the due date			INTEREST 14.	$ 0
TOTAL AMOUNT DUE AND PAYABLE *(add lines 12, 13 and 14)*			15.	$ 0

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return

PRINT/TYPE NAME AND TITLE Barbie Robinson Sr. Acct. Mgr. | SIGNATURE | PHONE NUMBER (562) 906-2240 | DATE 5/5/04

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION

2003

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P.O. Box 806
Sacramento, CA 95812-0806

Generator Information Services Section
1-877-454-4012 (Calif. Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif.)
www.dtsc.ca.gov

SCHEDULE A – MANIFEST FEE CALCULATION SHEET (2002 Manifests)

(See back of this form for sample manifest form.)

EPA ID Number: CAD051482784 **Name of organization:** KIK INTERNATIONAL

From **January 1, 2002 through December 31, 2002,** the Department of Toxic Substances Control recorded the number of California Manifests shown at the right using the EPA ID printed above.

Non-recycled: 4

Recycled: 1

(NOTE: There is no fee for solely recycled manifests.)

Manifest Fee Calculation:

a. Enter the total number of **non-recycled** manifests from above... 4

b. How many of the **non-recycled** manifests listed on Line a. are non-recycled air compliance solvent manifests..... 4 X $3.50 = $ 14.00

c. Subtract the number of manifests on Line b. from Line a. ..... 0 X $7.50 = $ —

d. *No fee due for* **recycled** manifests..... $ 0.00

e. Total of Line b. + Line c. ..... = $ 14.00

Note: The manifest count on Lines b. and c. should equal the count on Line a.

INSTRUCTIONS FOR COMPLETING SCHEDULE A

1.
   - For lines a. – e. above, enter the numbers requested for each line.
   - For line b. multiply the number of manifests by $3.50 and record the dollar amount.
   - For line c. multiply the number of manifests by $7.50 and record the dollar amount.
   - For line e. add dollar amounts of lines b. and c. This total is the manifest fees due for the EPA ID number shown at the top of the page.

2. For this assessment there are three types of manifests: non-recycled, recycled and air compliance solvents manifests. Manifests used *solely* for recycled waste will have a handling code reported as **"01"** or **"R01"** in item **K** on the manifest form (see circled area on manifest sample on the back of this form). All wastes listed on a manifest must have handling codes of "01" or "R01" to be counted as a solely recycled manifest. You need to pay manifest fees only for non-recycled manifests. *There is no* fee for recycled manifests.

3. If you believe the manifest totals shown in the box above are incorrect, you may use the manifest totals from your own files to calculate the fee. However, please be aware that any difference between the amount you report and the amount printed above is subject to audit by DTSC.

4. On January 1, 1999 many businesses were required to switch from petroleum-based solvents to air compliance solvents (also called water-based cleaners). The fee for manifests used solely for hazardous waste derived from air compliance solvents was reduced from $7.50 to $3.50. Most air compliance solvent waste is now recyclable. Manifests used to ship air compliance solvents that were recycled should not be charged $3.50. The Manifest Fee Calculation above includes air compliance solvent manifests as part of the non-recycled manifest count. Businesses that do not recycle their air compliance solvent waste who desire to use the reduced $3.50 fee must use their internal records to identify manifests used solely for air compliance solvent wastes.

BOE-501-HG (S1F) REV 12 (1-04) SACRAMENTO CA 94279-0057

CC: Booth file

STATE OF CALIFORNIA
BOARD OF EQUALIZATION

HAZARDOUS WASTE GENERATOR FEE RETURN

BOARD USE ONLY		
RA-B/A	AUD	REG
RR-QS	FILE	REF
EFF		

RTS-HG
HWCA
9998

SHG

DUE ON OR BEFORE Feb 28, 2005 for Year - Jan through Dec 2004 | 4204

[FOID 16-492-951] 6 HG EF | YOUR ACCOUNT NO. 36-058032 | 8

HG

BOARD OF EQUALIZATION
EXCISE TAXES AND FEES DIVISION
P.O.BOX 942879
SACRAMENTO CA 94279-6009

KIK-SOCAL INC
ATTN: GREG WIESE
9028 DICE RD
SANTA FE SPRINGS CA 90670-2520

CAD051482784
SANTA FE SPRINGS, 9028 DICE RD

READ INSTRUCTIONS BEFORE PREPARING

If you are registered to make your payment by electronic funds transfer (EFT), you must still file your return timely. You can mail your return in the envelope provided or fax it to 916-327-0859. To register to make payments via EFT please contact us at 916-322-9534.

1. ☐ Please check this box if you no longer generate hazardous waste at this site. Enter the date of last generation _____ . Your account will be closed as of the date entered. *For consolidated accounts, use the enclosed Schedule G to indicate the date each site last generated waste, if hazardous waste is no longer being generated at that site.*

A CLASSIFICATION OF GENERATING SITES (Based on amounts of hazardous waste generated during the calendar year or portion thereof)		B NUMBER OF SITES (Do not list tonnage)	C AMOUNT OF FEES	D TOTAL FEES DUE (Column B x C)
2. Generators which generate less than 5 tons	2.		0.00	$ 0
3. Generators which generate an amount equal to or more than 5 tons, but less than 25 tons	3.		167.00	
Generators which generate an amount equal to or more than 25 tons, but less than 50 tons	4.		1333.00	
5. Generators which generate an amount equal to or more than 50 tons, but less than 250 tons	5.		3332.00	
6 Generators which generate an amount equal to or more than 250 tons, but less than 500 tons	6.		16660.00	
7 Generators which generate an amount equal to or more than 500 tons, but less than 1,000 tons	7.		33320.00	
8. Generators which generate an amount equal to or more than 1,000 tons, but less than 2,000 tons	8.		49980.00	
9 Generators which generate an amount equal to or more than 2,000 tons	9.		66640.00	
10. Amount of fees *(add lines 2 through 9 in Column D)*	10.			$ 0
11. Less prepayment credit	11.			$ —
12. Total fee due *(subtract line 11 from line 10)*	12.			$ 0
13. Penalty *[multiply line 12 by 10% (.10) if payment is made after the due date shown above]*	PENALTY 13.			$ 0
14. INTEREST One month s interest is due on tax for each month or fraction of a month that payment is delayed after the due date The adjusted monthly interest rate is 00583 (7% divided by 12)	INTEREST 14.			$
15. TOTAL AMOUNT DUE AND PAYABLE *(add lines 12, 13 and 14)*	15.			$ 0

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

YOUR SIGNATURE AND TITLE	TELEPHONE NUMBER	DATE
Dedmond Lee Station Mgr. Supv.	562-906-2240	

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION
Always write your account number on your check or money order. Make a copy of this document for your records

501HG 001

HG

HAZARDOUS WASTE GENERATOR FEE RETURN INSTRUCTIONS

GENERAL INFORMATION

The Generator Fee is imposed on each site that generates (produces) hazardous waste of 5 tons or more in each calendar year. The fee is calculated for each site's generation of waste regardless of the waste's final disposition (i.e., recycling or disposal).

EXEMPTIONS FROM THE GENERATOR FEE

1) Used oil removed from motor vehicles that is recycled by a recycler permitted by the Department of Toxic Substances Control "Motor vehicle" includes locomotives, vessels, and self-propelled, off-road equipment, whether or not the equipment moves or is permitted to move on public highways.
2) Waste that is generated, recycled, and used onsite, and not transferred offsite at any time.
3) Aqueous waste treated in a treatment unit operating, or which subsequently operates, under a permit by rule, conditional authorization, or conditional exemption. However, hazardous waste generated by the treatment process is subject to the generator fee.

EXEMPTION FROM THE DISPOSAL FEE

The disposal site operator is not required to collect the fee if the person submitting the waste for disposal provides written evidence from the generator of the waste, as shown on the originating hazardous waste manifest, that the waste is exempt from the fee. The written evidence must accompany the manifest and contain the following information:

- Name of generator
- Site address where waste was generated
- EPA number for the generating site
- Generator's Board of Equalization account number, if the generator is registered
- Type of waste submitted for disposal
- Specific explanation of the reason the waste is exempt from the fee or subject to the cleanup rate
- Signature and printed name of the person making the statement
- Telephone number and address of contact person for the generator

For audit purposes, the written evidence should be retained in your files along with a copy of the Uniform Hazardous Waste Manifest.

FILING REQUIREMENTS

Every person who produces hazardous waste must file this return on or before the last day of February with remittance to the Board of Equalization for any amounts due. This return must be filed even though you have no liability for the fee. Failure to file may result in the imposition of civil penalties. Late payment incurs a penalty of 10% (.10) and interest at an adjusted annual rate established under section 6591 5 of the Revenue and Taxation Code Facility operators who pay the Facility Fee are not subject to the Generator Fee for the facility site.

PAYMENT BY ELECTRONIC FUNDS TRANSFER

If you are registered to pay by EFT, please remember that

- A payment is considered to be timely if it is both initiated on or before the tax due date and the funds transfer into the Board of Equalization's bank account on the banking day following the date the payment is initiated.
- Making your payment by EFT does not relieve you of the requirement to file your return by the due date ***Note:*** *The reporting due dates and filing requirements have not changed*

If you would like to file your return by fax, our fax number is 916-327-0859. If you are not registered to pay by EFT and would like to be, please contact us at 916-322-9534

FILING INSTRUCTIONS

Please select the appropriate fee category in Column A on the front of the return for each site where hazardous waste was generated in this state Multiply the number of generating sites in Column B by the amount of fees in Column C and enter the amount of fees due in Column D

If you are reporting for more than one site, please use the enclosed Schedule G or provide the site address, EPA number, and appropriate fee category for each site on an attachment.

PREPAYMENT CREDIT (LINE 11)

Some accounts were required to file a prepayment by August 31. If you paid a prepayment, enter on line 11 the amount of fee paid If delinquency charges were paid. **do not** include those charges in the credit. If, after claiming the prepayment, the total amount due and payable on line 15 is a credit, include a letter with your return requesting the amount to be refunded to you.

IF YOU WISH ADDITIONAL INFORMATION, PLEASE CONTACT THE STATE BOARD OF EQUALIZATION, EXCISE TAXES AND FEES DIVISION, ENVIRONMENTAL FEES SECTION, PO BOX 942879, SACRAMENTO, CA 94279-0057, TELEPHONE 916-323-9555.

2	1000	O&AB Pads	02	FILTER RECYC	21705750	No	12/28/01	8
1	38900	<<<

CONTAINERS SHIPPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST#	OUT OF STATE	DATE	NO
1	5000G	H2O/CHLORIDE	01	PHIBRO TECH	24403447	No	07/12/05	9
1	5000G	H2O/CHLORIDE	01	PHIBRO TECH	24507466	No	07/12/05	10
2	1500#	O &AB PADS	01	FILTER RECYC.	24510383	No	07/21/05	11
1	62	LIGHT BULBS		Lighting Resource	#8040	No	08/03/05	12
3	1500#	O&AB PADS	01	FILTER RECYC.	24508440	No	09/02/05	13
2	1500#	O&AB PADS	01	FILTER RECYC.	24509511	No	10/18/05	14
2	200#	FLMBLE LIQD	01	PACIFIC RESRCE	21953050	No	11/03/05	15
2	1100#	O & AB PADS	01	FILTER RECYC.	24812269	No	12/05/05	16
26	**168000**<<

KIK Corporation Inc.

Hazardous Waste
Management Training

License Renewals

7005 1820 0006 0988 7740

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

6-25-07

Sent To: Accounting Unit DTSC
Street, Apt. No.; or PO Box No. PO Box 1288
City, State, ZIP+4 Sacramento 95812-1288

PS Form 3800, June 2002 — See Reverse for Instructions

Linda S Adams
Secretary for
Environmental Protection

Department of Toxic Substances Control

Maureen F. Gorsen, Director
8800 Cal Center Drive
Sacramento, California 95826-3200

Arnold Schwarzenegger
Governor

Mailed 6-25-06 VM Cond Paid credit

June 6, 2007

To: All EPA ID Number Holders

This annual mailing contains the EPA ID number verification questionnaire and fee Schedules A and B. **You must complete and return them within 30 days of receiving them even if there are no changes and/or you owe no fees**. Please return them in the envelope provided. The rest of this letter provides updates on manifest issues and topics of general interest.

New 2006 Manifest Implementation

The regulated community did a great job last September in switching to the new manifest form. Thank you very much

After a short delay, data from the new 2006 manifest is now available on the Department of Toxic Substances Control's (DTSC's) Hazardous Waste Tracking System You can verify your facility and manifest information at www hwts.dtsc ca gov. We are also asking for your help to correct early problems. If you find any, please email hwtsadmn@dtsc ca gov.

- ***Generator Copies:***
  - Mail a legible copy to P.O. Box 400 within 30 days of shipping the waste. If the waste is being shipped to a California destination, the generator may use Copy 2 instead of making a photocopy
  - Legibility Photocopy quality is very poor and 10 to 15% of the manifests are illegible.
  - Failure to Submit: The count of generator copies submitted is down and almost 25% of generator copies are missing compared to received disposal site copies.
  - Requirement: Generators are required to mail DTSC a legible copy of the manifest as it left their facility within 30 days of shipment.
  - Only shipping descriptions are allowed in Item 9b (no ERG, profiles, etc.)
  - DTSC will start providing information on top offenders to CUPAs

- ***Changing Names and Addresses Using the Wrong Box:***
  - Transporter and TSDF addresses are being changed after the manifest is first completed. This is acceptable ONLY if all changes are made in the original Items 6, 7, and 8. These changes cannot be included in Item 14 or 18b.
  - Addresses in Item 18b are only allowed when a TSDF rejects a shipment, not when there is a change made in the destination before it arrives at the TSDF. Those changes are only made in Item 8. These changes raise red flags to inspectors about shipment irregularities.

- ***State Waste Code Omissions:***
  - Some generators seem confused by the new manifest format and dropped the California waste code

- Every waste stream line on the manifest must have one California waste code if the manifest starts or ends in California. If a waste is federally regulated, it also needs one or more RCRA waste codes. No more than six State and RCRA waste codes are allowed.

Manifest Corrections:
If you identify any of these problems on your manifests or other errors, you need to inform DTSC by submitting a manifest correction letter.

- DTSC may collect $20 per manifest for each error, omission, or illegible submission
- Companies that identify an error before we do can avoid the fee by submitting a Manifest Correction Letter to DTSC. Follow the procedure in the FAQs at http //hwts.dtsc ca gov

New Online Hazardous Waste Classification Training
DTSC is proud to announce that a California Hazardous Waste Classification online training course is now up and running This interactive course provides information on the proper classification and understanding of hazardous waste, and hazardous waste classification laws and regulations.

This course covers hazardous waste identification through different characteristics and listings, exclusions from the waste classification requirements, test methods used to measure the characteristics of wastes, and information on how to determine whether a waste is a federally regulated (RCRA) or a California regulated (non-RCRA) hazardous waste. This course can be viewed at either
www.dtsc ca gov/HazardousWaste/index cfm#Hazardous_Waste_Identification
or http://ccelearn.csus.edu/wasteclass/ .

Treated Wood Waste
New regulations are expected to be adopted in June 2007 establishing alternative management standards for treated wood waste that are hazardous waste. Treated wood is wood that has been treated with a chemical preservative to protect the wood from insects and other environmental conditions that can lead to wood decay Wood was likely treated if it was used in direct contact with the ground or installed for harsh outdoor use. Common surface coatings such as paint, varnish, and oil stain are not considered wood preservatives under these regulations.

The new regulations require that generators of more than 10,000 pounds of treated wood waste in a calendar year obtain an EPA ID number if they do not already have one for the site where the waste is generated Additional information on treated wood and the regulations can be found at http://www dtsc.ca gov/HazardousWaste/Treated_Wood_Waste cfm.

Permanent and temporary EPA ID numbers are available from the Generator Information Services Section at 1-800-61 TOXIC For permanent numbers please submit a completed DTSC Form 1358 by mail or fax Temporary EPA ID numbers are available from the Generator Information Services Section at 1-800-61-TOXIC.

New DTSC Web Page Features
DTSC has recently updated its web sites for Household Hazardous Waste (HHW) and Universal Waste, and E-Waste updates will follow soon These contain new information and links to other services that provide information for businesses that conditionally exempt small quantity generator, in addition to households. There is also information on the California Take-It-Back Partnership to encourage retailers to accept back batteries, fluorescent lamps and electronic devices, including cell phones. Check out www.dtsc ca.gov for these new services.

THANK YOU AGAIN FOR YOUR EFFORTS TO COMPLY WITH HAZARDOUS WASTE AND ENVIRONMENTAL LAWS!

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P O Box 1288
Sacramento, CA 95812-1288

Generator Information Services Section
1-877-454-4012 (Calif Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif)
www dtsc.ca.gov

2007 VERIFICATION QUESTIONNAIRE

(See back of this form for instructions guidance and statutory requirements.)

ALL FORMS MUST BE RETURNED WITHIN 30 DAYS FROM THE DATE OF RECEIPT IN THE ENCLOSED ENVELOPE. **All business information must be verified per Health & Safety Code section 25205.16(c). Failure to return all forms will lead to the suspension of your EPA Identification Number. Please type or print clearly and use only standard abbreviations.**

KIK INTERNATIONAL
9028 DICE RD
SANTA FE SPRINGS, CA 90670-0000

Mailing address change.

Address: _____

City/State/Zip: _____

DO NOT WRITE IN THIS AREA If incorrect call 877-454-4012

1. EPA ID Number: CAD051482784
2. Location address: 9028 DICE RD
SANTA FE SPRINGS, CA 90670-0000 Y

If your business moved a NEW EPA ID is required Go to www.dtsc.ca.gov/IDManifest/index.cfm

3. FEDERAL EMPLOYER NUMBER (FEIN) ON FILE See instructions on back

4. BOARD OF EQUALIZATION NUMBER (BOE) HAHQ36045719 (Only required if you generate 5 or more tons of hazardous waste in a calendar year) See instructions on back.

5. COMPANY OWNER INFO:

"IK SOCAL INC
.28 DICE RD
SANTA FE SPRINGS, CA 90670-0000
(310)946-6427
(000)000-0000

NOTE: Only update if you have a U.S. EPA (federal) EPA ID number. California EPA ID numbers are NOT transferable to another owner. DO NOT fill in new owner information below if you have a California EPA ID number. Check Box 6 to cancel this EPA ID number

Company Owner or Corp. Name: _____

Address: _____

City/State/Zip. _____

Telephone _____ Fax _____

Date of Ownership Change _____

6. ☐ **Check here if you wish to CANCEL the EPA ID number shown on Line 1.**

7. COMPANY NAME:

KIK INTERNATIONAL

If printed company name is incorrect/changed please update

8. CONTACT INFO:

DERRELL JOHNSON/SAFTY ENV SUP
9028 DICE RD
SANTA FE SPRINGS, CA 90670-0000
(310)946-6427
(000)000-0000

If printed contact is incorrect/changed, please update

Name/Title Raymond Wetter, H.E.S.S. Mgr.

Address _____

City/State/Zip _____

Telephone (562) 906-2215 Fax (562) 941-9780

Business email address: rwetter@kikcorp.com

9. SIC CODE (4 digits):

2841

If printed SIC Code is incorrect or blank, please provide correct information.

— — — —

♻ Printed on Recycled Paper

DTSC 1193 [front] (4/07)

77517

3/2

TO ALL HAZARDOUS WASTE HANDLERS:

This is an important mailing that you are required by law to complete and return within 30 days to avoid a violation!!

It contains your facility information and annual fee assessments for the Environmental Protection Agency Identification (EPA ID) Number Verification Fee and Manifest Fee as required by Health and Safety Code, Sections 25205.16 and 25205.15. It also provides you with a printout of information linked to your ID number for you to review and correct. The EPA ID Number Verification Fee covers all valid EPA ID numbers held by your organization during the fiscal year 2006/07 (from **July 1, 2006 through June 30, 2007**). The Manifest Fee assessment is for all manifests used by your organization from **January 1, 2006 through December 31, 2006.**

The following instructions will help you complete these forms and calculate the required fees, if any are due DTSC posted "Frequently Asked Questions" and answers on our web site www.dtsc ca gov. under "ID Numbers, Manifests & Fees" If that does not answer your questions, please contact DTSC's Generator Information Services Section (**GISS**) toll free at **1-877-454-4012.** If you are calling from outside California, call **1-916-255-4439** The GISS operating hours are **8:30 a.m. to 4:30p.m.** (Pacific Standard Time), Monday through Friday *(Note· The phone lines will be very busy Please be prepared to be placed on hold)*

All forms and payment, if any, are due **30 days from the receipt of this notice** Use the enclosed credit card form or make checks payable to the Department of Toxic Substances Control or "DTSC". Send all forms and payment in the enclosed return envelope or to·

Accounting Unit, EPA ID
Department of Toxic Substances Control
PO Box 1288
Sacramento, CA 95812-**1288**

INSTRUCTIONS FOR COMPLETING THE VERIFICATION QUESTIONNAIRE

You are mandated by law to provide or verify the information on the verification questionnaire and return it to DTSC.

Printed organization name and mailing address
Provide any change to the organization's printed mailing address

Lines 1 and 2 (shaded box)
Check your records to verify that the printed EPA ID number and location address are both correct Do not change, strike out, or write over this information. If the information is incorrect, please call GISS for assistance. *(NOTE: EPA ID numbers are site specific to the location to which they are originally issued EPA ID numbers cannot be moved to another location If the location address printed on Line 2 is no longer the address of your site, please call GISS for assistance You may need a new EPA ID number.)*

Line 3
Provide your Federal Employer Number (FEIN) This number is given to a business to identify that business entity, and is usually written as 00-00000000. Information can be found on the IRS website at www.irs.gov/businesses/small/article/0,,=98350,00.html "On file" indicates that you have previously provided a FEIN number.

Line 4
If your business generates or produces five (5) or more tons of hazardous waste per calendar year, and is not exempted from the Generator Fee by law, you must have a Board of Equalization (BOE) Account Number. If you generate five (5) or more tons and do not have a BOE ID Number, visit the BOE's website at www.boe ca gov/pdf/boe400-efa-pdf for an application and information. , Or you may call BOE at (916) 323-9555, or toll free at 800-400-7115. If BOE Number is incorrect, cross out and provide correct number.

Line 5
Provide any corrections and/or additions to the information pre-printed on this form. However, if there has been a change in ownership, call GISS. When you have a California ID number (CAL and some CADs) and there is a change in ownership, you must get a new EPA ID number.

Line 6
Check this box ONLY if you wish to cancel the EPA ID number shown on Line 1 The cancellation date will be June 30, 2007. If your operations will continue after June 30, 2007, do not check the box at this time Please notify DTSC in writing when you cease operations using DTSC Form 1358 When canceling U S EPA numbers (federal), you must also notify U.S. EPA at (415) 495-8895.

Lines 7 and 8
Provide any corrections and/or additions to the information pre-printed on this form Please provide your business email address. This will be part of the facility record and can be used to send you information on the annual verification process

Line 9
Provide any corrections to your SIC (Standard Industrial Classification) Code for your primary business activity If no SIC Code is pre-printed on Line 9, please provide the primary SIC Code for your business. The SIC Code is a four-digit number that best describes your company's primary business activity. If you do not know your SIC Code, go to www osha.gov/oshstats/sicser html for lists.

If your organization has more than one EPA ID number, you should receive a Verification Questionnaire and a Schedule A – Manifest Calculation Sheet for each of your permanent EPA ID numbers You must complete both forms for each EPA ID number assigned to your organization *(NOTE The total dollar amount owed by your organization includes the manifest fees for all of your organization's EPA ID numbers The total manifest fee dollar amount must be entered in Section B of the Schedule B – Fees Summary Sheet.)*

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P O, Box 1288
Sacramento, CA 95812-1288

Generator Information Services Section
1-877-454-4012 (Calif Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif)
www dtsc.ca gov

SCHEDULE A – MANIFEST FEE CALCULATION SHEET (2006 Manifests)

(See back of this form for sample manifest forms.)

EPA ID Number: CAD051482784 **Name of organization:** KIK INTERNATIONAL

From **January 1, 2006 through December 31, 2006,** the Department of Toxic Substances Control recorded the number of California and Federal Manifests shown at the right using the EPA ID printed above.

Non-recycled: 3

Recycled: 2

(NOTE: There is no fee for solely recycled manifests.)

Manifest Fee Calculation:

a. Enter the total number of **non-recycled** manifests from above... 3

b. How many of the **non-recycled** manifests listed on Line a. are non-recycled air compliance solvent manifests..... 0 X $3.50 = $ _____

c. Subtract the number of manifests on Line b. from Line a. .. .. 3 X $7.50 = $ 22.50

d. No fee due for **recycled** manifests. ....$ 0.00

e. Total of Line b. + Line c. ....= $ 22.50

Note: The manifest count on Lines b. and c. should equal the count on Line a.

INSTRUCTIONS FOR COMPLETING SCHEDULE A

1.
- For lines a. – e. above, enter the numbers requested for each line.
- For line b. multiply the number of manifests by $3.50 and record the dollar amount.
- For line c. multiply the number of manifests by $7.50 and record the dollar amount.
- For line e. add dollar amounts of lines b. and c. This total is the manifest fees due for the EPA ID number shown at the top of the page.

2 For this assessment there are three types of manifests: non-recycled, recycled and air compliance solvents manifests. California Manifests used *solely* for recycled waste will have a handling code reported as **"01"** or **"R01"** in item **K** on the California manifest form (see circled area on manifest sample on the back of this form). Federal Manifests used solely for recycled, waste will have a handling code reported as **"H010, H020, H039, H050** or **H061"** in item **19** on the Federal manifest form (see circled area on manifest sample on the back of this form). All wastes listed on a manifest must have handling codes of "01" or "R01" to be counted as a solely recycled manifest. You need to pay manifest fees only for non-recycled manifests. There is no fee for recycled manifests.

3. If you believe the manifest totals shown in the box above are incorrect, you may use the manifest totals from your own files to calculate the fee. However, please be aware that any difference between the amount you report and the amount printed above is subject to audit by DTSC.

4. On January 1, 1999 many businesses were required to switch from petroleum-based solvents to air compliance solvents (also called water-based cleaners). The fee for manifests used solely for hazardous waste derived from air compliance solvents was reduced from $7.50 to $3.50. Most air compliance solvent waste is now recyclable. Manifests used to ship air compliance solvents that were recycled should not be charged $3.50 The Manifest Fee Calculation above includes air compliance solvent manifests as part of the non-recycled manifest count. Businesses that do not recycle their air compliance solvent waste who desire to use the reduced $3.50 fee must use their internal records to identify manifests used solely for air compliance solvent wastes.

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12 pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California 1

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No | 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

A. State Manifest Document Number 24065763

4 Generator's Phone ( )

B. State Generator's ID

5 Transporter 1 Company Name | 6 US EPA ID Number

C. State Transporter's ID (Required)

D Transporter's Phone

7 Transporter 2 Company Name | 8 US EPA ID Number

E. State Transporter's ID (Required)

F. Transporter's Phone

9 Designated Facility Name and Site Address | 10 US EPA ID Number

G. State Facility's ID

H. Facility's Phone

11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12 Containers No	Type	13 Total Quantity	14 Unit Wt/Vol	I. Waste Number
a					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

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 | Signature | Month Day Year

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

19 Discrepancy Indication Space

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

Printed/Typed Name | Signature | Month Day Year

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

24065763

DO NOT WRITE BELOW THIS LINE.

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

DTSC 8022A (1/99)
EPA 8700—22

California Manifest
Pre-September 5, 2006

Published by J. J. KELLER & ASSOCIATES, INC. Neenah, WI • USA • (800) 327-6868 • www.jjkeller.com • Printed in the United States

167-BLS-C 6 10495

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator ID Number | 2 Page 1 of | 3 Emergency Response Phone | 4. Manifest Tracking Number 000170992 JJK

5. Generator's Name and Mailing Address | Generator's Site Address (if different than mailing address)

Generator's Phone

6 Transporter 1 Company Name | U.S. EPA ID Number

7 Transporter 2 Company Name | U.S. EPA ID Number

8 Designated Facility Name and Site Address | U.S. EPA ID Number

Facility's Phone

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	Type	11 Total Quantity	12. Unit Wt./Vol.	13 Waste Codes
	1.					
	2.					
	3.					
	4.					

14 Special Handling Instructions and Additional Information

15 GENERATOR'S/OFFEROR'S CERTIFICATION I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packed, marked and labeled/placarded and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgement of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name | Signature | Month Day Year

GENERATOR

16 International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only) Date leaving U.S.

INT'L

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name | Signature | Month Day Year

Transporter 2 Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

18 Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) | Month Day Year

DESIGNATED FACILITY

19 Hazardous Waste Report Management Method Codes (i.e. codes for hazardous waste treatment, disposal, and recycling systems)

1 | 2 | 3 | 4

20 Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name | Signature | Month Day Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

Federal Manifest
Post-September 5, 2006

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P O Box 1288
Sacramento, CA 95812-1288

Generator Information Services Section
1-877-454-4012 (Calif Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif)
www dtsc ca gov
2007

SCHEDULE B – FEES SUMMARY SHEET

(See back of this form for complete instructions.)

All completed forms and appropriate fees must be submitted **not later than 30 days** from the date of receipt.

A. EPA ID NUMBER VERIFICATION FEE (July 1, 2006 through June 30, 2007)

1. Name of your organization: Kik Custom Products

2. Enter the total number of California employees in your entire organization: 18
(Please read instructions for Line 2 on the back of this form.)

Number of Employees	1 – 49	50 – 74	75 – 99	100 – 249	250 – 499	500 or more
EPA ID Fee Rate	NO FEE	$150	$175	$200	$225	$250

(Total EPA ID Number Verification Fees not to exceed $5000)

3. Enter the EPA ID Number Verification Fee rate from the table above: $ 175.00

4. Enter the total number of **permanent** EPA ID numbers held by your organization: 1
*(NOTE: Attach a VQ form and Schedule A for **each** permanent EPA ID number you are reporting. Numbers that begin with "CAC" should not be included in your total on Line 4. See instructions.)*

5. Multiply Line 3 by Line 4: =$ 175.00

6. **TOTAL** EPA ID Number Verification Fee due (Enter the dollar amount from Line 5 above **OR** $5000, whichever amount is less) $ 175.00

B. MANIFEST FEE (January 1, 2006 through December 31, 2006)

1. Enter the dollar amount from Line e on your Schedule A – Manifest Fee Calculation Sheet
*(If you are reporting more than one ID number, enter the **TOTAL** of the dollar amounts from Line e on **all** of your Schedule A – Manifest Fee Calculation Sheets.)* $ 22.50

C. GRAND TOTAL OF EPA ID NUMBER VERIFICATION FEES AND MANIFEST FEES

1. **Add** Line **A6** and Line **B1**, enter the total dollar amount
It is not uncommon to not owe fees. You are still required to complete and submit all forms.
If fee is due, please make your check payable to "DTSC" for the total amount on this line: =$ 197.50

*** **Please write one of your EPA ID numbers on your check.**

To pay your fees via **credit card**, complete the enclosed "EPA ID and Manifest Fee Credit Card Payment Form".

I hereby certify under penalty of perjury that the information on the Verification Questionnaire(s), Schedule A(s) and Schedule B is true and correct.

Signature of Preparer: Raymond Wetter Title: H.E.S.S. Mgr

Name (please print) Raymond Wetter Date 6-28-07 Phone: (562) 906-2215

THIS SECTION FOR DEPARTMENT USE ONLY			
Check No	$AMOUNT	DATE	CID NO
12560055	12560092	12560065	
12560035	12560091	AMOUNT DUE	
12560075	12560096	PRIMARY ID #	

INSTRUCTIONS FOR COMPLETING SCHEDULE B – FEES SUMMARY SHEET

SECTION A (EPA ID Number Verification Fee for 2006/2007)
NOTE: Health and Safety Code, Section 25205.16 requires DTSC to verify the accuracy of information related to generators, transporters and facilities authorized to treat, dispose of, store, or recycle hazardous waste. DTSC captures this data through the Verification Questionnaire and uses the collected information to ensure that the Hazardous Waste Tracking System database is current and accurate. The EPA ID Number Verification Fee, which has been established by State legislation, funds this effort.

Line 1: Enter the **full** name of your organization. Do not abbreviate.

Line 2: Enter the total number of individuals employed in California by your organization. An employee must have worked more than 500 hours during the calendar year 2006 to be included in your calculation. *("Organization" is defined as a registered corporation, sole proprietor, partnership, or company. For public agencies, "organization" is defined as a city, county, commission, agency, department or district.)*

Line 3: Based on the number of employees entered on Line 2, determine your EPA ID Number Verification Fee rate by using the table shown and then enter that rate on Line 3.

Line 4: Enter the total number of **permanent** EPA ID numbers assigned to your organization. Do not include "CAC" or "CAP" numbers in your total, as they are temporary and not subject to the EPA ID Number Verification Fee. If you indicated on the Verification Questionnaire that you wish to deactivate a permanent EPA ID number, **you must still include that number in this total.** The fee is required because that EPA ID number was active during the billing period (July 1, 2006 through June 30, 2007).

Line 5: Enter the EPA ID Number Verification Fee This fee is determined by multiplying the fee rate (reported on Line 3) by the total of permanent EPA ID numbers assigned to your organization (reported on Line 4).

Line 6: Enter **either** the amount shown on Line 5, **OR** $5000 (whichever amount is **less**). The maximum EPA ID Number Verification Fee is $5000 per organization.

SECTION B (Manifest Fees for January 1, 2006 through December 31, 2006)

Line 1: Enter the **total** manifest fees due. This amount is shown on Line e on the **Schedule A** – Manifest Fee Calculation Sheet If your organization has more than one EPA ID number, enter the **total** of the dollar amounts from **all** your Schedule A – Manifest Fee Calculation Sheets.

SECTION C (Grand total of all EPA ID Number Verification Fees and Manifest Fees owed)

Line 1: Add Line **A6** and **B1** The sum of these two amounts is the total fee due from your organization Please make your check payable to "DTSC" or use the credit card payment form. Please write one of your EPA ID numbers on your check.

IMPORTANT: **YOU MUST RETURN THE ORIGINAL OF THE FOLLOWING DOCUMENTS WITHIN 30 DAYS:**

- ✓ **Verification Questionnaire** (one form for **each** EPA ID number)
- ✓ **Schedule A – Manifest Fee Calculation Sheet** (one form for **each** EPA ID number)
- ✓ **Schedule B – Fee Summary Sheet** (only **ONE** of these forms is needed for your entire organization)

State of California – California Environmental Protection Agency
Department of Toxic Substances Control
P O Box 1288
Sacramento, CA 95812-1288

Generator Information Services Section
1-877-454-4012 (Calif Callers Only Toll Free)
or 1-916-255-4439 (Outside Calif)
www dtsc ca gov

EPA ID AND MANIFEST FEE CREDIT CARD PAYMENT FORM

To pay your EPA ID number fee and manifest fees by credit card, complete this form and return it with your completed:

Verification Questionnaire(s) – one for each EPA ID number reported in this packet;
Manifest Fee Calculation Sheet Schedule A(s) – one for each EPA ID number reported in this packet; and
Fees Summary Sheet Schedule B – only one is required for your entire organization.
If you prefer to pay by check, please discard this form.

1) Company Name:_____

2) Name on Credit Card:_____

3) Type of Card: ❑ AMERICAN EXPRESS ❑ DISCOVER ❑ MASTERCARD ❑ VISA

4) Credit Card Number: /_/_/_/_/ /_/_/_/_/ /_/_/_/_/ /_/_/_/_/ /.../.../

5) Expiration Date. /_/_/ /_/_/
Mo Yr.

6) Total Amount of Fee Being Paid: $_____
(Should match the amount reported as grand total on the Fees Summary Sheet Schedule B)

7) Signature:_____
(The authorized credit card holder's original signature must be present in order for your payment request to be processed)

8) Telephone Number: (_____)_____

Send completed forms and payment to the following address:

Accounting Unit, EPA ID
Department of Toxic Substances Control
P.O. Box 876
Sacramento, CA 95812-0876

If you want to ensure the confidentiality of your credit card information, please send all completed forms to this address. Do not use the envelope provided.

IMPORTANT: By completing and signing this form, you are authorizing DTSC to request funds from the credit card company you have indicated. If the request is denied by your credit card company, DTSC will contact you and require payment by another acceptable means.

PRIVACY STATEMENT: The information on this form is requested by the Department of Toxic Substances Control, Accounting Unit. All information is voluntary. The purpose of this information is to verify the authenticity of the credit card you wish to use to pay your EPA ID Number and Manifest Fees. Failure to provide answers to any of the questions may cause your credit card payment request to be denied For more information or access to this record. please contact the DTSC Accounting Unit at (916) 327-8514 or you may write to the address shown above.

THIS SECTION FOR DEPARTMENT USE ONLY

PRIMARY ID NO. _____ **CID NO:**_____

APPROVED ❑
NOT APPROVED ❑

Linda S Adams
Secretary for
Environmental Protection

Department of Toxic Substances Control

Maureen F. Gorsen, Director
8800 Cal Center Drive
Sacramento, California 95826-3200

Arnold Schwarzenegger
Governor

June 6, 2007

To: All EPA ID Number Holders

This annual mailing contains the EPA ID number verification questionnaire and fee Schedules A and B. **You must complete and return them within 30 days of receiving them even if there are no changes and/or you owe no fees.** Please return them in the envelope provided. The rest of this letter provides updates on manifest issues and topics of general interest.

New 2006 Manifest Implementation
The regulated community did a great job last September in switching to the new manifest form. Thank you very much.

After a short delay, data from the new 2006 manifest is now available on the Department of Toxic Substances Control's (DTSC's) Hazardous Waste Tracking System. You can verify your facility and manifest information at www hwts dtsc.ca.gov. We are also asking for your help to correct early problems. If you find any, please email hwtsadmn@dtsc ca.gov.

- ***Generator Copies:***
  - Mail a legible copy to P.O. Box 400 within 30 days of shipping the waste. If the waste is being shipped to a California destination, the generator may use Copy 2 instead of making a photocopy.
  - Legibility: Photocopy quality is very poor and 10 to 15% of the manifests are illegible
  - Failure to Submit: The count of generator copies submitted is down and almost 25% of generator copies are missing compared to received disposal site copies.
  - Requirement: Generators are required to mail DTSC a legible copy of the manifest as it left their facility within 30 days of shipment.
  - Only shipping descriptions are allowed in Item 9b (no ERG, profiles, etc)
  - DTSC will start providing information on top offenders to CUPAs.

- ***Changing Names and Addresses Using the Wrong Box:***
  - Transporter and TSDF addresses are being changed after the manifest is first completed. This is acceptable ONLY if all changes are made in the original Items 6, 7, and 8. These changes cannot be included in Item 14 or 18b.
  - Addresses in Item 18b are only allowed when a TSDF rejects a shipment, not when there is a change made in the destination before it arrives at the TSDF Those changes are only made in Item 8. These changes raise red flags to inspectors about shipment irregularities.

- ***State Waste Code Omissions:***
  - Some generators seem confused by the new manifest format and dropped the California waste code

- Every waste stream line on the manifest must have one California waste code if the manifest starts or ends in California. If a waste is federally regulated, it also needs one or more RCRA waste codes. No more than six State and RCRA waste codes are allowed.

Manifest Corrections:
If you identify any of these problems on your manifests or other errors, you need to inform DTSC by submitting a manifest correction letter.

- DTSC may collect $20 per manifest for each error, omission, or illegible submission
- Companies that identify an error before we do can avoid the fee by submitting a Manifest Correction Letter to DTSC. Follow the procedure in the FAQs at http://hwts.dtsc.ca.gov .

New Online Hazardous Waste Classification Training
DTSC is proud to announce that a California Hazardous Waste Classification online training course is now up and running. This interactive course provides information on the proper classification and understanding of hazardous waste, and hazardous waste classification laws and regulations.

This course covers hazardous waste identification through different characteristics and listings, exclusions from the waste classification requirements, test methods used to measure the characteristics of wastes, and information on how to determine whether a waste is a federally regulated (RCRA) or a California regulated (non-RCRA) hazardous waste. This course can be viewed at either
www dtsc ca.gov/HazardousWaste/index.cfm#Hazardous_Waste_Identification
or http.//ccelearn.csus.edu/wasteclass/ .

Treated Wood Waste
New regulations are expected to be adopted in June 2007 establishing alternative management standards for treated wood waste that are hazardous waste. Treated wood is wood that has been treated with a chemical preservative to protect the wood from insects and other environmental conditions that can lead to wood decay. Wood was likely treated if it was used in direct contact with the ground or installed for harsh outdoor use. Common surface coatings such as paint, varnish, and oil stain are not considered wood preservatives under these regulations.

The new regulations require that generators of more than 10,000 pounds of treated wood waste in a calendar year obtain an EPA ID number if they do not already have one for the site where the waste is generated. Additional information on treated wood and the regulations can be found at http //www.dtsc ca gov/HazardousWaste/Treated_Wood_Waste cfm.

Permanent and temporary EPA ID numbers are available from the Generator Information Services Section at 1-800-61 TOXIC. For permanent numbers please submit a completed DTSC Form 1358 by mail or fax. Temporary EPA ID numbers are available from the Generator Information Services Section at 1-800-61-TOXIC.

New DTSC Web Page Features
DTSC has recently updated its web sites for Household Hazardous Waste (HHW) and Universal Waste, and E-Waste updates will follow soon. These contain new information and links to other services that provide information for businesses that conditionally exempt small quantity generator, in addition to households There is also information on the California Take-It-Back Partnership to encourage retailers to accept back batteries, fluorescent lamps and electronic devices, including cell phones. Check out www.dtsc.ca.gov for these new services.

THANK YOU AGAIN FOR YOUR EFFORTS TO COMPLY WITH HAZARDOUS WASTE AND ENVIRONMENTAL LAWS!

DEPARTMENT OF TOXIC SUBSTANCES CONTROL
GISS R1-4
P.O. BOX 1288
SACRAMENTO, CA 95812-1288

FIRST CLASS

PITNEY BOWES
US POSTAGE
$00.58⁰
JUN06 2007
ZIP 95814
02 1T
6950524

FOR OFFICIAL BUSINESS ONLY

3067082920 C021

KIK Corporation Inc.

Hazardous Waste
Management Training

Waste Evaluations

KIK Corporation Inc.

Hazardous Waste
Management Training

Manifests & Shipping Documentation

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4 Manifest Tracking Number
	CAD051482784	1	(800) 326-1011	00295774 GBF

GENERATOR

Generator's Name and Mailing Address
RIK International
9028 Dice Road
Santa Fe Springs, CA 90670-2520
Generator's Phone 562-906-2215

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name: General Environmental Management, Inc.
U S EPA ID Number: CAD983649880

7 Transporter 2 Company Name
U S EPA ID Number

8 Designated Facility Name and Site Address
DeMenno Kerdoon
2000 N. Alameda Street
Compton, CA 90222
Facility's Phone 310-537-7100
U S EPA ID Number: CAT080013352

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes
	1 Non-RCRA hazardous waste liquid (Compressor Oil)	01	TT	300	G	221
	2 THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE DeMENNO/KERDOON FACILITY IN COMPTON, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAT080013352.					
	3					
	4					

Special Handling Instructions and Additional Information
1) 300 Gallons-Approval#

15 **GENERATOR'S/OFFEROR'S CERTIFICATION** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name: Jim Rissman
Signature: Jim Rissman
Month 8 Day 31 Year 07

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit
Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: DAVID
Signature
Month 8 Day 31 Year 07

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☒ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Reconciled with Modesto of GEM Manifest Reference Number on 9/7/07.

18b Alternate Facility (or Generator)
U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator)
Month Day Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
H039			

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name
Signature
Month 09 Day 11 Year 07

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO GENERATOR

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4. Manifest Tracking Number
		1		774 GBF

GENERATOR

5 Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Generator's Phone

6 Transporter 1 Company Name — U S EPA ID Number

7 Transporter 2 Company Name — U S EPA ID Number

8 Designated Facility Name and Site Address — U S EPA ID Number

Facility's Phone

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes
	1					
	2					
	3					
	4					

14 Special Handling Instructions and Additional Information

15 **GENERATOR'S/OFFEROR'S CERTIFICATION** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name — Signature — Month — Day — Year

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit

Transporter signature (for exports only) Date leaving U S

TR ANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name — Signature — Month — Day — Year

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

IGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) — U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) — Month — Day — Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

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

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

GENERATOR'S INITIAL COPY

General Environmental Management, Inc.

WORK ORDER

WORK ORDER #: 173721 **Service Date: 8/31/2007 12:00:00 AM** Generator EPA ID. CAD051482784

Company Name: KIK International-KIK Custom Products Generator Address. 9028 Dice Road

Contact Name: Raymond Wetter Santa Fe Springs CA 90670-2520

Contact Phone: 562-906-2215

Comments. Transportation and Disposal Please have generator sign profile.

WASTE ITEMS TO BE SHIPPED: ☐ All items shipped as ordered ☐ Actual quantities vary from order (see changes below)

Qty Ordered	Qty Actual	Size/Type	Total Qty	Manifest Line	Manifest #	Profile #	Waste Name
Shipped To:	DeMenno Kerdoon						
1 00	1	~~500 G~~ 300		1	000295774GBF		OIL

Additional Materials and Equipment

Qty	Description	Qty	Description	Qty	Description
	55G Steel Open top (recon)		30G Steel Closed top Drum		Cubic Yard Box
	55G Steel Open top (new)		30G Poly Open top Drum		Oil Dry
	55G Steel Closed top (recon)		30G Poly Closed top Drum		
	55G Steel Closed top (new)		14G Fiber Open top drum		
	55G Poly Open top (recon)		14G Poly Open top drum		
	55G Poly Open top (new)		05G Poly Open top Pail		
	55G Poly Closed top (recon)		05G Poly Closed top Pail		
	55G Poly Closed top (new)		05G Fiber Open top drum		
	30G Steel Open top Drum		Vermiculite		

Labor

Name	Time In	Time Out	Lunch
DA-D 402	0945	1030	

Comments

Authorized Representative (Customer)

Authorized Representative (GEM, Inc.) 8/31/07

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4 Manifest Tracking Number
	CAD051482784	1	(800) 326-1011	000295661 GBF

GENERATOR

5 Generator's Name and Mailing Address
RIK International
9028 Dice Road
Santa Fe Springs, CA 90670-2520
Generator's Phone 562-906-2215

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name: General Environmental Management, Inc.
U S EPA ID Number: CAD983649880

7 Transporter 2 Company Name: SLT EXPRESSWAY
U S EPA ID Number: VTR000007708

8 Designated Facility Name and Site Address
GEM Rancho Cordova, LLC
11855 White Rock Road
Rancho Cordova, CA 95742
Facility's Phone 916 351 0980
U S EPA ID Number: CAD980884183

9a HM	9b U.S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes
	1 Non-RCRA hazardous waste solid (Oily Debris)	002	CF	00600	P	223
	2					
	3					
	4					

GEM has the appropriate permits for, and will accept the waste this generator is shipping.

14 Special Handling Instructions and Additional Information
1) (2 x Cy/Dr) Approval #R17709

15 **GENERATOR'S/OFFEROR'S CERTIFICATION** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name: X Gregorio Medina
Signature: X
Month 08 Day 14 Year 07

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit
Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: SHERWIN NORELGA
Signature:
Month 08 Day 14 Year 07

Transporter 2 Printed/Typed Name: IC Jason Fleming
Signature: IC
Month Day Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) Month Day Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
H141			

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: Robert J Tate
Signature:
Month 08 Day 17 Year 07

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

PO# 15030
DO# 110104

DESIGNATED FACILITY TO GENERATOR

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number CAD051482784	2 Page 1 of 1	3 Emergency Response Phone (800) 326-1011	4 Manifest Tracking Number 00292461 GBF

GENERATOR

5 Generator's Name and Mailing Address
RIK International
9028 Dice Road
Santa Fe Springs, CA 90670-2520
Generator's Phone 562-906-2215

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name: General Environmental Management, Inc.
U S EPA ID Number: CAD983649880

7 Transporter 2 Company Name: SLT EXPRESSWAY
U S EPA ID Number: UTR000007708

8 Designated Facility Name and Site Address: Kettleman Hills, LLC
11855 White Rock Road
Rancho Cordova, CA 95742
Facility's Phone 916 351 0980
U S EPA ID Number: CAD980884183

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes
	Non-RCRA hazardous waste solid (Debris/Sodium Hypochlorite Solution)	02	CF	1500 LF	P	181
	2					
	3					
	4					

14 Special Handling Instructions and Additional Information
1 2 x'yd box-Approval#R17708

15 **GENERATOR'S/OFFEROR'S CERTIFICATION** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name | Signature | Month 07 | Day 10 | Year 07

INT'L

16 International Shipments - ☐ Import to U S ☐ Export from U S Port of entry/exit
Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: DAVID DAVIS | Signature | Month 7 | Day 10 | Year 07

Transporter 2 Printed/Typed Name | Signature | Month 7 | Day 10 | Year 07

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) Month | Day | Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
H141			

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: JUSTIN PICKENS | Signature | Month 07 | Day 12 | Year 07

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

PO#15191
DO#15400

DESIGNATED FACILITY TO GENERATOR

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4 Manifest Tracking Number
	CAD051482784	1	(800) 326-1011	000292113 GBF

GENERATOR

5 Generator's Name and Mailing Address
TK International
9028 Dice Road
Santa Fe Springs, CA 90670-2520
Generator's Phone 562-906-2215

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name
General Environmental Mgmt Inc.

U S EPA ID Number
CAD983649880

7 Transporter 2 Company Name
SLT EXPRESSWAY

U S EPA ID Number
UTR000007706

8 Designated Facility Name and Site Address
GEM Rancho Cordova, LLC
11855 White Rock Road
Rancho Cordova, CA 95742
Facility's Phone 916 351 0980

U S EPA ID Number
CAD980884183

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes
	1 Non-RCRA hazardous waste solid (Debris/Sodium Hypochlorite Solution)	001	CF	00700	P	181
	2					
	3					
	4					

GEM has the appropriate permits for, and will accept the waste this generator ships.

14 Special Handling Instructions and Additional Information
1) Hawaii-Approval #R1-7708

INT'L

15 GENERATOR'S/OFFEROR'S CERTIFICATION I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name: X Jose Duarte | Signature: X Jose Duarte | Month 05 | Day 22 | Year 07

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit
Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Sherwin Noreiga | Signature | Month 05 | Day 22 | Year 07

Transporter 2 Printed/Typed Name: Dawn H Rice | Signature | Month 5 | Day 29 | Year 07

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) Month Day Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
H141			

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: Dustin Peters | Signature | Month 05 | Day 30 | Year 07

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO GENERATOR

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4 Manifest Tracking Number
		1		000292113 GBF

GENERATOR

5 Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Generator's Phone

6 Transporter 1 Company Name — U S EPA ID Number

7 Transporter 2 Company Name — U S EPA ID Number

8 Designated Facility Name and Site Address — U S EPA ID Number

Facility's Phone

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes
	2					
	3					
	4					

14 Special Handling Instructions and Additional Information

15 **GENERATOR'S/OFFEROR'S CERTIFICATION** *I hereby declare* that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name — Signature — Month Day Year

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit

Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name — Signature — Month Day Year

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) — U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) — Month Day Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name — Signature — Month Day Year

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

GENERATOR'S INITIAL COPY

General Environmental Management, Inc.

WORK ORDER

WORK ORDER #: 171635 Service Date: 5/22/2007 12:00:00 AM Generator EPA ID: CAD051482784

Company Name: KIK International-KIK Custom Products
Contact Name: Raymond Wetter
Contact Phone: 562-906-2215
Comments: Transportation and Disposal

Generator Address: 9028 Dice Road
Santa Fe Springs CA 90670-2520

WASTE ITEMS TO BE SHIPPED: ☑ All items shipped as ordered ☐ Actual quantities vary from order (see changes below)

Qty Ordered	Qty Actual	Size/Type	Total Qty	Manifest Line	Manifest #	Profile #	Waste Name
Shipped To:	GEM, Inc.-Rancho Cordova						
1.00	1	Cubic Yard Box	375 P	1	000292113GBF R17708		DEBRIS/HYPOCHLORITE

SERVICE ITEMS: ☑ All items delivered as ordered ☐ Actual quantities vary from order (see changes below)

Qty Ordered	Qty Delivered	Description	Service Company
2.50		Equipment: 24 foot bobtail w/liftgate	GEM, Inc.

Additional Materials and Equipment

Qty	Description	Qty	Description	Qty	Description
	55G Steel Open top (recon)		30G Steel Closed top Drum		Cubic Yard Box
	55G Steel Open top (new)		30G Poly Open top Drum		Oil Dry
	55G Steel Closed top (recon)		30G Poly Closed top Drum		
	55G Steel Closed top (new)		14G Fiber Open top drum		
	55G Poly Open top (recon)		14G Poly Open top drum		
	55G Poly Open top (new)		05G Poly Open top Pail		
	55G Poly Closed top (recon)		05G Poly Closed top Pail		
	55G Poly Closed top (new)		05G Fiber Open top drum		
	30G Steel Open top Drum		Vermiculite		

Labor

Name	Time In	Time Out	Lunch
NDRIGAS	0830	0900	

Comments.

Jose Duarte
Authorized Representative (Customer)

SC
Authorized Representative (GEM, Inc.)

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number CAD051462784	2. Page 1 of 1	3. Emergency Response Phone (800) 326-1011	4. Manifest Tracking Number 000232068 GBF

GENERATOR

5. Generator's Name and Mailing Address
Intermountain Rail
028 Dice Road
Santa Fe Springs, CA 90670-2520
562-906-2215
Generator's Phone

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: General Environmental Mgmt Inc.
U.S. EPA ID Number: CAD983649880

7. Transporter 2 Company Name: SLT EXPRESSWAY
U.S. EPA ID Number: UTR000007706

8. Designated Facility Name and Site Address: Clean Harbors Buttonwillow, LLC
11855 White Rock Road
Rancho Cordova, CA 95742
916 351 0980
Facility's Phone
U.S. EPA ID Number: CAD980884183

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt./Vol.	13 Waste Codes		
	1 ~~Non-RCRA hazardous waste solid (Debris/Sodium Hypochlorite Solution)~~		~~CF~~		~~P~~	~~181~~		
	2 ~~Non-RCRA hazardous waste solid (Oily Debris)~~ GEM has the appropriate permits for, and will accept the waste this generator is shipping.	001	CF	EST 00700	P	223		
	3							
	4							

14. Special Handling Instructions and Additional Information
~~xTriwall-Appr. 318~~
xTriwall-Approval# 217709

15. **GENERATOR'S/OFFEROR'S CERTIFICATION.** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
R Raymond Wetter	RAymond Wetter	05	15	07

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only) Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
ERIK W. CARLSEN		05	15	07
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year
Daniel Gray		5	22	07

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
	H111		

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name	Signature	Month	Day	Year
[illegible]		05	23	07

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

SO#4073
DSH14-361

DESIGNATED FACILITY TO GENERATOR

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
				00232068 GBF

GENERATOR

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Generator's Phone

6. Transporter 1 Company Name

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

Facility's Phone

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt./Vol.	13 Waste Codes
	2	001	CF	E 7	P	
	3					
	4					

14. Special Handling Instructions and Additional Information

15. **GENERATOR'S/OFFEROR'S CERTIFICATION** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name | Signature | Month | Day | Year

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit

Transporter signature (for exports only) Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name | Signature | Month | Day | Year

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name | Signature | Month | Day | Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

GENERATOR'S INITIAL COPY

General Environmental Management, Inc.

WORK ORDER

WORK ORDER #: 171463 Service Date: 5/15/2007 12:00:00 AM Generator EPA ID:

Company Name: KIK Custom Products-KIK Custom Products
Generator Address: 9028 Dice Road
Santa Fe Springs CA 90670-2520

ntact Name: Raymond Wetter

Contact Phone: 562-906-2215

Comments: Transportation and Disposal PICK UP (1) 1 DRUM (1) 1 OIL SOLIDIFIER PILLOWS

WASTE ITEMS TO BE SHIPPED: ☐ All items shipped as ordered ☒ Actual quantities vary from order (see changes below)

Qty Ordered	Qty Actual	Size/Type	Total Qty	Manifest Line	Manifest #	Profile #	Waste Name
Shipped To:		GEM, Inc.-Rancho Cordova					
1.00	2	Cubic Yard Box	450 P	1	000292068GBF		DEBRIS/HYPOCHLORITE
1.00	1	Cubic Yard Box	450 P	2	000292068GBF		OILY DEBRIS

SUPPLIES TO BE DELIVERED: ☐ All items delivered as ordered ☒ Actual quantities vary from order (see changes below)

Qty Ordered	Qty Delivered	Description
1	~~1~~ 4	Energy and Insurance Surcharge (11.5 percent)
2	~~2~~	Cubic yard box with liner and pallet
1	1	Level D protective equipment

SERVICE ITEMS: ☐ All items delivered as ordered ☒ Actual quantities vary from order (see changes below)

Qty Ordered	Qty Delivered	Description	Service Company
2.00		Equipment: 24 foot bobtail w/liftgate	GEM, Inc.

Additional Materials and Equipment

Qty	Description	Qty	Description	Qty	Description
	55G Steel Open top (recon)		30G Steel Closed top Drum		Cubic Yard Box
	55G Steel Open top (new)		30G Poly Open top Drum		Oil Dry
	55G Steel Closed top (recon)		30G Poly Closed top Drum	1	BOBTAIL #219
	55G Steel Closed top (new)		14G Fiber Open top drum	2	EPA LABELS
	55G Poly Open top (recon)		14G Poly Open top drum	2	E-WASTE TOTES
	55G Poly Open top (new)		05G Poly Open top Pail		
	55G Poly Closed top (recon)		05G Poly Closed top Pail		
	55G Poly Closed top (new)		05G Fiber Open top drum		
	30G Steel Open top Drum		Vermiculite		

Labor

Name	Time In	Time Out	Lunch
ERIK	0900	1000	✓

Comments DEBRIS W/ HYPOCHLORITE NEEDS TO BE RE-PACKED

Raymond Wetter

Authorized Representative (Customer)

Authorized Representative (GEM, Inc.)

NON-HAZARDOUS WASTE MANIFEST

ase print or type (Form designed for use on elite (12 pitch) typewriter)

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No

Manifest Document No: 170778b

2 Page 1 of 1

3 Generator's Name and Mailing Address
KIK Custome Products
9028 Dice Road
Santa Fe Springs, CA 90670-2520
4 Generator's Phone (562-906-2215

5 Transporter 1 Company Name: General Environmental Mgmt Inc.
6 US EPA ID Number: CAD983649880
A State Transporter's ID
B Transporter 1 Phone: 800-326-1011

7 Transporter 2 Company Name
8 US EPA ID Number
C State Transporter's ID
D Transporter 2 Phone

9 Designated Facility Name and Site Address
Kinsbursky Brothers Inc.
1314 N. Anaheim Blvd.
Anaheim, CA 92801
10 US EPA ID Number: CAD088504881
E State Facility's ID: CAD088504881
F Facility's Phone: 714 738 8516

11 WASTE DESCRIPTION	12 Containers No	12 Containers Type	13 Total Quantity	14 Unit Wt./Vol
a Batteries, dry, containing potassium hydroxide solid, electric, storage, 8, UN3028, III (Universal Waste)	01	DF	15	P
b Batteries, wet, non-spillable, electric storage, 8, UN2800, III (Universal Waste)	01	DF	80	P
c				
d				

G Additional Descriptions for Materials Listed Above
1) 1 x5 -Alkaline Batteries-Approval# 12227
,ERG#154
2) 1 x14-Sealed Lead Acid Batteries-Approval# 12228
,ERG#154

H Handling Codes for Wastes Listed Above: 4H41

15 Special Handling Instructions and Additional Information

GENERATOR

16 GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations

Printed/Typed Name: Raymond Wetter
Signature: Raymond Wetter
Date: Month 4 Day 13 Year 07

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID PAPA
Signature
Date: Month 4 Day 13 Year 07

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

FACILITY

19 Discrepancy Indication Space

20 Facility Owner or Operator, Certification of receipt of the waste materials covered by this manifest, except as noted in item 19
Printed/Typed Name: Ana Sandoval
Signature
Date: Month 04 Day 18 Year 07

NON-HAZARDOUS WASTE

© 2002 LABELMASTER® (800) 621-5808 www.labelmaster.com
PRINTED ON RECYCLED PAPER USING SOYBEAN INK
PRINTED WITH SOY INK

NON-HAZARDOUS WASTE MANIFEST

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

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No

Manifest Document No: 1707786

2 Page 1 of 1

3 Generator's Name and Mailing Address
KIK Custome Products
9028 Dice Road
Santa Fe Springs, CA 90670-2520

4 Generator's Phone: 562-906-2215

5 Transporter 1 Company Name	6 US EPA ID Number	A State Transporter's ID
General Environmental Mgmt Inc.	CAD983649880	B Transporter 1 Phone 800-326-1011
7 Transporter 2 Company Name	8 US EPA ID Number	C State Transporter's ID
		D Transporter 2 Phone

9 Designated Facility Name and Site Address	10 US EPA ID Number	E State Facility's ID
Kinsbutsky Brothers Inc. 1314 N. Anaheim Blvd. Anaheim, CA 92801	CAD088504881	F Facility's Phone 714 738 8516

11 WASTE DESCRIPTION	12 Containers No	12 Containers Type	13 Total Quantity	14 Unit Wt /Vol
a Batteries, dry, containing potassium hydroxide solid, electric, storage, 8, UN3028, III (Universal Waste)	01	DF	15	P
b Batteries, wet, non-spillable, electric storage, 8, UN2800, III (Universal Waste)	01	DF	60	P
c				
d				

G Additional Descriptions for Materials Listed Above
1) 15" x 6" -Alkaline Batteries-Approval# 17227
,ERG#154
2) 15" x 11"-Sealed Lead Acid Batteries-Approval# 17228
,ERG#154

H Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information

16 GENERATOR'S CERTIFICATION I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations

Printed/Typed Name	Signature	Date Month	Day	Year
Raymond Walter	Raymond Walter	4	13	07

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
David P		4	13	07

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

19 Discrepancy Indication Space

20 Facility Owner or Operator, Certification of receipt of the waste materials covered by this manifest; except as noted in item 19

Printed/Typed Name	Signature	Date Month	Day	Year

GENERATOR

TRANSPORTER

FACILITY

NON-HAZARDOUS WASTE

CF14 © 2002 LABELMASTER® (800) 621 5808 www.labelmaster.com
PRINTED ON RECYCLED PAPER USING SOYBEAN INK
We print with SOY INK

NON-HAZARDOUS WASTE MANIFEST

ase print or type (Form designed for use on elite (12 pitch) typewriter)

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No

Manifest Document No: 170778b

2 Page 1 of 1

3 Generator's Name and Mailing Address
RIK Custome Products
9028 Dice Road
Santa Fe Springs, CA 90670-2520
4 Generator's Phone (562) 906-2215

5 Transporter 1 Company Name: General Environmental Mgmt. Inc.
6 US EPA ID Number: CAD981644550
A State Transporter's ID
B Transporter 1 Phone: 800.326-1011

7 Transporter 2 Company Name
8 US EPA ID Number
C State Transporter's ID
D Transporter 2 Phone

9 Designated Facility Name and Site Address
Kinsbursky Brothers Inc.
1314 N Anaheim Blvd.
Anaheim, CA 92801
10 US EPA ID Number: CAD098504881
E State Facility's ID
F Facility's Phone: 714 738 6516

11 WASTE DESCRIPTION	12 Containers No	12 Containers Type	13 Total Quantity	14 Unit Wt /Vol
a Batteries, dry, containing potassium hydroxide solid, electric storage, 8, UN3028, III (Universal Waste)	1	DF		P
b Batteries, wet, non-spillable, electric storage, 8, UN2800, III (Universal Waste)		DF		P
c				
d				

G Additional Descriptions for Materials Listed Above
1) 1 x 55 -Alkaline Batteries-Approval# 17777
,ERG#154
2) 1 x 55 -Sealed Lead Acid Batteries-Approval# 17778
,ERG#154

H Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information

16 **GENERATOR'S CERTIFICATION** I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport The materials described on this manifest are not subject to federal hazardous waste regulations

Printed/Typed Name: Kimberly Whitley
Signature
Date: Month 4 Day 13 Year 17

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

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

19 Discrepancy Indication Space

20 Facility Owner or Operator, Certification of receipt of the waste materials covered by this manifest, except as noted in item 19
Printed/Typed Name
Signature
Date: Month Day Year

GENERATOR

TRANSPORTER

FACILITY

NON-HAZARDOUS WASTE

CF14 © 2002 LABELMASTER® (800) 621-5808 www.labelmaster.com
PRINTED ON RECYCLED PAPER USING SOYBEAN INK SOY INK

NON-HAZARDOUS WASTE MANIFEST

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

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No

Manifest Document No: 170778b

2. Page 1 of 1

3 Generator's Name and Mailing Address
KIK Custome Products
9028 Dice Road
Santa Fe Springs, CA 90670-2520

4 Generator's Phone (562-906-2215

5 Transporter 1 Company Name: General Environmental Mgmt Inc.

6 US EPA ID Number: CAD983649880

A State Transporter's ID

B Transporter 1 Phone: 800-326-1011

7 Transporter 2 Company Name

8 US EPA ID Number

C State Transporter's ID

D Transporter 2 Phone

9 Designated Facility Name and Site Address
Kinsbursky Brothers Inc.
1314 N. Anaheim Blvd.
Anaheim, CA 92801

10 US EPA ID Number: CAD088504881

E State Facility's ID

F Facility's Phone: 714 738 8516

11 WASTE DESCRIPTION	12 Containers No	12 Containers Type	13 Total Quantity	14 Unit Wt/Vol
a Batteries, dry, containing potassium hydroxide solid, electric, storage, 8, UN3028, III (Universal Waste)	01	DF	15	P
b Batteries, wet, non-spillable, electric storage, 8, UN2800, III (Universal Waste)	01	DF	80	P
c				
d				

G Additional Descriptions for Materials Listed Above
1) / x 5 -Alkaline Batteries-Approval# ,ERG#154
2) / x 14 -Sealed Lead Acid Batteries-Approval# ,ERG#154

H Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information

16 GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations

Printed/Typed Name: Raymond Wetter — Signature: Raymond Wetter — Date: Month 4 Day 13 Year 07

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DAVID MAPIA — Signature — Date: Month 4 Day 13 Year 07

18 Transporter 2 Acknowledgement of Receipt of Materials

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

19 Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of the waste materials covered by this manifest, except as noted in item 19

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

GENERATOR

TRANSPORTER

FACILITY

NON-HAZARDOUS WASTE

© 2002 LABELMASTER® (800) 621-5808 www.labelmaster.com
PRINTED ON RECYCLED PAPER USING SOYBEAN INK PRINTED WITH SOY INK

NON-HAZARDOUS WASTE MANIFEST

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

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No

Manifest Document No: 170778a

2 Page 1 of 1

3 Generator's Name and Mailing Address
KIK Custome Products
9028 Dice Road
Santa Fe Springs, CA 90670-2520

4 Generator's Phone: 562-906-2215

5 Transporter 1 Company Name: General Environmental Mgmt Inc.

6 US EPA ID Number: CAD983649880

A State Transporter's ID

B Transporter 1 Phone: 800-326-1011

7 Transporter 2 Company Name

8 US EPA ID Number

C State Transporter's ID

D Transporter 2 Phone

9 Designated Facility Name and Site Address
Lighting Resources Inc.
805 E. Francis Street
Ontario, CA 91761

10 US EPA ID Number: CAL000827758

E State Facility's ID

F Facility's Phone: 909 923 7252

11 WASTE DESCRIPTION	12 Containers No	12 Containers Type	13 Total Quantity	14 Unit Wt /Vol
a Non hazardous solid (Non PCB Light Ballast)	01	DF	80	P
b Universal Waste (Fluorescent Light Tubes)	09	DF	100	P
c				
d				

G Additional Descriptions for Materials Listed Above
1) 1 x 14- Poly
2) 6 x4ft Boxes-Actual Count: 347 PSS
3 x8ft Boxes-Actual Count: 49 PCS = 1,730 FT

H Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information

GENERATOR

16 **GENERATOR'S CERTIFICATION** I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations

Printed/Typed Name: RAYMOND WETTER
Signature: Raymond Wetter
Date: Month 4 Day 13 Year 07

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DAVID TAPIA
Signature:
Date: Month 4 Day 13 Year 07

18 Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19 Discrepancy Indication Space

20 Facility Owner or Operator, Certification of receipt of the waste materials covered by this manifest, except as noted in item 19

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

NON-HAZARDOUS WASTE

© 2002 LABELMASTER® (800) 621 5808 www.labelmaster.com
PRINTED ON RECYCLED PAPER USING SOYBEAN INK PRINTED WITH SOY INK

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4. Manifest Tracking Number
CAD051482784	1	909-721-2038	000447265 JJK

GENERATOR

5 Generator's Name and Mailing Address
Kik International
9028Dice Road
Santa Fe Springs, CA 90670
Generator's Phone 562-946-6427

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name: Filter Recycling Services, Inc — U S EPA ID Number: CAD982444481

7 Transporter 2 Company Name — U S EPA ID Number

8 Designated Facility Name and Site Address
Filter Recycling Services, Inc
180 W MONTE AVE
BLOOMINGTON, CA 92316
Facility's Phone 909-421-2012

U S EPA ID Number: CAD982444481

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes		
	1 Non-RCRA Hazardous Waste Solid	4	CW	1800	P	352		
	2.							
	3							
	4							

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

14 Special Handling Instructions and Additional Information
Wear Appropriate Protective Equipment — Invoice #27311
9b1) Absorbent pads — Profile #97052325

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

Circle one

15 **GENERATOR'S/OFFEROR'S CERTIFICATION.** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
HOWARD STANLEY	Howard Stanley	9	22	06

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit
Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
DERRICK HAMILTON		9	22	06
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) — U S EPA ID Number
Facility's Phone

18c Signature of Alternate Facility (or Generator)	Month	Day	Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
H141			

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name	Signature	Month	Day	Year
Steven Mastas		9	23	06

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO GENERATOR

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

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4 Manifest Tracking Number 000447265 JJK

GENERATOR

5 Generator's Name and Mailing Address

Generator's Phone

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name — U S EPA ID Number

7 Transporter 2 Company Name — U.S EPA ID Number

8 Designated Facility Name and Site Address — U S EPA ID Number

Facility's Phone

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11. Total Quantity	12 Unit Wt /Vol	13 Waste Codes		
	1	4	DM	1500				
	2							
	3							
	4							

14 Special Handling Instructions and Additional Information

15 **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name — Signature — Month — Day — Year

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit

Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name — Signature — Month — Day — Year

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

IGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) — U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) — Month — Day — Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

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

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

GENERATOR'S INITIAL COPY

TOXIC MAIN/US EPA FEES
1001 I STREET, 21ST FLOOR
SCARAMENTO, CA 95812
916.322.5539

TERMINAL ID: 00002164747
MERCHANT #: 00006389241

VISA
**********4301
CLK: IROCHA EXP.: **/**
SALE INVOICE:
BATCH: 143 SQ: 002587
DATE: 09/07/06 TIME: 13:35:43
AV: APPROVED: 582790
MANUAL

TOTAL $ 227.50

I AGREE TO PAY ABOVE
TOTAL AMOUNT ACCORDING
TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT
IF CREDIT VOUCHER)

SIGN XXXX **RECEIPT ONLY**
KIK INTERNATIONAL

CUSTOMER COPY

PAYMENT FOR: **YEARLY EPA ID & MANIFEST FEES**

FOLDER # **C06-053**

*IF YOU HAVE ANY QUESTIONS PLEASE CONTACT (916) 324-3150.

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

25287825

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

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD035118273423 — Manifest Document No: 19 — 2 Page 1 of 1

Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Rik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 9067[illegible]
4 Generator's Phone (562) 946-6417

A State Manifest Document Number: 25287825
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, In[illegible]
6 US EPA ID Number: CAD982411181
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, In[illegible]
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909) 421-[illegible]

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 Number
a Non-RCRA hazardous waste solid (ads/ Oil),	002	C F	30600	P	State: EPA/Other: NONE
b ~~Non-RCRA hazardous waste liquid (paint~~		F M		G	State: EPA/Other: NONE
c ~~Non-RCRA hazardous waste liquid (oil~~					State: EPA/Other: NONE
d ~~Non-RCRA hazardous waste solid~~		D M		G	State: EPA/Other:

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
a ~~Non-RCRA~~
b ~~Non-RCRA~~
c ~~Non-RCRA~~
d ~~Non-RCRA~~

PROFILE # 97052325
PROFILE # 03062602
PROFILE # 03062603
PROFILE # 05101707

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

15 Special Handling Instructions and Additional Information: clothing
24 hour emergency contact phone # 1-909-[illegible]-3032
Bill to: Circle Green

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
K Charles Hemphill		01	[illegible]	[illegible]

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]		01	[illegible]	16

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	Signature	Month	Day	Year
Steven Masters		01	18	16

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

25287825

IN CASE OF 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 | 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
[illegible]
4 Generator's Phone ( ) [illegible]

A State Manifest Document Number: 25287825
B State Generator's ID:

5 Transporter 1 Company Name | 6 US EPA ID Number
[illegible]

C State Transporter's ID [Reserved]
D Transporter's Phone

7 Transporter 2 Company Name | 8 US EPA ID Number

E State Transporter's ID [Reserved]
F Transporter's Phone

9 Designated Facility Name and Site Address | 10 US EPA ID Number
[illegible]

G State Facility's ID
H Facility's Phone

11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12 Containers No	Type	13 Total Quantity	14 Unit Wt/Vol	I Waste Number
a Non-RCRA hazardous waste solid, n.o.s. (Soil / Oil)	0 0 3	P	0 0 6 6 0	L	State EPA/Other NONE
b [illegible]					State EPA/Other NONE
c [illegible]					State EPA/Other NONE
d [illegible]					State EPA/Other

J Additional Descriptions for Materials Listed Above
[illegible]
PROFILE # 97042425
PROFILE # 93062502
PROFILE # 93062603
PROFILE # 95101707

K Handling Codes for Wastes Listed Above
a | b
c | d

15 Special Handling Instructions and Additional Information
[illegible]

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	Signature	Month	Day	Year
[illegible]	[illegible]	[illegible]		

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	[illegible]		

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4 Manifest Tracking Number
CAD051482784	1	909-721-2038	000457188 JJK

GENERATOR

5 Generator's Name and Mailing Address
Kik International
9028Dice Road
Santa Fe Springs CA 90670
Generator's Phone 562-946-6427-14

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name: Filter Recycling Services, Inc — U S EPA ID Number: CAD982444481

7 Transporter 2 Company Name — U S EPA ID Number

8 Designated Facility Name and Site Address
Filter Recycling Services, Inc
180 W MONTE AVE
BLOOMINGTON CA 92316
Facility's Phone 909-421-2012

U S EPA ID Number: CAD982444481

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No.	10 Containers Type	11 Total Quantity	12 Unit Wt /Vol	13 Waste Codes		
	1 Non-RCRA Hazardous Waste Solid	5	CF	4000	P	352		
	2. NON-RCRA HAZARDOUS WASTE LIQUID	2	DM	110	G	221	223	
	3 FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.							
	4							

14 Special Handling Instructions and Additional Information
9b1) Absorbent pads Profile #97052325 Wear Appropriate PPE Invoice #34183 Bill to: Cirle Green Env
5XCF
9b2) WASTE OIL 2X55 PROFILE# INVOICE# 34183

15 **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
Santiago F. Hernandez	Santiago F. Hernandez	3	23	07

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S
Transporter signature (for exports only) — Port of entry/exit — Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Fernando Diaz		3	23	07
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

One or more of the material listed on this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land

Manifest Reference Number

18b Alternate Facility (or Generator) — U S EPA ID Number
Facility's Phone

18c. Signature of Alternate Facility (or Generator)	Month	Day	Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
H141	H141		

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name	Signature	Month	Day	Year
Steven Masters		3	26	07

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO GENERATOR

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

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4 Manifest Tracking Number
				000457188 JJK

GENERATOR

5 Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

Generator's Phone

6 Transporter 1 Company Name — U S EPA ID Number

7 Transporter 2 Company Name — U S EPA ID Number

8 Designated Facility Name and Site Address — U S EPA ID Number

Facility's Phone

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12. Unit Wt /Vol	13 Waste Codes		
	1	5		4000				
	2	2	DM	110	G	221		
	3							
	4.							

14 Special Handling Instructions and Additional Information

5 X OF

(b) WASTE OIL BASE PROFILE # — MANIFEST 30183

15 **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name — Signature — Month 3 — Day 22 — Year 07

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit

Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name — Signature — Month 3 — Day 22 — Year 07

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) — U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) — Month — Day — Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

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

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

GENERATOR'S INITIAL COPY

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

25144798

IN CASE OF 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 | Manifest Document No | 2 Page 1 of | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address

4 Generator's Phone

A State Manifest Document Number: 25144798

B State Generator's ID

5 Transporter 1 Company Name | 6 US EPA ID Number

C State Transporter's ID [Reserved]

D Transporter's Phone

7 Transporter 2 Company Name | 8 US EPA ID Number

E State Transporter's ID [Reserved]

F Transporter's Phone

9 Designated Facility Name and Site Address | 10 US EPA ID Number

G State Facility's ID

H Facility's Phone

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 Number
a Non RCRA hazardous waste solid (oily rags)	002		01500		State 352 EPA/Other NONE
b					State 251 EPA/Other NONE
c					State EPA/Other NONE
d					State EPA/Other NONE

J Additional Descriptions for Materials Listed Above

K Handling Codes for Wastes Listed Above

11a absorbent	PROFILE # 97052325	a	b
11b paint	PROFILE # C3062602		
11c oil	PROFILE # 03067603	c	d
11d oily water	PROFILE # 05101707		

15 Special Handling Instructions and Additional Information

#97052325

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	Signature	Month	Day	Year

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

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

GENERATOR

3 Generator's Name and Mailing Address
K&K International
[illegible] PICO BLVD
[illegible]

4 Generator's Phone ( )

A State Manifest Document Number: 25144798

B State Generator's ID:

5 Transporter 1 Company Name: [illegible] Environmental Services, Inc.

6 US EPA ID Number: CAD981382721

C State Transporter's ID [Reserved]:

D Transporter's Phone: (909) 873-3141

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
190 S. Monte Avenue
Rialto, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: 909-421-2016

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 Number
a Non RCRA hazardous waste solid (Paint/ Oil)	002	CF	01500		State 352 EPA/Other NONE
b ~~Non RCRA hazardous waste liquid (oil)~~					State 291 EPA/Other ~~NONE~~
c ~~Non RCRA hazardous waste solid (Paint)~~					State EPA/Other ~~NONE~~
d ~~Non RCRA hazardous waste liquid (oil)~~					State EPA/Other ~~NONE~~

FILTER RECYCLING SERVICES RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
1(a) Absorbent — PROFILE # 97052325
~~1(b) paint — PROFILE # 05062602~~
~~1(c) oil — PROFILE # 05062603~~
~~1(d) oil, water — PROFILE # 05101707~~

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
In case emergency, contact phone # 1-909-421-2016
#97052325

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
[illegible] Hamill	[signature]			

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
Steven Masters	[signature]	03	21	2016

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

25144798

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD982444481	25146021		

3 Generator's Name and Mailing Address [illegible] International [illegible] DICK ROAD [illegible] SPRINGS, [illegible] 4 Generator's Phone (562) 946-[illegible]	A State Manifest Document Number 25146021 B State Generator's ID
5 Transporter 1 Company Name: Filter Recycling Services, Inc. — 6 US EPA ID Number: CAD982444481	C State Transporter's ID [Reserved] D Transporter's Phone (909)873-4141
7 Transporter 2 Company Name — 8 US EPA ID Number	E State Transporter's ID [Reserved] F Transporter's Phone
9 Designated Facility Name and Site Address Filter Recycling Services, Inc. 190 W. Monte Avenue Rialto, CA 92316 — 10 US EPA ID Number: CAD982441331	G State Facility's ID CAD982444481 H Facility's Phone (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	02000	P	State CC EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint)		DM		G	State EPA/Other
c Non-RCRA hazardous waste liquid (oil)		DM		G	State EPA/Other
d Non-RCRA hazardous waste liquid	001	TT	00210	G	State EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above
~~(10) paint~~	PROFILE # 97052325	a 01 — b
~~(11) oil~~	~~PROFILE # 03062602~~	c — d 01
(12) oily water	~~PROFILE #03062603~~ PROFILE #05101707	

15 Special Handling Instructions and Additional Information: cleaning
24 hour emergency contact phone # 1-909-721-[illegible]

Circle Green Environmental

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
Chris Hamilton	[signature]	01	12	16

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jon Jacobsen	[signature]	01	12	

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	Signature	Month	Day	Year
Steven Masters	[signature]	01	26	16

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

25146021

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

25146021

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

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
[illegible]	[illegible]		

3 Generator's Name and Mailing Address	A State Manifest Document Number
[illegible]	25146021
4 Generator's Phone ( ) [illegible]	B State Generator's ID
5 Transporter 1 Company Name / 6 US EPA ID Number: [illegible]	C State Transporter's ID [Reserved]
	D Transporter's Phone (909) 373-4141
7 Transporter 2 Company Name / 8 US EPA ID Number	E State Transporter's ID [Reserved]
	F. Transporter's Phone
9 Designated Facility Name and Site Address / 10. US EPA ID Number: [illegible]	G State Facility's ID
	H Facility's Phone (909) 421-2032

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 Number
a Non-RCRA hazardous waste solid (Paint)	[illegible]	F	[illegible]	P	State 352 / EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint)		M			State 331 / EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil)					State 221 / EPA/Other [illegible]
d Non-RCRA hazardous waste liquid	[illegible]	M	[illegible]		State 352 / EPA/Other

J Additional Descriptions for Materials Listed Above

i) ~~Non-RCRA~~ paint — PROFILE # 07052325
ii) ~~Non-RCRA~~ oil — ~~PROFILE # 03062602~~
iii) oily water — ~~PROFILE # 05062603~~ PROFILE #05161702

K Handling Codes for Wastes Listed Above

a | b | c | d

15 Special Handling Instructions and Additional Information: [illegible]

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	Signature	Month	Day	Year
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator ID Number	2 Page 1 of	3 Emergency Response Phone	4. Manifest Tracking Number
	1		000455983 JK

GENERATOR

5 Generator's Name and Mailing Address

Generator's Phone

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name

U S EPA ID Number

7 Transporter 2 Company Name

U S. EPA ID Number

8 Designated Facility Name and Site Address

U S EPA ID Number

Facility's Phone

9a HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11 Total Quantity	12. Unit Wt /Vol	13 Waste Codes		
	1							
	2							
	3							
	4							

14 Special Handling Instructions and Additional Information

15 **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name | Signature | Month | Day | Year

INT'L

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit

Transporter signature (for exports only) Date leaving U S

TRANSPORTER

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name | Signature | Month | Day | Year

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) | Month | Day | Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name | Signature | Month | Day | Year

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

GENERATOR'S INITIAL COPY

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator ID Number: ~~CAD051482784~~

2 Page 1 of: 1

3 Emergency Response Phone: ~~909 723 2038~~

4. Manifest Tracking Number: 000455983 JJK

5 Generator's Name and Mailing Address

Kik International
9028Dice Road
Santa Fe Springs, CA 90670

Generator's Phone: ~~562-940-0427~~

Generator's Site Address (if different than mailing address)

6 Transporter 1 Company Name: Filter Recycling Services Inc

U S EPA ID Number: ~~CAD982444481~~

7 Transporter 2 Company Name

U S EPA ID Number

8 Designated Facility Name and Site Address

Filter Recycling Services, Inc
180 W MONTE AVE
BLOOMINGTON CA 92316

Facility's Phone: ~~909-421-2612~~

U S EPA ID Number: CAD982444481

9a. HM	9b U S DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10 Containers No	10 Containers Type	11. Total Quantity	12 Unit Wt /Vol	13 Waste Codes
	1 Non-RCRA Hazardous Waste Solid	~~2~~	~~CF~~	1500	P	~~352~~
	2. FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.					
	3.					
	4					

14 Special Handling Instructions and Additional Information

9b1) Absorbent pads Profile #97052325 Wear Appropriate PPE Invoice #28546 [redacted]

One or more of the material listed on this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land

15 **GENERATOR'S/OFFEROR'S CERTIFICATION.** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name: Tim Rissman

Signature: Tim Rissman

Month Day Year: 10 26 06

16 International Shipments ☐ Import to U S ☐ Export from U S Port of entry/exit

Transporter signature (for exports only) Date leaving U S.

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Deborah Hancock

Signature

Month Day Year: 10 26 06

Transporter 2 Printed/Typed Name

Signature

Month Day Year

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b Alternate Facility (or Generator) U S EPA ID Number

Facility's Phone

18c Signature of Alternate Facility (or Generator) Month Day Year

19 Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
H141			

20 Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: Steven Masters

Signature

Month Day Year: 10 25 06

GENERATOR | INTL | TRANSPORTER | DESIGNATED FACILITY

EPA Form 8700-22 (Rev 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO GENERATOR

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type (Form designed for use on elite (12-pitch) typewriter)

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1	Information in the shaded areas is not required by Federal law
CAD051482784	03447	1 of 1	

3. Generator's Name and Mailing Address
KIK International SoCal, Inc.
9028 Dice Road
Santa Fe Springs, Ca. 90670

4 Generator's Phone ( ) 562-946-6427

A State Manifest Document Number: 24403447

B State Generator's ID:

5 Transporter 1 Company Name: Phibro-Tech, INc.

6 US EPA ID Number: CAD008488025

C State Transporter's ID [Reserved]: NA

D Transporter's Phone: 562-698-8036

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Phibro-Tech, Inc.
8851 Dice Road
Santa Fe Springs, Ca. 90670

10 US EPA ID Number: CAD008488025

G State Facility's ID: CAD008488025

H Facility's Phone: 562-698-8036

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 Number
a. Non RCRA Hazardous Waste Liquid (water, chloride)	001	TT	05000	G	State: EPA/Other: 135 n/a
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

J Additional Descriptions for Materials Listed Above
a. ERS# 20050195L water and chloride

K Handling Codes for Wastes Listed Above
a. 15 b. c. d.

15 Special Handling Instructions and Additional Information
a. ERG# 171 wear protective gloves, goggles, and clothing.
emergency phone number 562-946-6427

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	Signature	Month	Day	Year
ROBERT D. BROWN	Robert D Brown	07	12	05

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE LUIS RODRIGUEZ		07	12	05

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	Signature	Month	Day	Year
RUDY RAMOS		07	12	05

DO NOT WRITE BELOW THIS LINE.

Yellow. TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS (Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

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

24403447

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

24403447

IN CASE OF 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: CAD052148284 — Manifest Document No: 034477 — 2 Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
KIK International SoCal,Inc.
9028 Dice Road
Santa Fe Springs,Ca. 90670

4 Generator's Phone ( ) 562-946-6427

A State Manifest Document Number: 24403447

B State Generator's ID:

5 Transporter 1 Company Name: Phibro-Tech,Inc.

6 US EPA ID Number: CAD008438025

C State Transporter's ID [Reserved]:

D Transporter's Phone: 562-698-8036

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Phibro-Tech,Inc.
8851 Dice Road
Santa Fe Springs,Ca. 90670

10 US EPA ID Number: CAD008488025

G State Facility's ID: CAD008488025

H Facility's Phone: 562-698-8036

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 Number
a. Non RCRA Hazardous Waste Liquid (water,chloride)	001	TT	05000	G	State: EPA/Other: 135 n/a
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

J Additional Descriptions for Materials Listed Above
a. ERS# water and chloride

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

15 Special Handling Instructions and Additional Information
a. ERG#171 wear protective gloves,goggles,and clothing.
emergency phone number 562-946-6427

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	Signature	Month	Day	Year
Robert D. Brown		07	12	15

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jose Luis Rodriguez		07	12	15

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD098182764 | Manifest Document No: 074616 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
KIK International SoCal,Inc.
9028 Dice Road
Santa Fe Springs,Ca. 90670

4 Generator's Phone (562-946-6427)

A State Manifest Document Number: 24507466

B State Generator's ID:

C State Transporter's ID [Reserved]: N/A

5 Transporter 1 Company Name: Phibro-Tech,INc.

6 US EPA ID Number: CAD008488025

D Transporter's Phone: 562-698-8036

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Phibro-Tech,Inc.
8851 Dice Road
Santa Fe Springs,Ca. 90670

10 US EPA ID Number: CAD008488025

G State Facility's ID: CAD008488025

H Facility's Phone: 562-698-8036

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 Number
a. Non RCRA Hazardous Waste Liquid (water,chloride)	001	TR	05000	G	State: EPA/Other: 135 n/a
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

J Additional Descriptions for Materials Listed Above
a. ERS# 20050195L water and chloride
Misc

K Handling Codes for Wastes Listed Above
a: 15 b: c: d:

15 Special Handling Instructions and Additional Information
a. ERG#171 wear protective gloves,goggles,and clothing.
emergency phone number 562-946-6427

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	Signature	Month	Day	Year
SANTIAGO E HERNANDEZ	Santiago Hernandez	07	12	05

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE Luis RODRIGUEZ	Jose Luis Rodriguez	07	12	05

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	Signature	Month	Day	Year
RUDY RAMOS	Rudy Ramos	07	12	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

24507466

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1	Information in the shaded areas is not required by Federal law
CAPPPE4E4E4	07246	1 of 1	

GENERATOR

3 Generator's Name and Mailing Address
KIK International SoCal, Inc.
9026 Dice Road
Santa Fe Springs, Ca. 90670

4 Generator's Phone (562-946-6427)

A State Manifest Document Number: 24507466

B State Generator's ID:

5 Transporter 1 Company Name: Phibro-Tech, Inc.

6 US EPA ID Number: CAD008488025

C State Transporter's ID [Reserved]

D Transporter's Phone: 562-698-8036

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]

F Transporter's Phone:

9 Designated Facility Name and Site Address
Phibro-Tech, Inc.
8851 Dice Road
Santa Fe Springs, Ca. 90670

10 US EPA ID Number: CAD008488025

G State Facility's ID: CAD008488025

H Facility's Phone: 562-698-8036

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 Number
a. Non RCRA hazardous Waste Liquid (water, chloride)	001	TT	05000	G	State: EPA/Other: 335 n/a
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

J Additional Descriptions for Materials Listed Above
a. ERS# water and chloride

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

15 Special Handling Instructions and Additional Information
a. ERG# 171 wear protective gloves, goggles, and clothing.
emergency phone number 562-946-6427

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	Signature	Month	Day	Year
SANTIAGO E HERNANDEZ	Santiago Hernandez	07	12	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jose Luis Rodriguez	Jose Luis Rodriguez	07	12	05

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	Signature	Month	Day	Year

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

24507466

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

2	1000	O&AB Pads	02	FILTER RECYC	21705750	No	12/28/01	8
1	**38900**	**<<

2	1000	O&AB Pads	02	FILTER RECYC.	21705750	No	12/28/01	8
1	**38900**	**<<

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No | 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
[illegible] International
[illegible] DIGUE ROAD
[illegible]

A State Manifest Document Number: 23557009

4 Generator's Phone [illegible]

B State Generator's ID

5 Transporter 1 Company Name | 6 US EPA ID Number

C State Transporter's ID [Reserved]

D Transporter's Phone [illegible]

7 Transporter 2 Company Name | 8 US EPA ID Number

E State Transporter's ID [Reserved]

F Transporter's Phone

9 Designated Facility Name and Site Address
[illegible]

10 US EPA ID Number

G State Facility's ID

H. Facility's Phone (903) 421-[illegible]

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 Number
a [illegible]	002	DF	01000	G	State 352 EPA/Other NONE
b [illegible]		M			State 791 EPA/Other NONE
c [illegible]		M			State 221 EPA/Other NONE
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
1) Oil Absorbent — PROFILE # 97052325
2) Lib. paint — PROFILE # 03062602
3) Lic. oil — PROFILE # 03062603

K Handling Codes for Wastes Listed Above
a | b | c | d

15 Special Handling Instructions and Additional Information
Wear protective clothing
In case emergency contact phone # [illegible]
Profile# 97052325

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	Signature	Month	Day	Year
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

DTSC 8022A (1/99)
EPA 8700--22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

IN CASE OF 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 | Manifest Document No. | 2 Page 1 of | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address

4 Generator's Phone ( )

A State Manifest Document Number: 23813749

B State Generator's ID

5 Transporter 1 Company Name | 6 US EPA ID Number

C State Transporter's ID [Reserved]

D Transporter's Phone

7 Transporter 2 Company Name | 8 US EPA ID Number

E State Transporter's ID [Reserved]

F. Transporter's Phone

9 Designated Facility Name and Site Address | 10 US EPA ID Number

G State Facility's ID

H Facility's Phone: (909)421-2012

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 Number
a	002		01000		State 352 / EPA/Other NONE
b (perfume)	001		00055		State 343 / EPA/Other NONE
c					State 221 / EPA/Other NONE
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above

PROFILE # 00052325
PROFILE # ~~300602~~ 00051204
~~PROFILE # 00052325~~

K Handling Codes for Wastes Listed Above

a H101 | b H1

c | d

15 Special Handling Instructions and Additional Information

Approval # on file

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	Signature	Month	Day	Year
		5	17	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		5	17	01

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	Signature	Month	Day	Year
Steve Masters		5	21	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

CERTIFICATE OF RECYCLING

March 11, 2004

Lighting Resources, Inc. certifies that the materials listed have been received from,

K.I.K. International-Southern CA. Division

title transfers to Lighting Resources, Inc. recycling center in Ontario, California upon acceptance of material. The lamps are processed and recycled in accordance with all federal, state, and local laws under California EPA Permit # CAL 000827758.

Bill Of Lading:/
#3049

Inventory:

F-40 Lamps	Qty.	50
HID Lamps	Qty.	31
F-96 Lamps	Qty.	25

Generated By:

K.I.K International-Southern CA
9028 Dice Road
Santa Fe Springs, CA. 90670

Thank you for helping to protect our environment.

Certified By:

Lighting Resources, Inc
Ontario, California
Maribel Rodriguez
Accounts Receivable
Toll Free 1-800-572-9253
Fax (909) 923-3962

CONTAINERSHIPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST#	OUT OF STATE	DATE	NO
1	5000G	H2O/CHLORIDE	01	PHIBRO TECH	24403447	No	07/12/05	9
1	5000G	H2O/CHLORIDE	01	PHIBRO TECH	24507466	No	07/12/05	10
2	1500#	O &AB PADS	01	FILTER RECYC.	24510383	No	07/21/05	11
1	62	LIGHT BULBS		Lighting Resource	#8040	No	08/03/05	12
3	1500#	O&AB PADS	01	FILTER RECYC.	24508440	No	09/02/05	13
2	1500#	O&AB PADS	01	FILTER RECYC.	24509511	No	10/18/05	14
2	200#	FLMBLE LIQD	01	PACIFIC RESRCE	21953050	No	11/03/05	15
2	1100#	O & AB PADS	01	FILTER RECYC.	24812269	No	12/05/05	16
26	**168000**	**<<

2	1000	O&AB Pads	02	FILTER RECYC.	21705750	No	12/28/01	8
1	**38900**	**<<

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD059148278 | Manifest Document No: 41718 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik International
2028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 24812269
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909) 873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909) 421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil,	002	C F	01100	P	State 352 / EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		D M		G	~~State 251~~ / ~~EPA/Other NONE~~
c ~~Non-RCRA hazardous waste liquid (oil~~ FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR,		D M		G	~~State~~ / ~~EPA/Other NONE~~
d AND WILL ACCEPT THIS WASTE AS SHIPPED.					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) Absorbent
~~11b) paint~~
~~11c) Oil~~
PROFILE # 97052325
~~PROFILE # 03062602~~
~~PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-3038
PROFILE # ON FILE
[redacted]

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
[illegible]	[signature]	12	10	15

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	12	10	15

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	Signature	Month	Day	Year
Steven Masters	[signature]	12	06	15

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

GENERATOR

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

24812269

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

24812269

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-7

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD981482769			

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 24812269
B State Generator's ID:
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141
E State Transporter's ID [Reserved]
F. Transporter's Phone:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982443481
7 Transporter 2 Company Name:
8 US EPA ID Number:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
186 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982411491
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	F	01100	P	State 952 EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (Paint)~~	001	D M		G	State 991 EPA/Other NONE
c ~~Non-RCRA hazardous waste liquid (Oil)~~		D M		G	State 991 EPA/Other NONE
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
1(a) absorbent — PROFILE # 97052325
1(b) paint — PROFILE # 03062602
1(c) oil — PROFILE # 03062603

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-874-2030
PROFILE # ON FILE [redacted]

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	Signature	Month	Day	Year

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

21953050

IN CASE OF 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: CAD059482784 | Manifest Document No: 53050 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
KIK INTERNATIONAL
9028 DICE RD.
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

A State Manifest Document Number: 21953050

B State Generator's ID:

5 Transporter 1 Company Name: PACIFIC COAST LACQUER

6 US EPA ID Number: CAD008252405

C State Transporter's ID [Reserved]

D Transporter's Phone: 800 752-1505

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]

F Transporter's Phone:

9 Designated Facility Name and Site Address
PACIFIC RESOURCE RECOVERY
5150 EAST PICO BLVD
LOS ANGELES, CA 90023

10 US EPA ID Number: CAD008252405

G State Facility's ID: CAD008252405

H Facility's Phone: (800) 499-7145

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 Number
RQ, Waste flammable liquids, n.o.s., 3, UN1993, PGII, (D001) (xylene, paint)	002	DM	00050	G	State 214 / EPA/Other D001
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11A) PROFILE# 25100202 FLAMMABLE LIQUIDS

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

15 Special Handling Instructions and Additional Information
(RQ# 11A) L28
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT
24 HOUR EMERGENCY CONTACT: KIK UNIDOF 323-865-6497
Add EPA: 11e) F003

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	Signature	Month	Day	Year
Charles Humphill		11	03	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MIKE BUCHANAN		11	03	05

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	Signature	Month	Day	Year
Dan Stommes		11	05	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700-22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

21953050

IN CASE OF 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	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD [illegible]			

GENERATOR

3 Generator's Name and Mailing Address
[illegible]

4 Generator's Phone [illegible]

A State Manifest Document Number: 21953050

B State Generator's ID:

5 Transporter 1 Company Name: [illegible]

6 US EPA ID Number:

C State Transporter's ID [Reserved.]:

D Transporter's Phone: [illegible]

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved.]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
[illegible]

10 US EPA ID Number:

G State Facility's ID: [illegible]

H Facility's Phone: (909) 459 7145

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 Number
a. [illegible]	CU2	[illegible]	CU050	[illegible]	State 214 EPA/Other D001
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
[illegible]

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

15 Special Handling Instructions and Additional Information
[illegible]

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	Signature	Month	Day	Year
[illegible]	[signature]	11	03	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MIKE BUCHANAN	[signature]	11	03	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

Pacific Resource Recovery
3150 East Pico Boulevard, Los Angeles, CA 90023
one (800) 499-7145 Fax (213) 780-0078

LAND DISPOSAL RESTRICTION NOTIFICATION

Manifest Line #	Approval #	Manifest Line #	Approval #	Manifest Line #	Approval #
A	25102202				

This notification form shall be completed by the generator and shall accompany each shipment of restricted waste subject to the Land Disposal Restrictions (40 CFR 268 Subpart C)

- ➤ Complete all information in Section I.
- ➤ Check mark all appropriate Regulated Constituents in Section II, additional applicable Sections and/or complete Section III.
- ➤ Sign and date Section IV.

SECTION I

GENERATOR'S NAME	Kik International
EPA I.D. NUMBER	CAD051482284
MANIFEST NUMBER	21953050
TREATABILITY GROUP	(Check one) ☐ Wastewater ☒ Non-Wastewater
HAZARDOUS DEBRIS	☐ Yes ☒ No

EPA HAZARDOUS WASTE CODE(S) –

D001								
F003								

☐ There are no underlying hazardous constituents of concern, or

☒ There are underlying hazardous constituents of concern which do not meet the treatment standards of 40 CFR 268.48, Table UTS – Universal Treatment Standards (see Section II)

I have used the following to make the above determination.

☒ Knowledge of the waste producing process, raw materials used and reaction products, or

☐ Results of analysis for the constituents in Table UTS.

Waste analysis data attached? ☐ Yes ☒ No

NON-RCRA WASTE ☐ LIQUID ☐ SOLID

Effective 1/31/96 –
Pursuant to Section 25179 6 of the Health and Safety Code, NON-RCRA aqueous and solid waste containing organics has been repealed from Land Disposal Restriction Notification requirements

(Check all that apply) ☐ 11a ☐ 11b ☐ 11c ☐ 11d

☐ other (28a – 28i)

UNIVERSAL TREATMENT STANDARDS

SECTION II

The Underlying Hazardous Constituents must be identified for waste streams which carry the EPA Waste Codes F001–F005, F039, D001 (only D001 not treated by RORGS; CMBST or POLYM), D005–D043 (only D005–D043 if treated in Non-CWA, Non-CWA equivalent or Non-SDWA facilities).

The wastes identified on the aforementioned manifest document number and bearing the EPA Hazardous Waste Number(s) identified in Section I are subject to the Land Disposal Restrictions of 40 CFR 268 Subpart C. The wastes do not meet the applicable treatment standards specified in 40 CFR 268 Subpart D or exceeds the applicable prohibition levels specified in 40 CFR 268 32 (California list wastes) or RCRA Section 3004(d) In compliance with the requirements of 40 CFR 268 7 and 268 9 we are indicating below the applicable constituents of concern

40 CFR 268.48 TABLE UTS – UNIVERSAL TREATMENT STANDARDS *(Continued)*

Regulated constituent – common name	CAS[1] NO	Wastewater standard concentration in mg/l[2]	Non-wastewater standard concentration in mg/kg[3] unless noted as "mg/l TCLP"
☐Acenaphthylene	208-96-8	0 059	3 4
☐Acenaphthene	83-32-9	0 059	3 4
☐Acetone	67-64-1	0 28	160
☐Acetonitrile	75-05-8	5 6	1 8
☐Acetophenone	96-86-2	0 010	9 7
☐2-Acetylaminofluorene	53-96-3	0 059	140
☐Acrolein	107-02-8	0 29	NA
☐Acrylamide	79-06-1	19	23
☐Acrylonitrile	107-13-1	0 24	84
☐Aldrin	309-00-2	0 021	0 066
☐4-Aminobiphenyl	92-67-1	0 13	NA
☐Aniline	62-53-3	0 81	14
☐Anthracene	120-12-7	0 059	3 4
☐Aramite	140-57-8	0 36	NA
☐alpha-BHC	319-84-6	0 00014	0 066
☐beta-BHC	319-85-7	0 00014	0 066
☐delta-BHC	319-86-8	0 023	0 066
☐gamma-BHC	58-89-9	0 0017	0 066
☐Benz(a)anthracene	56-55-3	0 059	3 4
☐Benzal chloride	98-87-3	0 055	6 0
☐Benzene	71-43-2	0 14	10
☐Benzo(a)pyrene	50-32-8	0 061	3 4
☐Benzo(b)fluoranthene	205-99-2	0 11	6 8
☐Benzo(g,h,i)perylene	191-24-2	0 0055	1 8
☐Benzo(k)fluoranthene	207-08-9	0 11	6 8
☐bis-(2-Chloroethoxy) methane	111-91-1	0 036	7 2
☐bis-(2-Chloroethyl) ether	111-44-4	0 033	6 0
☐bis-(Chloroisopropyl) ether	108-60-1	0 055	7 2
☐bis-(Ethylhexyl) phthalate	117-81-7	0 28	28
☐Bromodichloromethane	75-27-4	0 35	15
☐Bromomethane (methyl bromide)	74-83-9	0 11	15
☐4-Bromophenyl phenyl ether	101-55-3	0 055	15
☐b-Butyl alcohol	71-36-3	5 6	2 6
☐Butyl benzyl phthalate	85-68-7	0 017	28
☐2-sec-Butyl-4,6-dinitrophenol dinoseb	88-85-7	0 066	2 5
☐Carbon disulfide	75-15-0	3 8	4 8 TCLP
☐Carbon tetrachloride	56-23-5	0 057	6 0
☐Chlordane (alpha & gamma isomers)	57-74-9	0 0033	0 26
☐p-Chloroaniline	106-47-8	0 46	16
☐Chlorobenzene	108-90-7	0 057	6 0
☐Chlorobenzilate	510-15-6	0 10	NA
☐2-Chloro-1,3-butadiene	126-99-8	0 057	0 28
☐Chlorodibromomethane	124-48-1	0 057	15
☐Chloroethane	75-00-3	0 27	6 0
☐Chloroform	67-66-3	0 046	6 0
☐p-Chloro-m-cresol	59-50-7	0 018	14
☐2-Chloroethyl vinyl ether	110-75-8	0 062	NA
☐Chloromethane (methyl chloride)	74-87-3	0 19	30
☐2-Chloronaphthalene	91-8-7	0 055	5 6
☐2-Chlorophenol	95-57-8	0 044	5 7
☐3-Chloropropylene	107-05-1	0 036	30
☐Chrysene	218-01-9	0 059	3 4
☐p-Cresol	106-44-5	0 77	5 6
☐m-Cresol	108-39-4	0 77	5 6
☐o-Cresol	95-48-7	0 11	5 6
☐Cyclohexanone	108-94-1	0 36	0 75 TCLP
☐2-4-Dichlorophenoxyacetic acid (2,4-D)	94-75-7	0 72	10
☐o,p'-DDD	53-19-0	0 023	0 087
☐p,p'-DDD	72-54-8	0 023	0 087
☐o,p'-DDE	3424-82-6	0 031	0 087
☐p,p'-DDE	72-55-9	0 031	0 087
☐o,p'-DDT	789-02-6	0 0039	0 087
☐p,p -DDT	50-29-3	0 0039	0 087
☐Dibenzo(a,e)pyrene	192-65-4	0 061	NA
☐Dibenzo(a h)anthracene	53-70-3	0 055	8 2
☐tris-(2,3-Dibromopropyl) phosphate	126-72-7	0 11	0 10
☐1,2-Dibromo-3-Chloropropane	96-12-8	0 11	15
☐1,2-Dibromoethane (ethylene dibromide)	106-93-4	0 028	15
☐Dibromomethane	74-95-3	0 11	15
☐m-Dichlorobenzene	541-73-1	0 036	6
☐o-Dichlorobenzene	95-50-1	0 088	6
☐p-Dichlorobenzene	106-46-7	0 090	6
☐Dichlorodifluoromethane	75-71-8	0 23	7 2
☐1,1-Dichloroethane	75-34-3	0 059	6
☐1,2-Dichloroethane	107-06-2	0 21	6
☐1,1-Dichloroethylene	75-34-4	0 025	6
☐trans-1,2-Dichloroethylene	156-60-5	0 054	30
☐2,4-Dichlorophenol	120-83-2	0 044	14
☐2,6-Dichlorophenol	87-65-0	0 044	14
☐1,2-Dichloropropane	78-87-5	0 85	18
☐cis-1,3-Dichloropropylene	10061-01-5	0 036	18
☐trans-1,3-Dichloropropylene	10061-02-6	0 036	18
☐Dieldrin	60-57-1	0 017	0 13
☐Diethyl phthalate	84-66-2	0 20	28
☐p-Dimethylaminoazobenzene	60-11-7	0 13	NA
☐2,4-Dimethyl phenol	105-67-9	0 036	14
☐Dimethyl phthalate	131-11-3	0 047	28
☐Di-n-butyl phthalate	84-74-2	0 057	28
☐1,4-Dinitrobenzene	100-25-4	0 32	2 3
☐4,6-Dinitro-o-cresol	534-52-1	0 28	160
☐2,4-Dinitrophenol	51-28-5	0 12	160
☐2,4-Dinitrotoluene	121-14-2	0 32	140
☐2,6-Dinitrotoluene	606-20-2	0 55	28
☐Di-n-octyl phthalate	117-84-0	0 017	28
☐Di-n-propylnitrosamine	621-64-7	0 40	14
☐Diphenylamine	122-39-4	0 92	13
☐1,2-Diphenylhydrazine	122-66-7	0 087	NA
☐Diphenylnitrosamine	86-30-6	0 92	13
☐1,4-Dioxane	123-91-1	NA	170
☐p-Dimethylaminoazobenzene	60-11-7	0 13	NA
☐Disulfoton	298-04-4	0 017	6 2
☐Endosulfan I	939-98-8	0 023	0 066
☐Endosulfan II	33213-6-5	0 029	0 13
☐Endosulfan sulfate	1-31-07-8	0 029	0 13
☐Endrin	72-20-8	0 0028	0 13
☐Endrin aldehyde	7421-93-4	0 025	0 13
☐Ethyl acetate	141-78-6	0 34	33
☐Ethyl benzene	100-41-4	0 057	10
☐Ethyl ether	60-29-7	0 12	160
☐Ethyl methacrylate	97-63-2	0 14	160
☐Ethylene oxide	75-21-8	0 12	NA
☐Famphur	52-85-7	0 017	15
☐Fluoranthene	206-44-0	0 068	3 4
☐Fluorene	86-73-7	0 059	3 4
☐Heptachlor	76-44-8	0 0012	0 066
☐Heptachlor epoxide	1024-57-3	0.016	0 066
☐Hexachlorobenzene	118-74-1	0 055	10
☐Hexachlorobutadiene	87-68-3	0 055	5 6
☐Hexachlorodibenzo-furans	NA	0 000063	0 001
☐Hexachlorodibenzo-p-dioxins	NA	0 000063	0 001
☐Hexachlorocyclopentadiene	77-47-4	0 057	2 4
☐Hexachloroethane	67-72-1	0 055	30
☐Hexachloropropylene	1888-71-7	0 035	30
☐Indena (1,2,3-c,d)pyrene	193-39-5	0 0055	3 4
☐Iodomethane	74-88-4	0 19	65
☐Isobutyl alcohol	78-83-1	5 6	170
☐Isodrin	465-73-6	0 021	0 066
☐Isosafrole	120-58-1	0 081	2 6
☐Kepone	143-50-8	0 0011	0 13
☐Methacrylonitrile	126-98-7	0 24	84
☐Methanol	67-56-1	5 6	0 75 TCLP
☐Methapyrilene	91-80-5	0 081	1 5
☐Methoxychlor	72-43-5	0 25	0 18
☐3-Methylcholanthrene	56-49-5	0 0055	15
☐4,4-Methylene-bis-(2-chloroaniline)	101-14-4	0 50	30
☐Methylene chloride	75-09-2	0 089	30
☐Methyl ethyl ketone	78-93-3	0 28	36
☐Methyl isobutyl ketone	108-10-1	0 14	33
☐Methyl methacrylate	80-62-6	0 14	160
☐Methyl methansulfonate	66-27-3	0 018	NA
☐Methyl Parathion	298-00-0	0 014	4 6
☐Naphthalene	91-20-3	0 059	5 6
☐2-Naphthylamine	91-59-8	0 52	NA
☐p-Nitroaniline	100-01-6	0 028	28
☐o-Nitroaniline	88-74-4	0 27	14
☐Nitrobenzene	98-95-3	0 068	14
☐5-Nitro-o-toluidine	99-55-8	0 32	28
☐o-Nitrophenol	88-75-5	0 28	13
☐p-Nitrophenol	100-02-7	0 12	29
☐N-Nitrosodiethylamine	55-18-5	0 40	28
☐N-Nitrosodimethylamine	62-75-9	0 40	2 3
☐N-Nitroso-di-n-butylamine	924-16-3	0 40	17
☐N-Nitrosomethylethylamine	10595-95-6	0 40	2 3
☐N-Nitrosomorpholine	59-89-2	0 40	2 3
☐N-Nitrosopiperidine	100-75-4	0 013	35
☐N-Nitrosopyrrolidine	930-55-2	0 013	35
☐Parathion	56-38-2	0 014	4 6
☐Pentachlorobenzene	608-93-5	0 055	10
☐Pentachlorodibenzo-furans	NA	0 .000035	0 001
☐Pentachlorodibenzo-p-dioxins	NA	0 .000063	0 001
☐Pentachloroethane	76-01-7	0 055	6
☐Pentachloronitrobenzene	82-68-8	0 055	4 8
☐Pentachlorophenol	87-86-5	0 089	7 4
☐Phenacetin	62-44-2	0 081	16
☐Phenanthrene	85-01-8	0 059	5 6
☐Phenol	108-95-2	0 039	6 2
☐Phorate	298-02-2	0 021	4 6
☐Phthalic acid	100-21-0	0 055	28
☐Phthalic anhydride	85-44-9	0 055	28
☐Pronamide	23950-58-5	0 093	1 5
☐Propanenitrile (Ethyl cyanide)	107-12-0	0 24	360
☐Pyrene	129-00-0	0 067	8 2
☐Pyridine	110-86-1	0 014	16
☐Safrole	94-59-7	0 081	22
☐Silvex (2,4,5-TP)	93-72-1	0 72	7 9
☐2,4,5-T	93-76-5	0 72	7 9
☐1,2,4,5-Tetrachlorobenzene	95-94-3	0 055	14
☐Tetrachlorodibenzo-furans	NA	0 .000063	0 001
☐Tetrachlorodibenzo-p-dioxins	NA	0 .000063	0 0[illegible]
☐1,1,1,2-Tetrachloroethane	630-20-6	0 057	6 0
☐1 1,2,2-Tetrachloroethane	79-34-6	0 057	6 0
☐Tetrachloroethylene	127-18-4	0 056	6 0
☐2,3,4,6-Tetrachlorophenol	58-90-2	0 030	7 4
☐Toluene	108-88-3	0 080	10
☐Toxaphene	8001-35-2	0 0095	2 6
☐Tribromomethane (bromoform)	75-25-2	0 63	15
☐1,2,4-Trichlorobenzene	120-82-1	0 055	19
☐1,1,1-Trichloroethane	71-55-6	0 054	6 0
☐1,1,2-Trichloroethane	79-00-5	0 054	6 0
☐Trichloroethylene	79-01-6	0 054	6 0
☐Trichloromonofluoromethane	75-69-4	0 020	30
☐2,4,5-Trichlorophenol	95-95-4	0 18	7 4
☐2,4,6-Trichlorophenol	88-06-2	0 035	7 4
☐1,2,3-Trichloropropane	96-18-4	0 85	30
☐1,1,2-Trichloro-1,2,2-trifluoroethane	76-13-1	0 057	30
☐Vinyl chloride	75-01-4	0 27	6 0
☐Xylenes (total)	1330-20-7	0 32	30
☐Total PCBs	1336-36-3	0 1	10
☐Antimony	7440-36-0	1 9	0 07 TCLP
☐Arsenic	7440-38-2	1 4	5 0 TCLP
☐Barium	7440-39-3	1 2	21 TCLP
☐Beryllium	7440-41-7	0 82	0 02 TCLP
☐Cadmium	7440-43-9	0 69	0 2 TCLP
☐Chromium (total)	7440-47-3	2 77	0 85 TCLP
☐Cyanide (total)	57-12-5	1 2	590[4]
☐Cyanide (amenable)	57-12-5	0 86	30[4]
☐Fluoride	16964-48-8	35	NA
☐Lead	7439-92-1	0 69	0 75 TCLP
☐Mercury – NWW from Retort	7439-97-6	0 15	0 20 TCLP
☐Mercury – all others	7439-97-6	0 15	0 025 TCLP
☐Nickel	7440-02-0	3 98	13 6
☐Selenium[5]	7782-49 2	0 82	5 7
☐Silver	7440-22-4	0 43	0 11 TCLP
☐Sulfide	8496-25 8	1 4 0	NA
☐Thallium	7440-28-0	1 4	0 20 TCLP
☐Vanadium[5]	7440-62-2	4 3	1 6 TCLP
☐Zinc[5]	7440-66-6	2 61	4 3 TCLP

40 CFR 268.48 TABLE UTS – UNIVERSAL TREATMENT STANDARDS *(Continued)*

[1]CAS means Chemical Abstract Services When the waste code and/or regulated constituents are described as a combination of a chemical with its salts and/or esters, the CAS number is given for the parent compound only

[2]Concentration standards for wastewaters are expressed in mg/l are based on analysis of composite samples

[3]Except for Cyanides (Total and Amenable) the non-wastewater treatment standards expressed as a concentration were established, in part, based upon incineration in units operated in accordance with the technical requirements of 40 CFR part 264, subpart 0 or 40 CFR part 265, subpart 0, or based upon combustion in fuel substitution units operating in accordance with applicable technical requirements A facility may comply with these treatments standards according to provisions in 40 CFR 268 40(d) All concentration standards for nonwastewaters are based on analysis of grab samples

[4]Both Cyanides (Total) and Cyanides (Amenable) for non-wastewaters are to be analyzed using Method 9010 or 9012, found in "Test Methods for Evaluating Solid Waste, Physical/Chemical Methods", EPA Publication SW-846, as incorporated by reference in 40 CFR 260 11, with a sample size of 10 grams and a distillation time of one hour and 15 minutes

[5]These constituents are not "underlying hazardous constituents" in characteristic wastes, according to the definition at §268 2 (i)

[6]Between August 26, 1996, and August 26, 1997, these constituents are not "underlying hazardous constituents" as defined at §268 2 (i) of this Part.

Note: NA means not applicable

Please complete as applicable:

Wastes with organic constituents having treatment standards expressed as concentration levels based in whole or in part on the analytical detection limit alternative specified in §268.40(d).

☐ I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in 268.42 Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good-faith efforts to analyze for such constituents. I am aware there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment

---

Wastes with treatment standards expressed as concentrations in the waste extract Toxicity Characteristic Leaching Procedure (TCLP).

☐ I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268 40 without impermissible dilution of the prohibited waste I am aware there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment

---

☐ **Alternative Treatment Standard Lab Pack**

Manifest Line No. | | | | | |

☐ I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes that have not been excluded under Appendix IV to 40 CFR Part 268 and that this lab pack will be sent to a combustion facility in compliance with the alternative treatment standards for lab packs at 40 CFR 268 42(c). I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.

☐ I hereby certify under penalty of law that there are no PCBs (polychlorinated biphenyls) contained in the oil waste being manifested to Pacific Resource Recovery I also understand that a sample of the load will be retained and that the generator will be responsible for the clean-up of contaminated equipment, tanks, etc if PCBs are present in the waste.

Benzene NESHAP Control Requirement:

For Chemical Manufacturers, Petroleum Refineries, Coke By-Product Facilities and RCRA TSDFs handling wastes subject to 40 CFR 61 subpart FF ONLY

☐ This waste is a "Controlled Benzene Waste" which is subject to the notification requirements of 40 CFR 61 Subpart FF

Manifest Line No. | | | | | |

California List Wastes:

☐ Liquid hazardous wastes having a pH less than or equal to 2.0
☐ Liquid hazardous wastes containing PCBs at a concentration greater than or equal to 50 ppm
☐ Liquid hazardous wastes that contain HOCs in total concentration greater than or equal to 1000 mg/l
☐ Nonliquid hazardous wastes containing HOCs in total concentration greater than or equal to 1000 mg/kg
☐ Free (amenable to chlorination) cyanides greater than or equal to 1000 mg/l
☐ One or more of the following metals greater than or equal to the following

Arsenic and/or compounds, 500 mg/l
Cadmium and/or compounds 100 mg/l
Chromium and/or compounds 500 mg/l
Lead and/or compounds 500 mg/l
Mercury and/or compounds 20 mg/l
Nickel and/or compounds: 134 mg/l
Selenium and/or compounds 100 mg/l
Thallium and/or compounds 130 mg/l

Pacific Resource Recovery
3150 East Pico Boulevard, Los Angeles, CA 90023
Phone (800) 499-7145 Fax (213) 780-0078

ADDITIONAL RESTRICTED WASTE IDENTIFICATION/ TREATMENT STANDARDS AND CERTIFICATION FORM

SECTION III

Complete Section III if the restricted wastes (i.e., EPA Hazardous Waste Code) as listed in Section I do not meet the applicable treatment standards in 40 CFR 268.40 (Treatment Standards for Hazardous Wastes) and have not been identified as required in Section II.

EPA Hazardous Waste Code	*Subcategory (if applicable)*	*Appropriate Treatment Standard*	*Alternative Treatment Technology (Debris)*
D001	≥ 10% TOC	RORGS; CMBST; OR POLYM.	

SECTION IV

I hereby certify that all information submitted in this and all associated documents is complete and accurate to the best of my knowledge and information.

Company Name: Kik International

Authorized Signature: _____

Printed Name: _____

Date: 11/3/05

St ... California—Environmental Protection Agency
... Approved OMB No 2050-0039 (Expires 9-30-99)
ease print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD052148284	14752		

3. Generator's Name and Mailing Address	A State Manifest Document Number
Kik International 9028 DICE ROAD SANTA FE SPRINGS, CA 90670 4 Generator's Phone (562) 946-6427	24509511
	B State Generator's ID
5 Transporter 1 Company Name / 6 US EPA ID Number: Filter Recycling Services, Inc. / CAD982444481	C State Transporter's ID [Reserved]
	D Transporter's Phone (909) 873-4141
7. Transporter 2 Company Name / 8 US EPA ID Number	E State Transporter's ID [Reserved]
	F Transporter's Phone
9 Designated Facility Name and Site Address / 10 US EPA ID Number: Filter Recycling Services, Inc. 180 W. Monte Avenue Rialto, CA 92316 / CAD982444481	G State Facility's ID CAD982444481
	H Facility's Phone (909) 421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	0012	CF	012000	P	State 352 EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		DM		G	~~State 251~~ ~~EPA/Other NONE~~
c Non-RCRA hazardous waste liquid (oil/WATER)	0014	DF	010200	G	State 223 EPA/Other NONE
					State EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above	K Handling Codes for Wastes Listed Above
11a) Absorbent PROFILE # 97052325 ~~11b) paint PROFILE # 03062602~~ 11c) oil/WATER PROFILE # 03062603	a 01 b c 14 d

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
Charles Hemphill		10	18	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSHUA CLARK		10	18	05

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	Signature	Month	Day	Year
Steven Masters		10	19	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

GENERATOR

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802 · WITHIN CALIFORNIA, CALL 1-800-852-75

24509511

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD981387347	24509511		

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6826

A State Manifest Document Number 24509511

B State Generator's ID

5 Transporter 1 Company Name — **6 US EPA ID Number**
Filter Recycling Services, Inc. — CAD982414488

C State Transporter's ID [Reserved]

D Transporter's Phone (909) 873-4141

7 Transporter 2 Company Name — **8 US EPA ID Number**

E State Transporter's ID [Reserved]

F Transporter's Phone

9 Designated Facility Name and Site Address — **10 US EPA ID Number**
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
CAD982411181

G State Facility's ID

H Facility's Phone (909) 421-7012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Cl)	002	CF	012000	P	State 352 EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		DM		G	State 354 EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil/water)	001	DF	002000	G	State 352 EPA/Other NONE
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
J(a) Absorbent — PROFILE # 97052325
J(b) paint — PROFILE # 03062602
J(c) oil/water — PROFILE # 03062603

K Handling Codes for Wastes Listed Above
a | b
c | d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

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	Signature	Month	Day	Year
Charles Campbell		10	15	05

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Joshua Clark		10	12	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

24509511

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD055148427 | Manifest Document No: 13497 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 24508440
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909) 873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909) 421-2012

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 Number
a. Non-RCRA hazardous waste solid (Pads/ Oil)	0103	C	01500	P	State 352 EPA/Other NONE
b. ~~Non-RCRA hazardous waste liquid (paint)~~		DM		G	State 251 EPA/Other NONE
c. ~~Non-RCRA hazardous waste liquid (oil)~~		DM		G	State 221 EPA/Other NONE
					State EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
11b) paint — PROFILE # 030626O2
11c) oil — PROFILE # 030626O3

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
SEE ABOVE PROFILE #

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
Charles Hemphill		09	01	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Joshua Clark		09	01	05

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	Signature	Month	Day	Year
Steven Masters		09	06	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

24508440

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No | 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
RK International
9078 PICO ROAD
SANTA FE SPRINGS, CA 9[illegible]
4 Generator's Phone (562) 946-[illegible]

A State Manifest Document Number: 24508440
B State Generator's ID:

5 Transporter 1 Company Name | 6 US EPA ID Number
Filter Recycling Services, Inc. | CAD 9 8 1 4 4 5 1

C State Transporter's ID [Reserved]
D Transporter's Phone: (909) 873 4131

7 Transporter 2 Company Name | 8 US EPA ID Number

E State Transporter's ID [Reserved]
F Transporter's Phone:

9 Designated Facility Name and Site Address | 10 US EPA ID Number
Filter Recycling Services, Inc.
190 N. Monte Avenue
Blaine, CA 92316 | CAD 9 8 1 4 4 4 9 1

G State Facility's ID:
H Facility's Phone: (909) 421-2012

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 Number
a. Non-RCRA hazardous waste solid (lab oil)	001	CF	01500	P	State: 352 EPA/Other: NONE
b. ~~Non-RCRA hazardous waste liquid (paint~~		DM		7	State: 251 EPA/Other: NONE
c. ~~Non-RCRA hazardous waste liquid (oil~~		DM		7	State: 251 EPA/Other: NONE
d					State: EPA/Other:

J Additional Descriptions for Materials Listed Above
lia) Absorbent — PROFILE # 97052425
lib) paint — PROFILE # 03062602
llc) oil — PROFILE # 03062603

K Handling Codes for Wastes Listed Above
a | b
c | d

15 Special Handling Instructions and Additional Information
[illegible] Surface Protective Clothing
24 hour emergency contact phone # (909) 421-2012
SEE ABOVE PROFILE #

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	Signature	Month	Day	Year
[illegible]	[illegible]	01	05	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	01	05	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

24508440

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

LIGHTING RESOURCES, INC.
805 E. Francis Street
Ontario, California 91761
(909) 923-7252 • Fax (909) 923-7510
Toll-Free (888) 923-7252

CERTIFICATE OF RECYCLING

August 10, 2005

Lighting Resources, Inc. certifies that the materials listed have been received from,
K.I.K. Int'L Southern CA. Division

Title transfers to Lighting Resources, Inc. Recycling Center in Ontario, upon acceptance of material. The lamps were processed according to the terms of Lighting Resources, Inc. in Ontario, California, CA EPA #CAR000156125.Your Batteries will be waste reduced and processed under 40cfr 273 Universal Waste Rule. They will be sent to the recycler of our choice for final recycling. Your Non-PCB Transformers & Capacitors have been received in our Ontario, California facility and will be processed, de-manufactured and recycled under our CA EPA Permit ID #CAL000827758 and in accordance with all federal, state and local laws.

Bill of Lading:
#8040

Inventory:

F-40 Lamps	Qty.	40
HID Lamps	Qty.	7
F-96 Lamps	Qty.	15
8 lbs. Alkaline Batteries		
5 lbs. Ni-Cad Batteries		
30 lbs. Non-PCB Transformers		
3 lbs Non-PCB Capacitors		

Generated By:

Same

Thank you for helping to protect our environment.

Certified By:

Erica Magana, Accounts Receivable

STRAIGHT BILL OF LADING

ORIGINAL - NOT NEGOTIABLE

NO. 50

Lighting Resources, Inc. (Name of Carrier) 8/3/05 Date

TO: Consignee **LIGHTING RESOURCES, INC.**

☒ 805 E. Francis St Ontario, CA 91761 909-923-7252	☐ 498 Park 800 Dr. Greenwood, IN 46143 317-888-3889	☐ 1522 E. Victory St., #4 Phoenix, AZ 85040 602-276-4278
☐ 5481 Jetport Industrial Blvd. Tampa, FL 33624 813-806-1888	☐ _____	

Routing Instructions / Comments

P.O.# 31029

SHIPPER (FROM) NAME	KNL Technical - Seal	BILL TO	NAME		
STREET ADDRESS (NOT A P.O. BOX)	6629 Hoo Road		ADDRESS		
CITY	Indianapolis	STATE IN	ZIP 46278	CITY	STATE	ZIP

No. Shipping Units	* HM	Kind of Packaging, Description of Articles, Special Marks and Exceptions	Weight (Subject to Correction)	Class Or Rate	Check Column	Charges
		USED FLUORESCENT LAMPS FOR RECYCLING				
15		F96				
40		F40				
7		HIDS				
1		Skid Mixed Ballasts, NO MERCURY, Tears Only				

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading The property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment, and shall be subject to all the terms and conditions of the United States Carriage of Goods By Sea Act of 1936 if it is a water shipment

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

THIS IS TO CERTIFY THAT THE ABOVE-NAMED MATERIALS 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

CARRIER	Lighting Resources, Inc	NO OF PIECES	
DRIVER'S SIGNATURE		DATE	8 B P.M.
SHIPPER'S SIGNATURE		PRINT LAST NAME	EMPLOYEE NUMBER	TIME

Straight Bill of Lading - Short Form

MEMORANDUM - NOT NEGOTIABLE

*MARK WITH "X" TO DESIGNATE HAZARDOUS MATERIAL AS DEFINED IN TITLE 49 OF THE CODE OF FEDERAL REGULATIONS.

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051148278412 — 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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 24510383
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc. — 6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909) 873-4141

7 Transporter 2 Company Name — 8 US EPA ID Number
E State Transporter's ID [Reserved]:
F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
190 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909) 421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	01500	P	State 352 / EPA/Other NONE
b ~~Non-RCRA hazardous waste solid (oil paint)~~		~~B M~~		~~G~~	State ~~291~~ / EPA/Other NONE
~~Non-RCRA hazardous waste liquid (oil)~~		~~D M~~		G	State ~~221~~ / EPA/Other ~~NONE~~
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J. Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
~~11b) paint~~ — ~~PROFILE # 03062602~~
~~11c) oil~~ — ~~PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
Profile on file [redacted]

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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: Tom Rissmiller — Signature: [signature] — Month 07 Day 21 Year 15

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: David Ayala Beltran — Signature: [signature] — Month 07 Day 21 Year 15

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

TRANSPORTER

19 Discrepancy Indication Space

20 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: Steven Masters — Signature: [signature] — Month 07 Day 22 Year 15

FACILITY

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

24510383

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of	Information in the shaded areas is not required by Federal law
CAD982144861			

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
Generator's Phone (562) 946-6127

4 State Manifest Document Number: 24510383
B State Generator's ID:
C State Transporter's ID [Reserved]:
D Transporter's Phone:
E State Transporter's ID [Reserved]:
F Transporter's Phone:
G State Facility's ID:
H. Facility's Phone: (909) 421-2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982144861
7 Transporter 2 Company Name:
8 US EPA ID Number:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316

10. US EPA ID Number: CAD982144861

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	01500	P	State 352 EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (print)~~		~~SM~~		~~G~~	State 291 EPA/Other ~~NONE~~
c ~~Non-RCRA hazardous waste liquid (oil)~~		~~DM~~		~~G~~	State 221 EPA/Other ~~NONE~~
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
J1a) Absorbent — PROFILE # 97052325
~~J1b) print~~ — ~~PROFILE # 03062606~~
~~J1c) oil~~ — PROFILE # 03062603

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

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # : 909-721-2039
Profile on file
[redacted]

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	Signature	Month	Day	Year
[redacted]	[redacted]	07	21	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
David Ayala Sellow	David Ayala	07	21	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

24510383

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
For Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

24507465

IN CASE OF 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: CAD051482784 | Manifest Document No: 07465 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
KIK International SoCal, Inc.
9028 Dice Road
Santa Fe Springs, Ca. 90670

4 Generator's Phone 562-946-6427

A State Manifest Document Number: 24507465

B State Generator's ID:

5 Transporter 1 Company Name: Phibro-Tech, Inc.

6 US EPA ID Number: CAD008488025

C State Transporter's ID [Reserved]: NA

D Transporter's Phone: 562-698-8036

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Phibro-Tech, INc.
8851 Dice Road
Santa Fe Springs, Ca. 90670

10 US EPA ID Number: CAD008488025

G State Facility's ID: CAD008488025

H Facility's Phone: 562-698-6036

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 Number
a. Non RCRA Hazardous Waste Liquid (water, chlorides)	001	TT	05500	G	State 135 / EPA/Other n/a
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J Additional Descriptions for Materials Listed Above
a. ERS# 20050195L water, chlorides
MiscA

K Handling Codes for Wastes Listed Above
a. 15 b. c. d.

15 Special Handling Instructions and Additional Information
a. ERG#171 wear protective gloves, goggles, and clothing.
emergency phone number 562-946-6427

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	Signature	Month	Day	Year
ROBERT D. BROWN	Robert D. Brown	07	07	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jim Ferguson	Jim Ferguson	07	07	05

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	Signature	Month	Day	Year
Ramiro Martinez		07	07	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1	Information in the shaded areas is not required by Federal law
CAD051482784		1 of 1	

GENERATOR

3 Generator's Name and Mailing Address
KIK International SoCal, Inc.
9028 Dice Road
Santa Fe Springs, Ca. 90670

4 Generator's Phone ( ) 562-946-6427

A State Manifest Document Number: 24507465

B State Generator's ID:

5 Transporter 1 Company Name: Phibro-Tech, Inc.

6 US EPA ID Number: CAD008488025

C State Transporter's ID [Reserved]:

D Transporter's Phone: 562-698-8036

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Phibro-Tech, INc.
8851 Dice Road
Santa Fe Springs, Ca. 90670

10 US EPA ID Number: CAD008488025

G State Facility's ID: CAD008488025

H Facility's Phone: 562-698-8036

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 Number
a. Non RCRA Hazardous Waste Liquid (water, chlorides)	001	TT	05500	G	State: 135 / EPA/Other: n/a
b.					State: / EPA/Other:
c.					State: / EPA/Other:
d.					State: / EPA/Other:

J Additional Descriptions for Materials Listed Above
a. ERS# water, chlorides

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

15 Special Handling Instructions and Additional Information
a. ERG# 171 wear protective gloves, goggles, and clothing.
emergency phone number 562-946-6427

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	Signature	Month	Day	Year
ROBERT D. BROWN	Robert D. Brown	07	07	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jim Ferguson	Jim Ferguson	07	07	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

24507465

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784 | Manifest Document No: 07464 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
KIK International SoCal,Inc.
9028 Dice Road
Santa Fe Springs,Ca. 90670

4 Generator's Phone ( ) 562-946-6427

A State Manifest Document Number: 24507464

B State Generator's ID:

5 Transporter 1 Company Name: Phibro-Tech,Inc.

6 US EPA ID Number: CAD008488025

C State Transporter's ID [Reserved]: NA

D Transporter's Phone: 562-698-8036

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Phibro-Tech,INc.
8851 Dice Road
Santa Fe Springs,Ca. 90670

10 US EPA ID Number: CAD008488025

G State Facility's ID: CAD008488025

H Facility's Phone: 562-698-8036

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 Number
a Non RCRA Hazardous Waste Liquid (water,chlorides)	001	TT	05000	G	State 135 / EPA/Other n/a
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
a. ERS# 20050195L water,chlorides
M,S,L

K Handling Codes for Wastes Listed Above
a 15 | b | c | d

15 Special Handling Instructions and Additional Information
a. ERG#171 wear protective gloves,goggles,and clothing.
emergency phone number 562-946-6427

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 interpational 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	Signature	Month	Day	Year
ROBERT D. BROWN	Robert D Brown	07	07	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE LUIS RODRIGUEZ		07	07	05

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	Signature	Month	Day	Year
Ramiro Martinez		07	07	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

24507464

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1	Information in the shaded areas is not required by Federal law
CAD051482784		1 of 1	

GENERATOR

3 Generator's Name and Mailing Address
MK International SoCal, Inc.
9028 Dice Road
Santa Fe Springs, Ca. 90670

4 Generator's Phone ( ) 562-946-6427

A State Manifest Document Number: 24507464

B State Generator's ID:

5 Transporter 1 Company Name: Phibro-Tech, Inc.

6 US EPA ID Number: CAD008488025

C State Transporter's ID [Reserved]:

D Transporter's Phone: 562-698-8036

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9. Designated Facility Name and Site Address
Phibro-Tech, Inc.
8851 Dice Road
Santa Fe Springs, Ca. 90670

10 US EPA ID Number: CAD008488025

G State Facility's ID: CAD008488025

H Facility's Phone: 562-698-8036

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 Number
a. Non RCRA Hazardous Waste Liquid (water, chlorides)	001	TT	05000	G	State 135 / EPA/Other n/a
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
a. ERS# water, chlorides

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

15 Special Handling Instructions and Additional Information
a. ERG#171 wear protective gloves, goggles, and clothing.
emergency phone number 562-946-6427

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	Signature	Month	Day	Year
ROBERT D. BROWN	Robert D Brown	07	07	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE LUIS RODRIGUEZ		07	07	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

24507464

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051418278408820 | 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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 24404671
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909) 873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909) 421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C F	01500	P	State 352 EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		D M		G	State 251 EPA/Other NONE
c ~~Non-RCRA hazardous waste liquid (oil)~~		D M		G	State 221 EPA/Other NONE
d					State EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
~~11b) paint~~ — ~~PROFILE # 03062602~~
~~11c) oil~~ — ~~PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
Bill To; Circle Green

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
ROBERT D. BROWN		05	06	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSHUA CLARK		05	06	05

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	Signature	Month	Day	Year
Steven Masters		05	09	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

GENERATOR

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

24404671

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD 0 3 1 4 3 2 7 9 4 0 0 8 2 1
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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-0411

A State Manifest Document Number: 24404671
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Svc. Inc.
6 US EPA ID Number: CAD 9 8 2 4 4 4 4 5 1
C State Transporter's ID [Reserved]
D Transporter's Phone: (309)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
160 W. Monte Avenue
Pialo, CA 92316
10 US EPA ID Number: CAD 9 8 2 4 4 4 4 3 1
G State Facility's ID:
H Facility's Phone: (309)421 2012

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 Number
a Non-RCRA hazardous waste solid (Rags/ Oil)	01	C F	01500	P	State CA2 EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid paint~~		F M		~~P~~	~~State~~ ~~EPA/Other NONE~~
c ~~Non RCRA hazardous waste liquid oil~~		F M		~~P~~	~~State~~ ~~EPA/Other NONE~~
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
(1a) Absorbent PROFILE # 97052325
(1b) Paint PROFILE # 97062502
(1c) Oil PROFILE # 03062603

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

15 Special Handling Instructions and Additional Information
Wear Suitable protective clothing
24 hour emergency contact phone # 1-909-721-3038

Bill To: Circle Green

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	Signature	Month	Day	Year
Robert Bradshaw		05	16	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Chris Clark		05	16	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

24404671

GENERATOR

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

SERVICE ORDER

SAN DIEGO OFFICE
1-800-748-5744

NORTHERN OFFICE
800-7-ASBURY

SERVICE ORDER NO.
341886

ASBURY ENVIRONMENTAL SERVICES
2100 NORTH ALAMEDA STREET ☐ COMPTON, CALIFORNIA 90222
(310) 886-1810 ☐ FAX (310) 898-1608
CAD028277036

SHIPPED TO: [illegible] 9803 DICE RD. SANTA FE SPRINGS, CA 90670 (562) 298-2920

[illegible] CIRCLE GREEN ENVIRONMENTAL P.O. BOX [illegible] LOS ANGELES, CA 90021 (323) 728-4900

CUSTOMER	PURCHASE ORDER	SALESMAN	CONTACT	
[illegible]			[illegible]	[illegible]
DATE REQUIRED	**SHIPPED VIA**	**DATE ENTERED**	**CUSTOMER EPA ID NUMBER**	**HALIDES P.P.M.:**
[illegible]	[illegible]	[illegible]	[illegible]	0.220

PRODUCT NO.	DESCRIPTION	U/M	QUANTITY ORDERED	QUANTITY SHIPPED	QUANTITY B/O	CUSTOMER COMMENTS
NO	WASTE OIL PER GALLON					
WOSC	WASTE OIL SERVICE CHARGE					
PICK UP TIRES NO LATER THEN WED CALL/ DAI						
[illegible] PASSED						
[illegible]						[illegible] PEED DRIVER
******** PLEASE NOTE ********						
ASBURY NOW SELLS NEW AND REBUILT [illegible]						
CALL FOR DETAILS						

WASTE DISPOSAL INFORMATION

- ☒ NON-RCRA HAZARDOUS WASTE, LIQUID (USED OIL/MIXED OILS) STATE CODE _____ *NO PLACARDS REQUIRED*
- ☐ NON-RCRA HAZARDOUS WASTE, LIQUID STATE CODE _____ ETHYLENE GLYCOL SOLUTIONS *NO PLACARDS REQUIRED*
- ☐ NON-HAZ DRAINED USED OIL FILTERS FACILITY _____
- ☐ OTHER: _____

MANIFEST NO. 011911759

TRUCK NO. 110

GALLONS: 200

DRUMS. _____

DRUM SIZE: _____

PAYMENT INFORMATION

AMOUNT (If any) _____

CHECK NUMBER _____

P.O. NUMBER _____

CASH RECEIVED _____

- ☒ DESIGNATED TSDF. DeMenno/Kerdoon, 2000 N. Alameda Street, Compton, CA 90222, (310) 537-7100, CAT080013352
- ☐ DESIGNATED TSDF: Advanced Environmental, Inc , 13579 Whittram Ave., Fontana, CA 92335, (909) 356-0245, CAT080025711
- ☐ ALTERNATE TSDF: _____

NEXT SERVICE DATE _____

NOTES TO DRIVER

[illegible] WILL BE CHARGED AS FOLLOWS PER GAL 100+ GAL PURCHASED GAL P/U @ NO CHARGE [illegible] PURCHASED GAL P/U @ NO CHARGE [illegible] WILL BE CHARGED ACCORDINGLY

I HEREBY CERTIFY THAT I HAVE NOT MIXED THIS WASTE WITH ANY OTHER WASTE, THAT THE TOTAL HALIDES ARE LESS THAN 1000 P.P.M ; AND THAT THE WASTE DOES NOT CONTAIN ANY P.C.B.'S
I FURTHER AGREE TO ACCEPT THE ADDITIONAL CHARGES FOR LEGAL DISPOSAL IF THIS WASTE IS OVER 1000 P.P.M TOTAL HALIDES, OR CONTAINS ANY P.C.B.'S

DELIVERED BY _____ DATE _____

RECEIVED BY [illegible] DATE 11/7/05

This is to certify that the above named articles 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.

PRINT NAME [illegible]

SIGNATURE _____ DATE / /

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

99613768

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RES SE CENTER 1-800-424-8802: WITHIN CALIFORNIA, CALL 1-800-852-755

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051148278 | Manifest Document No: 137 6 B | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address: KIK INTERNATIONAL 9028 Dice Rd SANTA Fe Springs, Ca. 90670

4 Generator's Phone: 562 946 6427 (800 248-2420)

A State Manifest Document Number: 99613768

B State Generator's ID:

C State Transporter's ID [Reserved]:

5 Transporter 1 Company Name: ASBURY ENVIRONMENTAL SERVICES

6 US EPA ID Number: CAD028277035

D Transporter's Phone: (310)886-3400

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address: DEMENNO KERDOON
2000 NORTH ALAMEDA STREET, COMPTON, CALIFORNIA 90222

10 US EPA ID Number: CAT080013352

G State Facility's ID: CAT080013352

H Facility's Phone: (310)537-7100

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 Number
a RQ, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, NOS, (ETHYLENE GLYCOL & WATER), 9, UN3082, PGIII	001	TT	0350	G	State: 133 / EPA/Other: NONE
b					State: / EPA/Other:
c					State: / EPA/Other:
d					State: / EPA/Other:

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE DeMENNO/KERDOON FACILITY IN COMPTON, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAT080013352

J Additional Descriptions for Materials Listed Above:
ETHYLENE GLYCOL 20%-40%
WATER 79%-55%
MOTOR OIL 01%-05%

K Handling Codes for Wastes Listed Above: KIK INTERNATIONAL
c
d

15 Special Handling Instructions and Additional Information: PO# AC80053542 ES #2732 - 000033
GLOVES & GOGGLES
PJT# 4902A10-346068
EMERGENCY CONTACT: MEL HARPER (310) 466-5810
NAERG# 171
"No Placards Required"
96 13768

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	Signature	Month	Day	Year
Jim Rissman	Jim Rissman	03	07	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Marcellus T. Cale	Marcell T Cale	03	07	05

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	Signature	Month	Day	Year
OMAR ECHEGARAY		03	07	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

Certificate of Treatment/Recycling

ISSUED TO

KIK INTERNATIONAL

FOR

MANIFEST NUMBER 99613768 DATE RECEIVED 3/7/2005

The aqueous waste received on the above manifest will be treated to standards mandated by the FEDERAL CLEAN WATER ACT and to effluent requirements established by the Sanitation Districts of Los Angeles County. Waste treatment and recycling is performed under permits granted to DeMENNO/KERDOON, a California Corporation, by the California Department of Toxic Control (DTSC), in coordination with the Environmental Protection Agency, in accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations including but not limited to waste discharge requirements established by the Sanitation Districts of Los Angeles County.

When the above described waste material is accepted by DeMENNO/KERDOON and treated/recycled and the aqueous phase discharged for further treatment by the Sanitation Districts, the certificate holder's responsibility for the waste material is eliminated under both RCRA and Proposition 65. Upon request, DeMENNO/KERDOON will issue this certificate that all waste material has been handled in accordance with applicable permits and the certificate holder's liability has been terminated.

DeMENNO/KERDOON
"Compliance Through Recycling"

By: _____ *Date:* 3/23/2005

Cyrus Pourhassanian
Laboratory Manager

2000 North Alameda Street ❑ Compton ❑ California ❑ 90222
Telephone (310) 537-7100 ❑ Facsimile (310) 639-2946

© 2004 GOES 441
All Rights Reserved

LITHO IN U.S.A.

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

99613768

IN CASE OF 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: CAD051482784 | Manifest Document No: 137 6 B | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address: KIK INTERNATIONAL, 9028 Dice Rd, Santa Fe Springs, Ca. 90670
4. Generator's Phone: 562 946 6427

A State Manifest Document Number: 99613768
B State Generator's ID:

5 Transporter 1 Company Name: ASBURY ENVIRONMENTAL SERVICES
6 US EPA ID Number: CAD028277036
C State Transporter's ID [Reserved]:
D Transporter's Phone: (310) 886-3400

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

9 Designated Facility Name and Site Address: DEMENNO KERDOON, 2000 NORTH ALAMEDA STREET, COMPTON, CALIFORNIA 90222
10 US EPA ID Number: CAT080013352
G State Facility's ID: CAT080013352
H. Facility's Phone: (310) 537-7100

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 Number
a RQ, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, NOS, (ETHYLENE GLYCOL & WATER), 9, UN3082, PGIII	001	TT	0350	G	State: 133 / EPA/Other: NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above:
ETHYLENE GLYCOL 20%-40%
WATER 75%-55%
MOTOR OIL 01%-05%

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

15. Special Handling Instructions and Additional Information: PO# AC80053542
PJ T# 4900ZA10-316068
GLOVES & GOGGLES
NAERG# 171
"No Placards Required"
000033
EMERGENCY CONTACT: MEL HARPER (310) 466-5010

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	Signature	Month	Day	Year
Jim Fitzgerald		08	07	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Marcellus T. Cole	Marcell T. Cole	08	07	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC-8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

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

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. . . . . | Manifest Document No. 9329 | 2 Page 1 of 1

3. Generator's Name and Mailing Address
KIK INTERNATIONAL
9028 DICE RD. SANTA FE SPRINGS, CA 90670
4. Generator's Phone (562) 946-6427

5. Transporter 1 Company Name	6. US EPA ID Number	A Transporter's Phone
CIRCLE GREEN ENVIRONMENTAL	. . . . .	(626)398-4400
7 Transporter 2 Company Name	8 US EPA ID Number	B Transporter's Phone
K-VAC ENVIRONMENTAL	. . . . .	(909)476-2308
9. Designated Facility Name and Site Address K-PURE WATERWORKS 8910 ROCHESTER AVE. RANCHO CUCAMONGA, CA 91730	10. US EPA ID Number	C. Facility's Phone (909)476-4492

GENERATOR

11. Waste Shipping Name and Description	12. Containers No	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, LIQUID	001	TT	00650	G
b.				
c				
d.				

D Additional Descriptions for Materials Listed Above
11.A WASTEWATER

E Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIUONS

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
Santiago C. Hernandez			4	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dan Dennis IV		03	04	05

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 waste materials covered by this manifest except as noted in Item 19

Printed/Typed Name	Signature	Month	Day	Year

PURPLE COPY

GENERATOR'S COPY

BLUE COPY

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD059148279405 4 1 — 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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 24200806
B. State Generator's ID:

5 Transporter 1 Company Name — 6 US EPA ID Number
Filter Recycling Services, Inc. — CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone (909) 873-1141

7 Transporter 2 Company Name — 8 US EPA ID Number
E State Transporter's ID [Reserved]
F Transporter's Phone

9 Designated Facility Name and Site Address — 10 US EPA ID Number
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316 — CAD982444481
G. State Facility's ID: CAD982444481
H Facility's Phone (909) 421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	01000	P	State 352 / EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~ NON RCRA HAZARDOUS WASTE LIQUID (PAINT)	002	DM	001006	G	State 291 / EPA/Other NONE
c ~~Non-RCRA hazardous waste liquid (oil)~~ FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.		~~DM~~		G	State / EPA/Other NONE
					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
~~11b) paint — PROFILE # 03062602~~
~~11c) oil — PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
PROFILES ON FILE

One or more of the materials listed in section 11 of this manifest may be recycled as alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
x Chester Memphill	x	03	02	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSHUA CLARK		03	02	05

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space
11b) rejected approx 5 lbs of non conforming material, sent to an alternate TSDF on manifest # 21201119

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

Printed/Typed Name	Signature	Month	Day	Year
Steven Masters		03	03	05

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700-22

GENERATOR

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

24200806

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD059493840 — 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
bik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 24200806
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444581
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
190 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444451
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (rags/ oil)	002	CF	01000	P	State CA EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~ NON RCRA HAZARDOUS WASTE LIQUID (PAINT)	002	~~CF~~	001006	~~P~~	State CA EPA/Other NONE
c ~~Non-RCRA hazardous waste liquid (oil)~~		~~CF~~		G	State CA EPA/Other NONE
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
11a) absorbent PROFILE # 97052325
~~11b) paint PROFILE # 03062602~~
~~11c) oil PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
PROFILES ON FILE

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	Signature	Month	Day	Year
X Pamela Hemphill	X	05	02	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jason CLARK		05	02	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

24200806

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

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

-|a|n|0|5|1|4|a|2|7|9|4|0|4|0|4|0|

3. Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4. Generator's Phone (562) 946-6427

A. State Manifest Document Number: 24204828
B. State Generator's ID:

5. Transporter 1 Company Name | 6. US EPA ID Number
Filter Recycling Services, Inc. | C|A|D|9|8|2|4|4|4|4|8|1|

C. State Transporter's ID (Reserved):
D. Transporter's Phone: (909) 873-4141

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

E. State Transporter's ID (Reserved):
F. Transporter's Phone:

9. Designated Facility Name and Site Address | 10. US EPA ID Number
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316 | C|A|D|9|8|2|4|4|4|4|8|1|

G. State Facility's ID: C|A|9|0|F|2|4|4|4|4|8|1|
H. Facility's Phone: (909) 421-2012

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 Number
a. Non-RCRA hazardous waste solid (Pads/ Oil)	002	C F	1500 ~~3000~~	P	State 352 / EPA/Other NONE
b. ~~Non-RCRA hazardous waste liquid (paint)~~		~~D M~~		~~G~~	~~State 291~~ / EPA/Other NONE
c. ~~Non-RCRA hazardous waste liquid (oil)~~		~~D M~~		~~G~~	~~State 221~~ / EPA/Other NONE
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) Absorbent PROFILE # 97052325
~~11b) paint~~ ~~PROFILE # 03062602~~
~~11c) oil~~ ~~PROFILE # 03062603~~

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

15. Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

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	Signature	Month	Day	Year
Santiago E. Hernandez		0 1	1 4	0 5

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dave Marshall		0 1	1 4	0 5

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	Signature	Month	Day	Year
Steven Masters		0 1	1 7	0 5

DO NOT WRITE BELOW THIS LINE.

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

24204828

DTSC 8022A (1/99)
EPA 8700—22

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

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

24204828

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RES SE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-755

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD059622730 | Manifest Document No: 04 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9022 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6221

A State Manifest Document Number: 24204828
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc. | 6 US EPA ID Number: CAD982414138
C State Transporter's ID [Reserved.]
D Transporter's Phone: (408) 453-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Perris, CA 92316
10 US EPA ID Number: CAD982414138
G State Facility's ID
H Facility's Phone: (909) 421-9012

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 Number
a Non-RCRA hazardous waste solid (Trace Oil,	002	F	1500 1500	P	State 352 EPA/Other NONE
b ~~Non-hazardous waste liquid (Water)~~					State 221 EPA/Other NONE
c ~~Non-hazardous waste liquid (Oil)~~					State 221 EPA/Other NONE
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
(1a) Absorbent
~~(2a) paint~~
~~(3a) oil~~
PROFILE # 37050325
~~PROFILE # 03062602~~
~~PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
In case of emergency contact phone # 1-909-421-9012
Profile on file

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	Signature	Month	Day	Year
[illegible]		01	13	05

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Alan Murdock		01	14	05

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

PHIBRO-TECH. INC
ERS DIVISION
8851 DICE ROAD
SANTA FE SPRINGS, CA 90670
562-698-8036

D

July 15, 2005

Attn: EHS MANAGER
KIK INTERNATIONAL SOCAL, INC
9028 DICE RD
SANTA FE SPRINGS, CA 90670

Dear EHS MANAGER:

Phibro-Tech, Inc. is pleased to inform you that your use/re-use material has been accepted and an ERS Identification Number has been assigned to your material, described as AMMONIUM CHLORIDE WATER.

The ERS number expires 12 months from 7/12/2005 . This acceptance is based on the representative sample and ERS material profile information provided by you. A copy of the approved Material Profile form is returned for your records. Please note any changes which may have been made to the form and include that information on the bill of lading and shipping labels, as neccessary. If you have not submitted your sample profile fee, please submit payment immediately, so that we will be able to process your material. The volume and container type, stated on the ERS Material Profile, is as follows:

ERS Identification Number: X20050195L

Container Type: TANK TRUCKS

Annual Quantity of Shipments: 146941 pounds

Frequency of Shipments: 12

Please let us know if any of the above has changed or are incorrect. Because Phibro-Tech uses your material in manufacturing of high quality products, quantity and container type are important to us in scheduling shipping, unloading and production campaigns, as well as assisting us in minimizing costs. Please keep us advised of any major changes.

The ERS Identification Number must be shown on all drums. In order to assist you better, please write the ERS Identification Number on the Bill of Lading.

X20050195L
20050457

The above mentioned material shipment is accepted for use at the below listed facility, wholly owned by Phibro-Tech, Inc. Phibro-Tech is a chemical manufacturer which will use the materials you provided as an ingredient in or effective substitute for commercial feedstock in its manufacturing process. Under 40 CFR 261.2 (e) 1 (i) and/or (ii) this would make your material exempt from being a Solid Waste under RCRA. Also, be advised that Phibro-Tech has and utilizes the neccessary equipment to use your material in its manufacturing process. Significant variation of the actual shipment from the original profile sample can seriously affect the use of your material. If a variation renders the material unsuitable for our manufacturing processes, it may result in rejection of the material and additional expense to you. Therefore, we ask that you contact us prior to shipment regarding any concerns you may have in this matter. This should allow resolution with minimum inconvenience and expense.

First Use/Reuse Site

TSDF PHIBRO-TECH, INC.
Address 8851 DICE ROAD
SANTA FE SPRINGS, CA 90670
Phone 562-698-8036
Contact Alonso Alatorre
EPA ID CAD008488025
EPAHW#s

Please contact the Phibro-Tech Environmental Manager for details and further information prior to the first shipment, or at any time if you require assistance.

Please notify the Order Desk at the above facility for an unloading appointment prior to the expected arrival of the shipment. A minimum three days notice is requested. Our loading dock hours are 7:30AM to 3AM, Monday through Friday.

Deliveries at other times require prior approval by the plant management. An unloading team (Technician, Operator, Supervisor) must be present for unloading. Therefore, a $500.00 minimum fee for up to four hours unloading time to cover overtime is applicable.

Thank you for your interest in PHIBRO-TECH, INC products and environmental services. We look forward to serving your needs in the future.

Very truly yours,

PHIBRO-TECH INC
ERS DIVISION

cc: Salesman STEVE ANSLEY

Distributor PHIBRO TECH, INC.
8851 DICE RD.
SANTA FE SPRINGS, CA 90670

X20050195L
20050457

PHIBRO-TECH. INC
ERS DIVISION
8851 DICE ROAD
SANTA FE SPRINGS, CA 90670
562-698-8036

D

July 15, 2005

CUSTOMER SERVICE
PHIBRO TECH, INC.
8851 DICE RD.
SANTA FE SPRINGS, CA 90670

Dear Valued Customer:

Please note that you are required by law to attach a "Notification of Land Disposal Restrictions" to your manifest. As of August 8, 1990, EPA regulations require that a detailed notification be made to the receiving treatment, storage, or disposal facility (see 40CFR 268.7). The notification must list the hazardous waste codes, applicable treatment standards, whether the waste is a wastewater (WW) or non-wastewater (non-WW) waste and other information. Phibro-Tech, Inc. has revised its notification form to comply with the current regulatory requirements. Your generator identification information, date, and manifest number should be completed. The proper notification boxes should be checked and the form signed at the bottom. Specific example of common waste sent to Phibro-Tech include:

WASTE	EPA WASTE CODE
Alkaline Etchant	D002; Alkaline
Cupric Chloride	D002, Acid
Ferric Chloride	D002, Acid

In addition, your waste may contain other listed hazardous constituents. The corresponding box should also be checked, e.g., D004, D007, D008, and either the wastewater (WW) or non-wastewater (non-WW) boxes. Please contact us if you have any questions.

Sincerely,

Alanso Alatorre
Plant Manager

NOTIFICATION OF LAND DISPOSAL RESTRICTIONS

lease complete form, retain a copy for five (5) years with generator copy of manifest, and attach original to manifest for this shipment.

TO: PHIBRO-TECH, INC.
8851 DICE ROAD
SANTA FE SPRINGS, CA 90670

GENERATOR _____ MANIFEST DOC. NO _____

EPA ID NO. _____ DATE SHIPPED _____

ERS ID NO. FOR LINE 11a _____ 11b _____ 11c _____ 11d _____

EPA WASTE NO(S)		DESCRIPTION/SUBCATAGORY	WW*	NONWW	DATE SUBJ. TO PROHIBITIONS
D002	{ }	Corrosive Characteristic wastes Managed in CWA, CWA-equivalent or Class | SDWA systems	{ }	{ }	Aug. 8, 1990
D004	{ }	Arsenic	{ }	{ }	Aug. 8, 1990
D005	{ }	Barium	{ }	{ }	Aug. 8, 1990
D006	{ }	Cadmium	{ }	{ }	Aug. 8, 1990
J07	{ }	Chromium	{ }	{ }	Aug. 8, 1990
D008	{ }	Lead	{ }	{ }	Aug. 8, 1990
D010	{ }	Selenium	{ }	{ }	Aug. 8, 1990
D011	{ }	Silver	{ }	{ }	Aug. 8, 1990
F006	{ }	Wastewater treatment sludges from electroplating operations	{ }	{ }	Aug. 8, 1990
____	{ }		{ }	{ }	_____

Waste analysis data for this restricted waste are:

_____ Attached _____ Not Attached (Notice based on knowledge of the waste)

SIGNATURE _____ TITLE _____

*WW: Wastewater-waste containing less than 1% filterable solid and less than 1% organics by weight.

NONWW: Non-wastewater

PHIBRO-TECH. INC
ERS DIVISION
8851 DICE ROAD
SANTA FE SPRINGS, CA 90670
562-698-8036

D

E R S P R E - S H I P M E N T C H E C K L I S T

ERS APPROVAL NUMBER

This is your waste stream profile number. You must have a current number on file with us for each waste stream in order for us to accept that particular waste. The numbers do expire every 12 months and must be reissued. Check your date of issue on your notification. If in doubt, call us at (562)698-8036 and inquire through the order desk.

The ERS number must be reissued whenever you change either location, name, process, or generator USEPA ID number. The ERS Approval number must appear on the following documents for each waste type shipped:

a. Hazardous Waste Manifest - Line 15 of the manifest
b. Hazardous Waste Label - on each container's label

HAZARDOUS WASTE LABEL

These labels must be on the side of each container using indelible ink and must contain the following information:

a. "California" Hazardous Waste Labels must be used
b. ERS Approval Number for the contents of the container
c. State Manifest Document Number (preprinted on manifests)
d. The name, address and USEPA ID Number of the generator
e. Information regarding contents, composition and hazards of the waste
f. DOT Hazard Class Labels (e.g., Corrosive)

All other labels must be removed or rendered illegible. These are State and/or Federal requirements.

HAZARDOUS WASTE MANIFEST

A current edition of the California Hazardous Waste Manifest must be used for all shipments to our California facility. Please contact the Department of Toxic Substances Control on the procedure to obtain manifests, or contact your distributor.

Questions about the proper completion of a manifest are best answered by the Department of Toxic Substances Control directly. Errors can have serious consequences to the generator.

LAND DISPOSAL RESTRICTION NOTIFICATION

A complete Land Disposal Restriction (LDR) form must also accompany each hazardous waste shipment. A copy of the current Land Disposal Restriction form is attached.

CALIFORNIA EXTREMELY HAZARDOUS WASTE

California requires that the generator and transporter pay an annual fee whenever waste with any "extremely hazardous" constituent is shipped. This requirement applies to generators within California and out-of-state generators.

Waste constituents which fall into this catagory include hydrochloric acid, hydrofluoric acid, ammonium bifluoride and fluoboric acid. These are commonly used in solder strippers, solder plating baths, and in some post-etch solder conditioner/brightener/cleaner formulations. Check your product MSDS. Other chemicals also are rated as "extremely hazardous." If your waste is a California extremely hazardous waste, Phibro-Tech will notify you as a courtesy.

BOARD OF EQUALIZATION

Each generator in the State of California who produces more than five tons per year of hazardous waste must apply to the Board of Equalization for a State Generator's ID Number, and enter this number in Section B of the manifest. If you are an out-of-state generator or generate less than five tons of hazardous waste per year, you are to enter "Exempt" in Section B.

HANDLING CODES

DO NOT fill in the handling code on the manifest. The receiving facility must provide this information.

YOUR MAILING ADDRESS

Please clearly provide all the information on the manifest which will be needed to return your copy to the responsible individual at your facility. You must maintain a completed manifest file to prove that the waste was accepted at a TSDF.

DOUBLE-CHECK CONTENT OF WASTE CONTAINERS

Please ensure that the contents of waste containers match the accompanying documentation. We do complete inspections of 100% of incoming waste. We must report and reject deviations from the profile as well as report other discrepancies in documentation. All containers must be in good condition with tops or bungs securely closed. There must be no leaks or waste stains on the containers. All liquid wastes should be shipped in closed-top drums. Any waste shipped in open-top containers may be subject to a surcharge.

07/12/2005 09:54

ERS DIVISION **WASTE PROFILE FORM**

Sales Office: 65 Challenger Road · Ridgefield Park, N.J. 07660 · (201) 329-7300

SEND SAMPLES TO:

Phibro-Tech, Inc., ERS Division ·

☐ 2395 Cains Mill Road Sumter, SC 29154 · (803) 481-8528

☒ 8851 Dice Road · Santa Fe Springs, CA 90670 · (562) 698-8036

☐ Initial profile ☐ Re-profile Existing ERS No._____

ANNUAL PROFILE FEE: ($250.00) PURCHASE ORDER #

FOR PHIBRO-TECH, INC USE ONLY

☒ Approved ☐ Rejected ERS No. 20040127I

Date 7-12-05

Comments _____

Signature [signature]

A. General Information

Generator Name KIK International SoCal, Inc.

Generator Address 9028 Dice Road

City Santa Fe Springs St Ca Zip 90670

Phone No. 562-946-6427 Fax No. _____

Generator EPA ID Number CAD051482784

Generator Contact Environmental Mgr

ERS Distributor & Contact PTI

Address _____

B. Description of Waste

Generator's Common Name of Waste ammonium chloride water

Process Generating Waste water softner

C. Manifest and Labeling Information

Proper DOT Shipping Name non rcra, haz waste liquid

R.Q. ☐

EPA Waste No. n/a

State Waste No. 135

UN/NA No. n/a Haz. Class n/a

D. Characteristics of Waste

Color clear Odor none Gravity @ 70 F 8.0+

Flash Point n/a pH 8 Comments _____

Physical State at 70 F

☐ Solid ☐ Semi Solid

☒ Liquid ☐ Powder

☐ Sludge ☐ Cake

Layers

☒ Single Phase

☐ Bi-Layered

☐ Multilayered

E. Chemical Composition (Must Add up to 100%)

Check Generic Waste Type that best describes Waste

☐ A. Copper Sulfate Crystal

☐ B. Copper Sulfate Solution (☐ Micro-etch or ☐ acid copper plating bath)

☐ C. Cupric Chloride Etchant (☐ Chlorine Process or ☐ Oxford Process)

☐ D. F006 sludge containing nickel and/or copper

☐ E. Nitric Acid Copper Rack Strip

☐ F. Solder/Tin Stripper (☐ Plating Bath or ☐ brightener)

☐ G. ☐ Nickel plating solution or ☐ Nitric acid nickel strip

☐ H. Ferric Chloride solution

☐ I. Miscellaneous Inorganic acid or base

☐ J. Spent alkaline copper etchant

☐ K. Alk-Cu-Strip copper etchant

☒ L. Other _____

%	Constituents
100	water
12 ca	ammonium chloride
n/a	

F. Metals ☐ **Total (ppm)** ☐ **TCLP (ppm)**

Ag n/a Cr3+ n/a Se n/a

As _____ Cr6+ _____ Cu _____

Ba _____ Hg _____ Ni _____

Cd _____ Pb _____ Zn _____

Sabji $15.00

G. Other Components

PCB's, Cyanides, Sulfides, Pesticides, Phenolics, Dioxins

☒ No ☐ Yes List Type and Total (ppm)

H. Hazardous Characteristics

1. Infectious or Biological Waste ☒ No ☐ Yes
2. Radioactive Waste ☒ No ☐ Yes
3. Reactivity: ☒ None ☐ Explosive ☐ Pyrophoric ☐ Water Reactive ☐ Shock
4. Organic Toxicity Characteristics: ☒ No ☐ Yes (D018-D043)

I. Anticipated Volume

Quantity 4 cu ☐ One Time Only

Container Type n/a Per _____

Container Size _____ (wk., (mo.) yr., quarter)

J. Special Handling or Additional Information _____

☐ MSDS Attached ☐ Emergency Profile Required ($500 profiling fee)

K. I hereby certify that through generator knowledge and/or chemical analysis, all information submitted in this and all attached documents is complete, accurate, and that all known or suspected hazards have been disclosed. I also certify that the sample submitted with this document was collected using the appropriate sampling technique, so as to be representative of the actual stream. I also certify that the sample is properly classified, packaged, marked, and labeled and that the package is in proper condition for transportation according to DOT regulations.

[signature] Vice President 7/12/05

Authorized Signature Title Date

2	1000	O&AB Pads	02	FILTER RECYC.	21705750	No	12/28/01	8
1	**38900**	**<<

CERTIFICATE OF RECYCLING

October 12, 2004

Lighting Resources, Inc. certifies that the materials listed have been received from,
K.I.K. International-Southern CA. Division

title transfers to Lighting Resources, Inc. Recycling Center in Ontario, upon acceptance of material. The lamps were processed according to the terms of Lighting Resources, Inc. in Ontario, California, CA EPA #CAL000125125.Your Batteries will be waste reduced and processed under 40cfr 273 Universal Waste Rule. They will be sent to the recycler of our choice for final recycling.

Bill of Lading:
#100604-6A

Inventory:

F-40 Lamps Qty. 52
F-96 Lamps Qty. 5
27 lbs. Alkaline Batteries
7 lbs. of Battery Pack

Generated By:

Same

Thank you for helping to protect our environment.

Certified By:

Lighting Resources, Inc.
Ontario, California
Erica Magana
Accounts Receivable
Toll Free 1-800-572-9253
Fax (909) 923-3962

STRAIGHT BILL OF LADING

ORIGINAL - NOT NEGOTIABLE

NO. 50-100607-6A

LIGHTING RESOURCES, INC. (Name of Carrier) 10/6/04 Date

TO: Consignee **LIGHTING RESOURCES, INC.** PO # 84890

☒ 805 E. Francis St. Ontario, CA 91761 909-923-7252	☐ 498 Park 800 Dr. Greenwood, IN 46143 317-888-3889	☐ 1522 E. Victory St., #4 Phoenix, AZ 85040 602-276-4278
☐ 5481 Jetport Industrial Blvd. Tampa, FL 33624 813-806-1888	☐ _____	

Routing Instructions / Comments

SHIPPER (FROM) NAME	K. I. K.	BILL TO NAME			
STREET ADDRESS (NOT A P.O. BOX)	9028 DICE RD.	ADDRESS			
CITY	SANTA FE SPNGS	STATE CA	ZIP 90670	CITY	STATE ZIP

No. Shipping Units	* HM	Kind of Packaging, Description of Articles, Special Marks and Exceptions	Weight (Subject to Correction)	Class Or Rate	Check Column	Charges
		USED FLUORESCENT LAMPS FOR RECYCLING				
52		4'				
5		8'				
1		DF (5gal) BATTERIES (MIXED)				
		— ALKALINE				
		— (LRG.) BATTERY PACK				

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading The property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment, and shall be subject to all the terms and conditions of the United States Carriage of Goods By Sea Act of 1936 if it is a water shipment

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

THIS IS TO CERTIFY THAT THE ABOVE-NAMED MATERIALS 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

SHIPPER'S SIGNATURE X	PRINT LAST NAME	CARRIER LRI	NO OF PIECES
		DRIVER'S SIGNATURE	DATE 10/6/04
		EMPLOYEE NUMBER MATI	TIME

Straight Bill of Lading - Short Form

MEMORANDUM - NOT NEGOTIABLE

*MARK WITH "X" TO DESIGNATE HAZARDOUS MATERIAL AS DEFINED IN TITLE 49 OF THE CODE OF FEDERAL REGULATIONS.

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

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. | Manifest Document No. 93233 | 2. Page 1 of 1

3. Generator's Name and Mailing Address
KIK INTERNATIONAL
9028 DICE RD. SANTA FE SPRINGS, CA 90670
4. Generator's Phone (562)906-2200

5 Transporter 1 Company Name	6 US EPA ID Number	A Transporter's Phone
CIRCLE GREEN ENVIRONMENTAL		(626)398-4400
7 Transporter 2 Company Name	8. US EPA ID Number	B Transporter's Phone
K-VAC ENVIRONMENTAL		(909)476-2308
9 Designated Facility Name and Site Address K-PURE WATERWORKS 8910 ROCHESTER AVE. RANCHO CUCAMONGA, CA 91730	10 US EPA ID Number	C Facility's Phone (909)446-9492

11. Waste Shipping Name and Description	12 Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, LIQUID	001	TT	00150	G
b				
c.				
d.				

GENERATOR

D. Additional Descriptions for Materials Listed Above
11.A WASTEWATER

E Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS

16 **GENERATOR'S CERTIFICATION.** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	10	07	10

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
I AN DENSIO	[signature]	10	07	10

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 waste materials covered by this manifest except as noted in Item 19

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR'S COPY

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CA D 0 5 1 4 8 2 7 8 4 — Manifest Document No: 0 1 2 4 9
2 Page 1 of 1
Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 24031868
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909) 873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
G State Facility's ID: CAD982444481
H Facility's Phone: (909) 421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	004	C F	02500	P	State 352 EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		D M		G	State EPA/Other NONE
c ~~Non-RCRA hazardous waste solid (Rags)~~		D M		G	State EPA/Other NONE
d					State EPA/Other

FILTER RECYCLING SERVICES RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
~~11b) paint~~ — ~~PROFILE # 03062602~~
~~11c) oil~~ — ~~PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

[redacted]

One or more of the materials listed in section 11 of this manifest may be disposed in alternative daily cover (ADC), or other method which uses the material in or on the land.

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	Signature	Month	Day	Year
Charles Humphile	[signature]	10	01	04

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JERRY MINGUS	Jerry Mingus	10	01	04

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	Signature	Month	Day	Year
Team Masters	[signature]	10	04	04

DO NOT WRITE BELOW THIS LINE.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS (Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

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

24031868

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of	Information in the shaded areas is not required by Federal law
CAD981382642			

3 Generator's Name and Mailing Address Kik International 9615 PICE ROAD SANTA FE SPRINGS, CA 90670 4 Generator's Phone (562) 946-6424	A State Manifest Document Number 24031868 B State Generator's ID
5 Transporter 1 Company Name: Miller Recycling Services, Inc. — 6 US EPA ID Number: CAD982041441	C State Transporter's ID [Reserved.] D Transporter's Phone (909)873-4141
7 Transporter 2 Company Name — 8 US EPA ID Number	E State Transporter's ID [Reserved.] F Transporter's Phone
9 Designated Facility Name and Site Address Miller Recycling Services, Inc. 140 W. Pipe Avenue Rialto, CA 9 2376 — 10 US EPA ID Number: CAD982041441	G State Facility's ID H Facility's Phone (909)421-2010

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	004	C F	02500	P	State 352 EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint		D M			State 221 EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil)		D M			State 221 EPA/Other NONE
d					State EPA/Other

J Additional Descriptions for Materials Listed Above	K Handling Codes for Wastes Listed Above
11a) Absorbent PROFILE # 97052425 11b) paint PROFILE # 03062602 11c) oil PROFILE # 03062601	a — b c — d

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1 909-721-1096

[redacted]

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	Signature	Month	Day	Year
Charles Hamilton	[signature]	12	1	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jerry Mullins	[signature]	12	21	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

GENERATOR

24031868

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

23553863

IN CASE OF 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: CAD052148271899448 | Manifest Document No | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 23553863
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909) 873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H. Facility's Phone: (909) 421-2012

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 Number
a. Non-RCRA hazardous waste solid (Pads/ Oil)	002	C F	01100	P	352 EPA/Other NONE
b. ~~Non-RCRA hazardous waste liquid (paint)~~		D M		G	~~331~~ EPA/Other NONE
c. ~~Non-RCRA hazardous waste liquid (oil)~~				G	~~331~~ ~~shaded~~ EPA/Other NONE
d					State EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
PROFILE # 97052325
~~11b) paint~~ ~~PROFILE # 03062602~~
~~11c) oil~~ ~~PROFILE # 03062603~~

K Handling Codes for Wastes Listed Above
a 14/01
b
c
d

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
#97052325

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	Signature	Month	Day	Year
Charles Hemphill		01	12	14

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JERRY MINGUS		01	12	14

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	Signature	Month	Day	Year
Steven Masters		01	13	14

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD982414181 | 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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 23553863
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982414181
C State Transporter's ID [Reserved]:
D. Transporter's Phone: (909) 873-4141

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

9 Designated Facility Name and Site Address: Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982414181
G State Facility's ID:
H Facility's Phone: (909) 421-2012

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 Number
a. ~~Non-RCRA hazardous waste solid (Pads/ Oil)~~	002	F	01100	P	State: 394 / EPA/Other: NONE
b. ~~Non-RCRA hazardous waste liquid (paint~~		M		G	State: 394 / EPA/Other: NONE
c. ~~Non-RCRA hazardous waste liquid (oil)~~		M		G	State: 221 / EPA/Other: NONE
d					State: / EPA/Other:

J Additional Descriptions for Materials Listed Above
11a) absorbent — PROFILE # 97052325
11b) paint — PROFILE # 03062602
11c) oil — PROFILE # 03062603

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

15 Special Handling Instructions and Additional Information
~~Wear anti-contact protective clothing~~
24 hour emergency contact phone # 1-909-721-2030
#97052325 [redacted]

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	Signature	Month	Day	Year
Charles Hemphill		07	12	99

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
~~Printed~~/Typed Name: JERRY MILLS		07	12	99

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
~~Robert~~ Johnson				

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

23553863

DTSC 8022A (1/99)
8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No.	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law.
CAD005148279			

23561128

GENERATOR

3. Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4. Generator's Phone (562) 946-6427

A State Manifest Document Number: 23561128
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909) 873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10. US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909) 421-2012

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 Number
Non-RCRA hazardous waste solid (Pads/ Oil)	010	RC	01100	P	State: CA 352 EPA/Other: NONE
~~Non-RCRA hazardous waste liquid (paint)~~		DM		397	State: ~~CA 791~~ EPA/Other: NONE
~~Non-RCRA hazardous waste liquid (oil)~~				G	State: ~~CA 221~~ EPA/Other: ~~NONE~~
d					State: EPA/Other:

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMITS) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent PROFILE # 97052325
~~11b) paint PROFILE # 03062602~~
~~11c) oil PROFILE # 03062603~~

K. Handling Codes for Wastes Listed Above
a 14/01
b
c
d

15. Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
Profile on file [redacted]

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	Signature	Month	Day	Year
Bill Lamey	Bill Lamey	06	15	14

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Dool		06	15	14

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	Signature	Month	Day	Year
Steven Masters		06	16	14

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD059497295			

3 Generator's Name and Mailing Address
Kik International
9029 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number 23561128
B State Generator's ID

5 Transporter 1 Company Name | **6 US EPA ID Number**
Filter Recycling Services, Inc. CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone (909) 873-4141

7 Transporter 2 Company Name | **8 US EPA ID Number**
E State Transporter's ID [Reserved]
F Transporter's Phone

9. Designated Facility Name and Site Address | **10 US EPA ID Number**
Filter Recycling Services, Inc.
180 W. Monta Avenue
Rialto, CA 92316 CAD982444481
G State Facility's ID
H Facility's Phone (909) 421-2012

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 Number
a. Non-RCRA hazardous waste solid (Pads/ Oil)	001	C F		P	State 352 / EPA/Other NONE
b. Non-RCRA hazardous waste liquid (paint)		D M		G	State 291 / EPA/Other NONE
c. Non-RCRA hazardous waste liquid (oil)		D M		G	State 221 / EPA/Other NONE
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
J1a) Absorbent PROFILE # 97052325
J1b) paint ~~PROFILE # 03062602~~
J1c) oil ~~PROFILE # 03062603~~

K Handling Codes for Wastes Listed Above
a | b
c | d

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
Bill Lamey		01	15	04

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		01	15	04

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

23561128

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD055142784 | 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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
Generator's Phone: 562 946-6427

A State Manifest Document Number: 23557009
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc. | 6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909) 873-4141

7 Transporter 2 Company Name | 8 US EPA ID Number
E State Transporter's ID [Reserved]
F Transporter's Phone

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CA0191820
H Facility's Phone: (909) 421-2012

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 Number
a. Non-RCRA hazardous waste solid (Pads/ Oil,	002	C F	01000	P	State 352 / EPA/Other NONE
b. ~~Non-RCRA hazardous waste liquid (paint)~~		~~C M~~		~~G~~	State ~~251~~ / EPA/Other ~~NONE~~
c. ~~Non-RCRA hazardous waste liquid (oil)~~		~~C M~~		~~G~~	State ~~221~~ / EPA/Other ~~NONE~~
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
~~11b) paint — PROFILE # 03062602~~
~~11c) oil — PROFILE # 03062603~~

K Handling Codes for Wastes Listed Above
a: 14/01 | b | c | d

15 Special Handling Instructions and Additional Information
: Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
Profile # 97052325

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	Signature	Month	Day	Year
Raymond J. Wetter	Raymond Wetter	05	18	04

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JERRY M. MILLS	Jerry Mills	05	18	04

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	Signature	Month	Day	Year
Steven Masters		05	19	04

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

GENERATOR

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

23557009

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD982444481 | Manifest Document No: 23557009 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 23557009
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909) 873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92315
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909) 421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C F	01000	P	State 352 / EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		L M		G	State 291 / EPA/Other NONE
~~Non-RCRA hazardous waste liquid (oil)~~		D M		G	State 221 / EPA/Other NONE
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) Absorbent PROFILE # 97052325
11b) paint PROFILE # 03062602
11c) oil PROFILE # 03062603

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

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
Profile# 97052325

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: Raymond J. Weller | Signature: Raymond J. Weller | Month 05 | Day 11 | Year 01

17 Transporter 1 Acknowledgement of Receipt of Materials

TRANSPORTER — Printed/Typed Name: Jerry Mullis | Signature: Jerry Mullis | Month 05 | Day 15 | Year 01

18 Transporter 2 Acknowledgement of Receipt of Materials

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

19 Discrepancy Indication Space

FACILITY

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: | Signature: | Month | Day | Year

DO NOT WRITE BELOW THIS LINE.

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

23557009

DTSC 8022A (1/99)
EPA 8700--22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD052114827	84952115		

GENERATOR

3. Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS. CA 90670
4. Generator's Phone (562) 946-6427

A State Manifest Document Number: 23813749
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9. Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481A/1
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C F	01000	P	State 352 / EPA/Other NONE
b Non-RCRA hazardous waste liquid ~~(paint)~~ (perfume)	001	D M	00055	G	State ~~291~~ 343 / EPA/Other NONE
c ~~Non-RCRA hazardous waste liquid (oil)~~ FILTER RECYCLING SERVICES RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT($) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.		M		G	State 221 / EPA/Other NONE
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
11b) ~~paint~~ — PROFILE # ~~03062602~~ 00051204
11c) ~~oil~~ — ~~PROFILE # 03062603~~

K Handling Codes for Wastes Listed Above
a: 1V/01 b: 6,4 c: d:

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
Approval # on file

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	Signature	Month	Day	Year
Charles Hemphill		03	29	04

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JERRY MINGUS	Jerry Mingus	03	29	04

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space
11b) 1 drum rejected, sent to an alternate TSDF on manifest # 23813876

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

Printed/Typed Name	Signature	Month	Day	Year
Steve Masters		03	30	04

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

23813749

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No | Manifest Document No | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
Sik International
6320 Flotilla
Paramount, CA 90670
4 Generator's Phone (562) 916-6427

A State Manifest Document Number: 23813749
B State Generator's ID:

5 Transporter 1 Company Name | 6 US EPA ID Number
Filter Recycling Services, Inc. | CAD982448818

C State Transporter's ID [Reserved]
D Transporter's Phone (909)873-4141

7 Transporter 2 Company Name | 8 US EPA ID Number

E State Transporter's ID [Reserved]
F Transporter's Phone

9 Designated Facility Name and Site Address | 10 US EPA ID Number
Filter Recycling Services, Inc.
680 W. Monte Avenue
Rialto, CA 92376 | CAD982448818

G State Facility's ID
H Facility's Phone (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	F	01000	P	State 352 / EPA/Other NONE
b Non-RCRA hazardous waste liquid ~~(paint)~~ (perfume)	001	M	00055	G	State ~~221~~ 343 / EPA/Other NONE
c ~~Non-RCRA hazardous waste liquid (oil)~~		M		G	State 221 / EPA/Other NONE
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) Absorbent
11b) ~~paint~~
~~11c) oil~~
PROFILE # 07052325
PROFILE # ~~03062602~~ 0005/204
~~PROFILE # 03062603~~

K Handling Codes for Wastes Listed Above
a | b
c | d

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1 909-421-2038
Approval # on file

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	Signature	Month	Day	Year
Charles Hospital		03	29	04

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JERRY MINGUS		03	29	04

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

23813749

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

CERTIFICATE OF RECYCLING

March 11, 2004

Lighting Resources, Inc. certifies that the materials listed have been received from,

K.I.K. International-Southern CA. Division

title transfers to Lighting Resources, Inc. recycling center in Ontario, California upon acceptance of material. The lamps are processed and recycled in accordance with all federal, state, and local laws under California EPA Permit # CAL 000827758.

Bill Of Lading:/
#3049

Inventory:			**Generated By:**
F-40 Lamps	Qty.	50	K.I.K International-Southern CA
HID Lamps	Qty.	31	9028 Dice Road
F-96 Lamps	Qty.	25	Santa Fe Springs, CA. 90670

Thank you for helping to protect our environment.

Certified By:

Lighting Resources, Inc.
Ontario, California
Maribel Rodriguez
Accounts Receivable
Toll Free: 1-800-572-9253
Fax (909) 923-3962

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784942 | Manifest Document No: 98 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: **23561983**
B. State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CADA80HH44A1
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	008	CF	02700	P	State 352 / EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint)		DM		G	State 291 / EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil)		DM		G	State 221 / EPA/Other NONE
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
~~11a) Absorbent~~ PROFILE # 97052325
~~11b) paint~~ PROFILE # 03062602
~~11c) oil~~ PROFILE # 03062603

K Handling Codes for Wastes Listed Above
a 14/01
b
c
d

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
APPROVAL # ON FILE

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	Signature	Month	Day	Year
SANTIAGO E. HERNÁNDEZ	Santiago E. Hernández	02	20	04

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
GARY DOLL		02	20	04

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	Signature	Month	Day	Year
Steven Masters		02	20	04

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

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

23561983

State of California--Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No.	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD054827849429			

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9022 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: **23561983**
B State Generator's ID:

TRANSPORTER

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D. Transporter's Phone: (909)873-4141

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

FACILITY

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	008	CT	02100	P	State 352 EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint)		D M		G	State 291 EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil)		D M		G	State 221 EPA/Other NONE
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
~~b) paint~~ PROFILE # 97052325
~~PROFILE # 03062602~~
~~c) oil~~ ~~PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information: clothing
24 hour emergency contact phone # 1-909-721-2038
APPROVAL # ON FILE

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	Signature	Month	Day	Year
SANTIAGO E. HERNANDEZ	[signature]	02	10	04

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
GARY OHL	[signature]	02	10	04

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	Signature	Month	Day	Year

IN CASE OF 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.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

PED

				Reporting Period	Jan - Dec	2002		
1	1200	O&AB Pads	01	FILTER RECYC.	21701803	No	02/21/02	1
2	800	O&AB Pads	01	FILTER RECYC.	21709692	No	04/22/02	2
2	1000	O&AB Pads	01	FILTER RECYC.	21702304	No	06/25/02	3
2	1000	O&AB Pads	01	FILTER RECYC.	21711101	No	09/12/02	4
1	2000	Oil & Water	02	WESTERN ENV.	21611602	No	09/12/02	5
8	**6000**	<<<

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD052148278491	56		

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 2263430[illegible]
B State Generator's ID:

5. Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	0090	P	State 352 EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		~~DM~~		~~G~~	State ~~291~~ EPA/Other ~~NONE~~
c ~~Non-RCRA hazardous waste liquid (oil)~~		~~DM~~		~~G~~	State ~~221~~ EPA/Other ~~NONE~~
d					State EPA/Other

FILTER RECYCLING SERVICES RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052935
~~11b) paint~~ — ~~PROFILE # 03062602~~
~~11c) oil~~ — ~~PROFILE # 03062603~~

K Handling Codes for Wastes Listed Above
a 14/01
b
c
d

15 Special Handling Instructions and Additional Information
: wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038 # profile above [redacted]

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	Signature	Month	Day	Year
ROBERT D. BROWN	Robert D. Brown	12	11	03

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD	C Woodward	12	11	03

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	Signature	Month	Day	Year
Steen Masters		12	11	03

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

GENERATOR

TRANSPORTER

FACILITY

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802 WITHIN CALIFORNIA, CALL 1-800-852-75

22634308

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD982484915			

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 2263430
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C. State Transporter's ID [Reserved.]
D Transporter's Phone: (909)873-4141

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

9. Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G. State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	0090	P	State 352 / EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		~~DM~~		~~G~~	State ~~291~~ / EPA/Other ~~NONE~~
c ~~Non-RCRA hazardous waste liquid (oil)~~		~~DM~~		~~G~~	State ~~221~~ / EPA/Other ~~NONE~~
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) Absorbent PROFILE # 97052325
~~11b) paint~~ ~~PROFILE # 03062602~~
~~11c) oil~~ ~~PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038 # Profile above

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	Signature	Month	Day	Year
ROBERT D. BROWN	Robert D. Brown	12	11	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODS ARG		12	11	03

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

2263430S

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22626991

IN CASE OF 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: CAD051482784 | Manifest Document No: 90622 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22626991
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C. State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	001	C F	00002	Y K	State 352 / EPA/Other NONE
b ~~Non-RCRA hazardous waste liquid (paint)~~		D M		G	~~State 221~~ / ~~EPA/Other NONE~~
c ~~Non-RCRA hazardous waste liquid (oil)~~		D M		G	~~State 221~~ / ~~EPA/Other NONE~~
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent PROFILE # 97052325
~~11b) paint PROFILE # 03062602~~
~~11c) oil PROFILE # 03062603~~

K. Handling Codes for Wastes Listed Above
a 14101 b
c. d

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038 Profile on file

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	Signature	Month	Day	Year
Santiago E. Hernandez		1 1	0 7	0 8

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Dool		1 1	0 7	0 8

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	Signature	Month	Day	Year
Steven Masters		1 1	0 7	0 8

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22626991

IN CASE OF 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: CAD051482734 | Manifest Document No: 90622 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22626991
B. State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C. State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G. State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	020	CF	00022	K	State 332 EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint)		DM		G	State 291 EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil)		DM		G	State 221 EPA/Other NONE
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) Absorbent PROFILE # 97052325
~~11b) paint PROFILE # 03062602~~
~~11c) oil PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038 Profile on file

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	Signature	Month	Day	Year
Sandra E. Hernandez		1 1	2 7	1 3

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dan Wood		1 1	2 7	1 3

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22626551

IN CASE OF 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	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051482784	94 05		

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS. CA 90670
4 Generator's Phone (562) 946-6427

A. State Manifest Document Number 22626551
B State Generator's ID

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone (909)873-4141

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

9. Designated Facility Name and Site Address
Filter Recycling Services. Inc.
180 W. Monte Avenue
Rialto. CA 92316
10 US EPA ID Number: CAD982444481
G. State Facility's ID: CAD982444481
H Facility's Phone (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	00600	P	State 352 / EPA/Other NONE
b Non-RCRA hazardous waste liquid ~~(paint)~~ (WATER & PERFUME)	001	DM	00030	G	State ~~221~~ 343 / EPA/Other NONE
c ~~Non-RCRA hazardous waste liquid (oil)~~		~~DM~~		~~G~~	State ~~221~~ / EPA/Other ~~NONE~~
d					State / EPA/Other

FILTER RECYCLING SERVICES RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent PROFILE # 97052325
11b) ~~paint~~ WATER & PERFUME PROFILE # 03062602
~~11c) oil~~ ~~PROFILE # 03062603~~

K Handling Codes for Wastes Listed Above
a 14/01 b 14
c d

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

[redacted]

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	Signature	Month	Day	Year
Charles Hemphill	[signature]	09	18	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JERRY M. NGUS	[signature]	09	18	03

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	Signature	Month	Day	Year
Steen Masters	[signature]	09	19	03

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type . Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22626551

IN CASE OF 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: CAD059148274 | Manifest Document No: 89404 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22626551
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444488 1
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G. State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C F	006000	P	State 352 EPA/Other NONE
b Non-RCRA hazardous waste liquid ~~(paint)~~ (WATER + Perfume)	001	D M	000330	G	State ~~221~~ 313 EPA/Other NONE
c ~~Non-RCRA hazardous waste liquid (oil)~~		~~D M~~		~~G~~	State ~~221~~ EPA/Other ~~NONE~~
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
11b) ~~paint~~ WATER + Perfume — PROFILE # 03062602
~~11c) oil — PROFILE # 03062603~~

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

15 Special Handling Instructions and Additional Information
: Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

[redacted]

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	Signature	Month	Day	Year
Charles Kemp Lee	[signature]	01	13	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JERRY M. MIGUS	[signature]	01	13	03

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22634666

IN CASE OF 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: CAD052148278487 9 6 5 — Manifest Document No — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 2263466
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9. Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C W	01000	P	State: 352 / EPA/Other: NONE
b Non-RCRA hazardous waste liquid (paint)		D M		G	State: 331 / EPA/Other: NONE
c Non-RCRA hazardous waste liquid (oil)		D M		G	State: 221 / EPA/Other: NONE
d					State: / EPA/Other:

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
11b) paint — PROFILE # 03062602
11c) oil — PROFILE # 03062603

K Handling Codes for Wastes Listed Above
a 14/01
b
c
d

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

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	Signature	Month	Day	Year
B.W. Lamey	Bill Lamey	08	06	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JAMES VEBZ	James Vebz	08	06	03

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
B.W. Lamey	Bill Lamey			

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
Steven Masters		08	07	03

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22634666

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802: WITHIN CALIFORNIA, CALL 1-800-852-7

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051148278487965
Manifest Document No:
2 Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A. State Manifest Document Number: 2263466
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D. Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G. State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C W	0/000	P	State 352 EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint)		D M		G	State 221 EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil)		D M		G	State 221 EPA/Other NONE
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
11b) paint — PROFILE # 03062602
11c) oil — PROFILE # 03062603

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

15 Special Handling Instructions and Additional Information
clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

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	Signature	Month	Day	Year
B. McLaney		08	06	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JAMES VELEZ		08	06	03

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

CERTIFICATE OF RECYCLING

August 15, 2003

Lighting Resources, Inc. certifies that the materials listed have been received from, **K.I.K. International So. CA, Division.**

Title transfers to Lighting Resources, Inc. Recycling Center in Ontario, upon acceptance of material. The lamps were processed according to the terms of Lighting Resources, Inc. in Ontario, California, CA EPA #CAL000827758.Your Batteries will be waste reduced and processed under 40cfr 273 Universal Waste Rule. They will be sent to the recycler of our choice for final recycling. Your Non-PCB Ballast have been received in our Ontario, California facility and will be processed, de-manufactured and recycled under our CA EPA Permit ID #CAL000827758 and in accordance with all federal, state and local laws.

Bill of Lading:
#731033

Inventory:

F-40 Lamps	Qty.	35
HID Lamps	Qty.	30
F-96 Lamps	Qty.	20

20 lbs. of Alkaline Batteries
5 lbs. of Nickel-Metal Batteries
5 lbs. of Lead Acid Batteries
10 lbs. of Non-PCB Ballast

Generated By:

KIK International So. CAA, Division
9028 Dice Road
Santa Fe Springs, CA 90670

Thank you for helping to protect our environment.

Certified By:

Lighting Resources, Inc.
Ontario, California
Alma Sanchez
Accounts Receivable
Toll Free. 1-800-572-9253
Fax (909) 923-3962

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22633271

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

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: C A D 0 5 1 4 8 2 7 8 4 8 5 3 2 6
Manifest Document No:
2 Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22633271
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	0 0 2	C F	0 0 0 0 2	P Y	State 352 / EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint)	0 0 1	D M	0 0 0 4 0	G	State 291 / EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil)	0 0 1	D M	0 0 0 4 5	G	State 221 / EPA/Other NONE
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above
11a) absorbent — PROFILE # 97052325
11b) paint — PROFILE # 030626G2
11c) oil — PROFILE # 030626G3

K Handling Codes for Wastes Listed Above
a H/01 b 14 c 14 d

15 Special Handling Instructions and Additional Information
wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
APPROVAL #97052325

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	Signature	Month	Day	Year
Dennis M. Johnson		06	26	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Pool		06	26	03

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	Signature	Month	Day	Year
Steven Masters		06	27	03

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22633271

IN CASE OF 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: CAD051148278485326 | Manifest Document No | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22633271
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C. State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H. Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	00022	Y	State 352 / EPA/Other NONE
b Non-RCRA hazardous waste liquid (paint)	001	DM	00014	G	State 291 / EPA/Other NONE
c Non-RCRA hazardous waste liquid (oil)	016	DM	00055	G	State 221 / EPA/Other NONE
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) Absorbent — PROFILE # 97052325
11b) paint — PROFILE #
11c) oil — PROFILE #

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
APPROVAL #97052325

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	Signature	Month	Day	Year
Darrell M. Johnson		12	16	13

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		12	16	

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22632736

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802 WITHIN CALIFORNIA, CALL 1-800-852-7

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784840 | Manifest Document No | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4. Generator's Phone (562) 946-6427

A State Manifest Document Number: 2263273 6
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved.]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CA1D982444481
H Facility's Phone: (909)421-2012

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	15. Waste Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	01000	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

11 Additional Descriptions for Materials Listed Above: Absorbent PROFILE # 97052325
12 Handling Codes for Wastes Listed Above: a. 22 B371 / b. / c. / d.

13 Special Handling Instructions and Additional Information: Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
APPROVAL #97052325

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	Signature	Month	Day	Year
Bill Lamey	Bill Lamey	05	07	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD	CurtW	05	07	03

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	Signature	Month	Day	Year
Steven Masters	Steven Masters	05	08	03

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22632736

IN CASE OF 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: CAD051482784 | Manifest Document No: 84060 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS. CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 2263273

B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services. Inc.
6 US EPA ID Number: CAD982444481

C. State Transporter's ID [Reserved.]:

D Transporter's Phone: (909)873-4141

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

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services. Inc.
180 W. Monte Avenue
Rialto. CA 92316
10 US EPA ID Number: CAD982444481

G State Facility's ID:

H. Facility's Phone: (909)421-2012

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 Number
a. Non-RCRA hazardous waste solid (Pads/ Oil)	002	DF	00100	P	State: 332 / EPA/Other: NONE
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J Additional Descriptions for Materials Listed Above: PROFILE # 97052325

K Handling Codes for Wastes Listed Above: a. 6533-71 | b. | c. | d.

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
APPROVAL #97052325

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	Signature	Month	Day	Year
Bill Layley		05	07	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CHRIS WOODWARD		05	07	03

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22555358

IN CASE OF 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: CAD052148278 — Manifest Document No: 55358 — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22555358
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H. Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	~~CW~~ ~~B~~ ~~A~~	00002	Y P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above: PROFILE # 97052325
1 Absorbent
2

K Handling Codes for Wastes Listed Above
a. H401
b.
c.
d.

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
APPROVAL #97052325

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	Signature	Month	Day	Year
Bill Lamey	Bill Lamey	02	26	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Ohol		02	26	03

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	Signature	Month	Day	Year
Steven Masters		02	27	03

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22555358

IN CASE OF 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: CAD051148284 | Manifest Document No | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS. CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22555358
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CW ~~P A~~	00132	Y ~~P~~	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above: ~~Absorbent~~ PROFILE # 97052325
2.

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

15 Special Handling Instructions and Additional Information
wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
APPROVAL #97052325 [redacted]

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	Signature	Month	Day	Year
Bill Lamey	Bill Lamey	02	20	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	02	20	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22557009

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

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. C A D 0 5 1 4 8 2 7 8 4 7 9 7 9 7 — Manifest Document No — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law.

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22557009
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc. — 6 US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

7 Transporter 2 Company Name — 8 US EPA ID Number
E State Transporter's ID [Reserved]
F Transporter's Phone

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a *Non-RCRA hazardous waste solid (Pads/ Oil)	002	BA	00004	TY	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

FILTER RECYCLING SERVICES' RIALTO FACILITY, EPA #CAD982444481 HAS THE APPROPRIATE PERMIT(S) FOR, AND WILL ACCEPT THIS WASTE AS SHIPPED.

J Additional Descriptions for Materials Listed Above: 11a.) Absorbent — PROFILE # 97052325
K Handling Codes for Wastes Listed Above: a 14/01 — b — c — d

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

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	Signature	Month	Day	Year
Tonia's Ribbon		01	17	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Pool		01	17	03

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	Signature	Month	Day	Year
Steven Masters		01	20	03

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

22557009

IN CASE OF 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: CAD051487847 — Manifest Document No: 97 — 2 Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 22557009
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444431
C State Transporter's ID [Reserved.]
D. Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92315
10 US EPA ID Number: CAD982444481
G. State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Fads/ Oil)	001	B	00001	K	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above: 11a.) Absorbent — PROFILE # 97052325

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

15 Special Handling Instructions and Additional Information
wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

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	Signature	Month	Day	Year
Travis Robb		01	12	03

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Dodd		01	12	03

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051482784	116021		

3. Generator's Name and Mailing Address
KIK INTERNATIONAL
9023 DICE RD. SANTA FE SPRINGS, CA. 90670
4. Generator's Phone (562) 946-6427

A. State Manifest Document Number: 21611602
B. State Generator's ID:

5. Transporter 1 Company Name: WESTERN ENVIRONMENTAL
6. US EPA ID Number: CA0000704540
C. State Transporter's ID (Required):
D. Transporter's Phone: (626) 339-2340

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

9. Designated Facility Name and Site Address
INDUSTRIAL SERVICE INC.
1700 S. SOTO
LOS ANGELES, CA. 90023
10. US EPA ID Number: CAD099452708
G. State Facility's ID: CAD099452708
H. Facility's Phone: (562) 528-2577

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 Number
a. NON-RCRA HAZARDOUS WASTE, LIQUID	001	TT	00250	G	State 222 / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11. A. OIL AND WATER

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

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT PHONE (626) 339-2340

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	Signature	Month	Day	Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Mark Guerrero		01	21	03

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		01	21	03

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
Julian Nesbitt		01	21	03

DO NOT WRITE BELOW THIS LINE.

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

GENERATOR — TRANSPORTER — FACILITY

DTSC 8022A (1/99)
EPA 8700—22

Green TRANSPORTER RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

21611602

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RE... USE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-75...

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD051482784 | Manifest Document No: 116021 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
KIK INTERNATIONAL
9028 DICE RD. SANTA FE SPRINGS, CA. 90670
4 Generator's Phone (562) 946-6427

A. State Manifest Document Number: 21611602
B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL | 6 US EPA ID Number: CA0000904540
C. State Transporter's ID [Reserved]
D. Transporter's Phone: (626) 337-2340

7 Transporter 2 Company Name | 8 US EPA ID Number
E State Transporter's ID [Reserved]
F Transporter's Phone

9 Designated Facility Name and Site Address: INDUSTRIAL SERVICE INC. 1700 S. SOTO LOS ANGELES, CA. 90023 | 10 US EPA ID Number: CAD099452708
G State Facility's ID
H Facility's Phone: (562) 598-5577

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 Number
a NON-RCRA HAZARDOUS WASTE, LIQUID	001	TT	00250	G	State 222 / EPA/Other
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above: 11. A. OIL AND WATER

K Handling Codes for Wastes Listed Above: a | 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	Signature	Month	Day	Year
DENNIS JOHNSON		01	12	02

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		09	12	02

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MAT GUERRERO		09	12	02

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Use print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051482784	55611		

3 Generator's Name and Mailing Address
KIK International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 21711101
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	01000	P	State 352 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING / TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above: ABSORBENT PROFILE # 97032325

K Handling Codes for Wastes Listed Above
a: T4
b:
c:
d:

16 Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE CLOTHING
24 hour emergency contact phone # 1-909-721-2032

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	Signature	Month	Day	Year
DERRAN JOHNSON		09	12	02

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD		09	12	02

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	Signature	Month	Day	Year
Steven Masters		09	13	02

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

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

21711101

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD052148278 — Manifest Document No: 8561

2 Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
RIC PRINTER FORCE
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562 946-6427)

A State Manifest Document Number: 21711101

B State Generator's ID:

5 Transporter 1 Company Name: Piller Recycling Services, Inc.

6 US EPA ID Number: CAD982444481

C State Transporter's ID [Reserved]:

D Transporter's Phone: (909)873-4141

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Piller Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID:

H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Paint Oil)	002	EF	0100	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above: PROFILE # 97052325

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
Dennis Johnson		09	12	02

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Curtis Woodward		09	12	02

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

21711101

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784743 | 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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
Generator's Phone 562 946 6427

A State Manifest Document Number: 21702304

B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc. | 6 US EPA ID Number: CAD982444481

C State Transporter's ID [Reserved.]

D Transporter's Phone: (909)873-4141

7 Transporter 2 Company Name | 8 US EPA ID Number

E State Transporter's ID [Reserved.]

F Transporter's Phone

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid, (Paint Sludge)	002	CF	0 10 00	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING / TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325

K Handling Codes for Wastes Listed Above
a 14/01 | b | c | d

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
Darrell Johnson		06	25	02

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
James Velez		06	25	02

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	Signature	Month	Day	Year
Steven Masters		06	25	02

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

21702304

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD981448278	3 12		

GENERATOR

3. Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562 946-6427

A State Manifest Document Number: 21702304

B State Generator's ID:

5. Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444488

C State Transporter's ID [Reserved]

D Transporter's Phone: (909)873-4141

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

E State Transporter's ID [Reserved.]

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

G State Facility's ID:

H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	0100	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325

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

15. Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

[redacted]

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	Signature	Month	Day	Year
Denaelle Ormson	[signature]	06	25	02

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
James Velez	[signature]	06	25	02

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

21702304

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

21709692

IN CASE OF 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: CAD051432784 — Manifest Document No

2 Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 21709692

B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481

C State Transporter's ID [Reserved]

D Transporter's Phone: (909)873-4141

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

E State Transporter's ID [Reserved]

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C F	00800	P	State: 352 / EPA/Other: NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING / TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above: Initial Assessment PROFILE # 97052325

K Handling Codes for Wastes Listed Above
a 14/01
b
c
d

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
John Houck		04	22	02

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
James Velor		04	22	02

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	Signature	Month	Day	Year
Steven Masters		04	23	02

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

PO# 82828

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051148278 4			

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: **21709692**
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved.]
D. Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C	00800	P	State 952 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above: PROFILE # 97052325

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
John Hancock		04	22	02

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JAMES VEGA		04	22	02

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

21709692

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD 981444481	21701803		

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone 562 946-6427

A State Manifest Document Number 21701803
B. State Generator's ID

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone (909)421-2012

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 Number
a. Non-RCRA hazardous waste solid (Beads/ Oil)	002	CF	0/200	P	State 352 / EPA/Other NONE
b.					State / EPA/Other
c.					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
J1a.) Absorbent PROFILE # 97058325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING / TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

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

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	Signature	Month	Day	Year
Dennis Johnson		01	21	02

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JAMES Velez		01	21	02

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	Signature	Month	Day	Year
Steven Masters		01	22	02

DO NOT WRITE BELOW THIS LINE.

Yellow — TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

21701803

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Dept of Toxic Substances Contro
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784697 | Manifest Document No. | 2 Page 1 of 1 | Information in the shaded areas is required by Federal law

21701803

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

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 1701803
B State Generator's ID:
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909) 8-4141
E State Transporter's ID [Reserved]:
F Transporter's Phone:
G State Facility's ID:
H Facility's Phone: (909) -2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444448

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12 Container No	12 Container Type	13. Total Quantity	14 Wt	I Waste Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	0/200	P	State: 352 / EPA/Other: NONE
b					State: / EPA/Other:
c					State: / EPA/Other:
d					State: / EPA/Other:

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038
[redacted] file

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	Signature	Month	Day	Year
Darrell Johnson		01	21	02

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
James Veloz		01	21	02

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

2	1000	O&AB Pads	02	FILTER RECYC.	21705750	No	12/28/01	8
1	38900	<<<

DRUMS SHIPPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST #	OUTOF STATE	DATE	NO
				Reporting Period:	Jan - Dec	1998		
1	1000	A/B Pads	01	FILTER RECYC.	97422710	No	01/23/98	1
2	1600	O& A/B Pads	02	FILTER RECYC.	97422248	No	03/20/98	2
1	550	A/B Pads	01	FILTER RECYC.	97420485	No	05/21/98	3
2	1200	O& A/B Pads	02	FILTER RECYC.	97420737	No	06/24/98	4
2	1000	Oil Pads	02	FILTER RECYC.	98033185	No	08/17/98	5
1	250	Waste water	01	INDUST.SER. OIL	98074453	No	08/26/98	6
1	1200	Oil Pads	01	FILTER RECYC.	98033287	No	10/21/98	7
2	1400	O& A/B Pads	02	FILTER RECYC.	98033807	No	12/22/98	8
12	**8200**<<

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784683 | Manifest Document No: 9 1 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone 562 946-6427

A State Manifest Document Number: 21705750

B. State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.

6 US EPA ID Number: CAD982444481

C. State Transporter's ID [Reserved]:

D Transporter's Phone: (909)873-4141

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: (909)421-2012

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 Number
a. Non-RCRA hazardous waste solid (Pads/ Oil)	002	C F	01900	P	State 352
					EPA/Other NONE
					State
					EPA/Other
					State
					EPA/Other
					State
					EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING / TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325

K Handling Codes for Wastes Listed Above
a 14/01 b
c d

15 Special Handling Instructions and Additional Information
: Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
JOHN HOUCK		12	28	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DANIEL MURRAY		12	28	01

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	Signature	Month	Day	Year
Steven Masters		12	31	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

GENERATOR

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

21705750

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

21705750

IN CASE OF 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 0 5 1 4 8 2 7 8 4 6 8 3 9 1
Manifest Document No:
2 Page 1 of 1
Information in the shaded areas is not required by Federal law.

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6422

A State Manifest Document Number: 21705750
B. State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD 9 8 2 4 4 4 4 8 1
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
190 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD 9 8 2 4 4 4 4 8 1
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	C	01200	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-421-2038

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	Signature	Month	Day	Year
John Houck		12	26	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
David Mulvaney		12	28	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

21330222

IN CASE OF 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: CAD051482784659 80 | Manifest Document No | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 21330222
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved.]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	00400	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING / TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above: PROFILE # 97052325
K Handling Codes for Wastes Listed Above: a 1470T b c d

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

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	Signature	Month	Day	Year
Bill Lamey	Bill Lamey	10	19	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Pool		10	19	01

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	Signature	Month	Day	Year
Steven Masters		10	22	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California – Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

21330222

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

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD059148273465980
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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 21330222
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D. Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G. State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	004	CF	00700	P	State 352 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325

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

15 Special Handling Instructions and Additional Information
Wash Applicable personal protective clothing
24 hour emergency contact phone # 1-909-721-2038

[redacted]

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	Signature	Month	Day	Year
Bill Lamey	Bill Lamey	1	9	01

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Ohl		1	9	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-92)
Please print or type - Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20771697

IN CASE OF 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: CAD051482784650 81
Manifest Document No:
2 Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20771697
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	D M	01200	P	State 352 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING / TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above: Absorbent PROFILE # 97052525
K Handling Codes for Wastes Listed Above: a 14/01 b c d

15 Special Handling Instructions and Additional Information: Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

[redacted]

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	Signature	Month	Day	Year
John Houck		09	18	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dennis Woodward		09	18	01

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	Signature	Month	Day	Year
Steven Masters		09	19	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20771697

IN CASE OF 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: CAD051482734650811 | Manifest Document No | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20771697
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone (909)875-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	D	M 01200	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above: Absorbent PRODUCT # 97052325

K Handling Codes for Wastes Listed Above
a | b
c | d

15 Special Handling Instructions and Additional Information: clothing
24 hour emergency contact phone # 1-909-721-2038

[redacted]

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	Signature	Month	Day	Year
James Howell	[signature]	09	18	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Curtis Woodward	[signature]	09	18	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD057482784	95168		

3 Generator's Name and Mailing Address	A State Manifest Document Number
MK SO CAL INT 9028 DICE RD SANTA FE SPRINGS CA 4 Generator's Phone (562) 906-2211	21195168 B State Generator's ID

5 Transporter 1 Company Name	6 US EPA ID Number	C State Transporter's ID [Reserved]
WESTERN ENVIRONMENTAL	CA0000090450	D Transporter's Phone (626)339-2340
7 Transporter 2 Company Name	8 US EPA ID Number	E State Transporter's ID [Reserved]
		F Transporter's Phone

9 Designated Facility Name and Site Address	10 US EPA ID Number	G State Facility's ID
DK ENVIRONMENTAL 3650 26TH ST LOS ANGELES CA 90023	CAT080033681	H Facility's Phone (323)268-5056

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 Number
a. HAZARDOUS WASTE LIQUID, N O S (CHROMIUM), 9, NA3082, PGIII	001	TT	03800	G	State 135 EPA/Other D007
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

DK ENVIRONMENTAL FACILITY IN LOS ANGELES, CALIFORNIA HAS THE APPROPRIATE PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED OUR EPA NUMBER IS CAT080033681

J Additional Descriptions for Materials Listed Above	K Handling Codes for Wastes Listed Above	
11A. WASTEWATER W/CHROME PROFILE # 310906-25	a. 01	b.
	c.	d.

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY RESPONSE TELEPHONE # (323)268-5056, (323) 857-7522, CONTACT DESMOND PHILLIP
WEAR PROPER PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
Matt Guerrero (On Behalf of Generator)		09	06	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Matt Guerrero		09	06	01

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	Signature	Month	Day	Year
ERIC MAJOR		09	06	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

GENERATOR

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

21195168

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

KIK SO CAL INT.

Manifest No: 21195168 **Date: 09/06/01**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U.S. Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph P. Balfour **Date: 09/14/01**

NON-HAZARDOUS WASTE MANIFEST	1 Generator's US EPA ID No.	Manifest Document No. 9 2 8 2 2	2. Page 1 of 1	Po # 81948

3. Generator's Name and Mailing Address
KIK SOCAL INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4. Generator's Phone (562) 946-6427

5. Transporter 1 Company Name	6 US EPA ID Number	A Transporter's Phone
CIRCLE GREEN ENVIRONMENTAL		(626)398-4400
7 Transporter 2 Company Name	8. US EPA ID Number	B. Transporter's Phone
WESTERN ENVIRONMENTAL		(626)339-2340
9. Designated Facility Name and Site Address D/K ENVIRONMENTAL 3650 E.26TH ST. LOS ANGELES, CA 90023	10 US EPA ID Number	C Facility's Phone (323)268-5056

11. Waste Shipping Name and Description	12 Containers No.	Type	13 Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, LIQUID	001	TT	03800	G
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above	E Handling Codes for Wastes Listed Above
11.A CLARIFIER WASTEWATER AND SLUDGE	

15 Special Handling Instructions and Additional Information

USE OSHA APPROVED SAFETY PRECAUTIONS

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
Daniel Johnson		7	12	01

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Daniel Ruiz		09	06	01

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MATT GUERRERO		09	06	01

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR

TRANSPORTER

FACILITY

Printed by J.H. KELLER & ASSOCIATES, INC. (800) 227-8566 Nashville, NC (252) 459-7856

GENERATOR'S COPY

KK-2 BLS C5 Rev. 1/97

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20776432

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RES SE CENTER 1-800-424-8802 WITHIN CALIFORNIA, CALL 1-800-852-755

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784638 — Manifest Document No: 91
2 Page 1 of 1
Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20776432
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF ~~DM~~	4000	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING / TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325

K Handling Codes for Wastes Listed Above
a 14-01
b
c
d

15 Special Handling Instructions and Additional Information
* Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

Bill To: Circle Green

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	Signature	Month	Day	Year
Priscilla Prentiss		09	06	01

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Pool		09	06	01

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	Signature	Month	Day	Year
Steven Masters		09	07	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20776432

IN CASE OF 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 0 5 1 4 8 2 7 8 4 6 3 3 9 1
Manifest Document No
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20776432
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD 9 8 2 4 4 4 4 8 1
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD 9 8 2 4 4 4 4 8 1
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CF	01000	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
[illegible]	[signature]	05	16	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Gary Dahl	[signature]	05	16	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20772640

IN CASE OF 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: CAD054827846312 — Manifest Document No:

2 Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
KIK International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

A State Manifest Document Number: 20772640

4 Generator's Phone (562) 946-6427

B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.

6 US EPA ID Number: CAD982444481

C State Transporter's ID [Reserved]:

D Transporter's Phone: (909)873-4141

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil) THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481	001	CF	00800	P	State 352 / EPA/Other NONE
b NON-RCRA HAZARDOUS WASTE LIQUID (Pads/OIL)	001	BA	00300	P	State 352 / EPA/Other NONE
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
IIa.) Absorbent PROFILE # 97052325
IIb.) ABSORBENT PROFILE # 97052325

K Handling Codes for Wastes Listed Above
a 14-01 b 14-01 c d

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
Santiago E. Hernandez	Santiago E. Hernandez	06	29	01

TRANSPORTER

17 Transporter Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dan Simmonds		06	29	01

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	Signature	Month	Day	Year
Steven Masters		07	02	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482734631 | Manifest Document No: 20772640 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
KIK International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20772640
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address: Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/Oil)	001	CF	00800	P	State 352 / EPA/Other NONE
b NON-RCRA HAZARDOUS WASTE SOLID (PADS/OIL)	001	BA	00800	P	State 352 / EPA/Other NONE
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a.) Absorbent PROFILE # 97052325
11b.) ABSORBENT PROFILE # 97052325

K Handling Codes for Wastes Listed Above
a | b | c | d

15 Special Handling Instructions and Additional Information
Wear Appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
Sandiego Commander		06	29	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DAN SIMMONDS		06	29	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

20772640

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20772042

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

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD059148278460552
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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20772042
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone (909)873-4141

7 Transporter 2 Company Name:
8 US EPA ID Number:
E State Transporter's ID [Reserved]
F Transporter's Phone -

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CW	800	P	State 352
					EPA/Other NONE
b					State
					EPA/Other
c					State
					EPA/Other
d					State
					EPA/Other

THIS WASTE STREAM HAS BEEN [illegible] FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J1 Additional Descriptions for Materials Listed Above: Absorbent
K Handling Codes for Wastes Listed Above: a 01-14 b c d

15 Special Handling Instructions and Additional Information
best appropriate protective clothing
24 hour emergency contact phone # 1-909-721-2038

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	Signature	Month	Day	Year
Santiago E. Hernandez	Santiago E. Hernandez	04	16	01

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dan Sim Mands		04	16	01

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	Signature	Month	Day	Year
Scott Seaman		04	17	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051482784	05512		

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20772042
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (Pads/ Oil)	002	CW	03000	P	State: 352 / EPA/Other: NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above: 11a.) Aberdeen Profile # 97052325

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

16 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
24 hour emergency contact phone # 1-909-421-2038

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	Signature	Month	Day	Year
Santiago F. Hernandez		04	16	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DAN SIM MONDS		04	16	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

20772042

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20596926

IN CASE OF 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: CAD051482784583 | 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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20596926
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent) THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481	002	C F	00800 P	DM E	State 352 / EPA/Other NONE
b				D	State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 57052325

K Handling Codes for Wastes Listed Above
a. D14 b.
c. d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038

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	Signature	Month	Day	Year
Jim Rissman	Jim Rissman	01	16	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD		01	16	01

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	Signature	Month	Day	Year
		01	17	01

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20596926

IN CASE OF 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: CAD051482784 — Manifest Document No: 58373 — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20596926
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc. — 6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

7 Transporter 2 Company Name — 8 US EPA ID Number
E State Transporter's ID [Reserved]:
F Transporter's Phone:

8 Designated Facility Name and Site Address: Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent)	002	C F	00800	P	State: 352 / EPA/Other: NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a — b
c — d

15. Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038
[redacted]

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	Signature	Month	Day	Year
Jim Rissman	[signature]	01	16	01

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Curtis Woodward	[signature]	01	16	01

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

AZUSA LAND RECLAMATION
Azusa, CA 91702
(626) 334-0719
(626) 969-1529 Fax

No. 1740

NON-HAZARDOUS WASTE DATA FORM

TO BE COMPLETED BY GENERATOR

NAME KIK SOCAL INC.

ADDRESS 9028 DICE RD. EPA I.D. NO. CIAID 0 5 3 1 4 8 2 0 7 8

CITY STATE ZIP SANTA FE SPRINGS, CA 90670 PHONE NO. 562) 906-2215

CONTAINERS: No. _____ VOLUME/CY _____ WEIGHT/TONS _____

TYPE: ☐ TANK TRUCK ☒ DUMP TRUCK ☐ DRUMS ☐ CARTONS ☐ OTHER _____

WASTE DESCRIPTION ASBESTOS CONTAINING TILE GENERATING PROCESS REMOVAL OF FLOORING

COMPONENTS OF WASTE	PPM %	COMPONENTS OF WASTE	PPM %
1 TILE	UNKNOWN	3	
2		4	

VOC-OVA READINGS _____

SITE VERIFICATION

PROPERTIES pH _____ ☒ SOLID ☐ LIQUID ☐ SLUDGE ☐ SLURRY ☐ OTHER _____

HANDLING INSTRUCTIONS USE OSHA APPROVED SAFETY PRECAUTIONS

THE GENERATOR CERTIFIES THAT THE WASTE AS DESCRIBED IS 100% NON-HAZARDOUS.

JOHN HOLCA — TYPED OR PRINTED FULL NAME & SIGNATURE — DATE

TRANSPORTER

NAME CIRCLE GREEN ENVIRONMENTAL, INC. EPA I.D. NO. CIAID 9 8 1 6 8 8 3 11

ADDRESS 732 N. LAKE AVE. SERVICE ORDER NO 92781

CITY, STATE, ZIP PASADENA, CA 91104 PICK UP DATE 5/4/01

PHONE NO (626 398-4400 — TYPED OR PRINTED FULL NAME & SIGNATURE JOHN YACKO — DATE 5-4-01

TRUCK UNIT I.D. NO CRCLE 1

TSD FACILITY

NAME AZUSA LAND RECLAMATION EPA I.D. NO. C A D 0 0 9 0 0 7 6 2 6

ADDRESS 1211 W. GLADSTONE STREET DISPOSAL METHOD ☒ LANDFILL ☐ OTHER _____

CITY, STATE, ZIP AZUSA, CA 91702

PHONE NO (626) 334-0719 — TYPED OR PRINTED FULL NAME & SIGNATURE — DATE 5/7/01

GEN	OLD/NEW	L	A	TONS 2.6
TRANS		S	B	
D/O		BY/CD		HW# NONE

DISCREPANCY

White & Yellow - TSD COPY Pink - GENERATOR COPY Goldenrod - TRANSPORTER COPY

AZUSA LAND RECLAMATION
A USA WASTE SERVICES COMPANY

Azusa, CA 91702
(626) 334-0719
(626) 969-1529 Fax

No. 1740

NON-HAZARDOUS WASTE DATA FORM

TO BE COMPLETED BY GENERATOR

NAME KIK SOCAL INC.

ADDRESS 9028 DICE RD. EPA ID NO C|A|D|0|5|1|1|4|8|2|7|8|4

CITY, STATE, ZIP SANTA FE SPRINGS, CA 90670 PHONE NO. 562) 906-2215

CONTAINERS: No. _____ VOLUME/CY _____ WEIGHT/TONS _____

TYPE: ☐ TANK TRUCK ☒ DUMP TRUCK ☐ DRUMS ☐ CARTONS ☐ OTHER _____

WASTE DESCRIPTION ASBESTOS CONTAINING TILE GENERATING PROCESS REMOVAL OF FLOORING

COMPONENTS OF WASTE	PPM %	COMPONENTS OF WASTE	PPM %
1 TILE	UNKNOWN	3	
2		4	

VOC-OVA READINGS _____

SITE VERIFICATION

PROPERTIES pH ____ ☒ SOLID ☐ LIQUID ☐ SLUDGE ☐ SLURRY ☐ OTHER _____

HANDLING INSTUCTIONS USE OSHA APPROVED SAFETY PRECAUTIONS

THE GENERATOR CERTIFIES THAT THE WASTE AS DESCRIBED IS 100% NON-HAZARDOUS.

JOHN HOUCK _____ _____
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME CIRCLE GREEN ENVIRONMENTAL, INC. EPA ID NO C|A|D|9|8|1|1|6|8|8|0|1|6

ADDRESS 732 N.LAKE AVE. SERVICE ORDER NO. 92781

CITY STATE ZIP PASADENA, CA 91104 PICK UP DATE 5/4/01

PHONE NO (626) 398-4400 JOHN YACKO 5-4-01
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRUCK, UNIT I D NO CRCLE 1

TSD FACILITY

NAME AZUSA LAND RECLAMATION EPA ID NO C A D 0 0 9 0 0 7 6 2 6

DISPOSAL METHOD

ADDRESS 1211 W. GLADSTONE STREET ☐ LANDFILL ☐ OTHER _____

CITY, STATE ZIP AZUSA, CA 91702

PHONE NO (626) 334-0719

_____ _____
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN	OLD/NEW	L	A	TONS
TRANS		S	B	
C/Q		RT/CD		HWDF NONE

DISCREPANCY

White & Yellow - TSD COPY Pink - GENERATOR COPY Goldenrod - TRANSPORTER COPY

DRUMS SHIPPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST #	OUTOF STATE	DATE	NO
				Reporting Period:	Jan - Dec	1998		
1	1000	A/B Pads	01	FILTER RECYC.	97422710	No	01/23/98	1
2	1600	O& A/B Pads	02	FILTER RECYC.	97422248	No	03/20/98	2
1	550	A/B Pads	01	FILTER RECYC.	97420485	No	05/21/98	3
2	1200	O& A/B Pads	02	FILTER RECYC.	97420737	No	06/24/98	4
2	1000	Oil Pads	02	FILTER RECYC.	98033185	No	08/17/98	5
1	250	Waste water	01	INDUST.SER. OIL	98074453	No	08/26/98	6
1	1200	Oil Pads	01	FILTER RECYC.	98033287	No	10/21/98	7
2	1400	O& A/B Pads	02	FILTER RECYC.	98033807	No	12/22/98	8
12	**8200**	**<<

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20598761

E CENTER 1-800-424-8802: WITHIN CALIFORNIA, CALL 1-800-852-7550

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESP

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784569715
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
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 946-6427

RECEIVED
DEC 18 2000

State Manifest Document Number: 20598761
B State Generator's ID:
C State Transporter's ID [Reserved.]
D Transporter's Phone: (909)873-4141
E State Transporter's ID [Reserved.]
F Transporter's Phone:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481

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

8 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent)	002	C F	00850	P	State: 352
					EPA/Other: NONE
b					State:
					EPA/Other:
c					State:
					EPA/Other:
d					State:
					EPA/Other:

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a: 01-14
b:
c:
d:

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038

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	Signature	Month	Day	Year
JOHN HOUCK		11	14	00

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD		11	14	00

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	Signature	Month	Day	Year
Scott Seaman		11	15	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20598761

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

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051432784569 F 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
Rik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20598761
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone (909)573-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent)	002	C F	00850	P	State: 352 / EPA/Other: NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038
[redacted]

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	Signature	Month	Day	Year
JOHN HOUCK	[signature]	1	1	00

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD	[signature]	1	1	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
CAD098145279	41832		

3. Generator's Name and Mailing Address
KIK SO-CAL INC.
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670

4. Generator's Phone (562) 906-2263

A. State Manifest Document Number: **20218320**

B. State Generator's ID:

C. State Transporter's ID (Required):

D. Transporter's Phone:

E. State Transporter's ID (Required):

F. Transporter's Phone:

G. State Facility's ID: CA00 9 9 45 27 F F

H. Facility's Phone: (562) 699-6577

5. Transporter 1 Company Name: **WESTERN ENVIRONMENTAL**
6. US EPA ID Number: CAQ000090450

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

9. Designated Facility Name and Site Address
INDUSTRIAL SERVICE OIL
1700 SOUTH SOTO STREET
LOS ANGELES, CA 90023
10. US EPA ID Number: CAD009945270 8

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 Number
a. NON RCRA HAZARDOUS WASTE LIQUID	001	T	00300	G	State 223 EPA/Other CA ONLY
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
WASTE WATER & OIL
E.R.G. NO.: NONE

K. Handling Codes for Wastes Listed Above
a. C
c.
d.

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
X JOHN HOWICK	X	10	10	00

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
RICK FIKE		10	10	00

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	Signature	Month	Day	Year
		10	10	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out of state produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

CYCLOTRON

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051482784	18320		

GENERATOR

3 Generator's Name and Mailing Address
KIK SO-CAL INC.
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670
4 Generator's Phone 562) 906-2253

A State Manifest Document Number: 20218320
B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL
6 US EPA ID Number: CAQ000090540
C State Transporter's ID [Reserved]:
D Transporter's Phone: (626) 339-2340

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

9 Designated Facility Name and Site Address
INDUSTRIAL SERVICE OIL
1700 SOUTH SOTO STREET
LOS ANGELES, CA 90023
10 US EPA ID Number: CAD099452708
G State Facility's ID:
H Facility's Phone: (562) 598-5577

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 Number
a NON RCRA HAZARDOUS WASTE LIQUID	001	T	00300	G	State 223 / EPA/Other CA ONLY
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
WASTE WATER & OIL
E.R.G. NO.: NONE

K Handling Codes for Wastes Listed Above
a
b
c
d

15 Special Handling Instructions and Additional Information
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
X John Hook	X	10	10	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Rick F. Fe		10	10	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

20218320

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20514997

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482718 Manifest Document No: 18947

2 Page 1 of 1

Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
KIK ENTERPRISES
9028 DICE ROAD SANTA FESSPRINGS, CA. 90670

4 Generator's Phone (626) 398-4400

A State Manifest Document Number: 20514997

B State Generator's ID

5 Transporter 1 Company Name: ROMIC ENVIRONMENTAL TECHNOLOGIES
6 US EPA ID Number: CAL000113451
C State Transporter's ID [Reserved.]
D Transporter's Phone: (626) 334-1835

OCT 11 2000

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

9 Designated Facility Name and Site Address: ROMIC ENVIRONMENTAL TECHNOLOGIES
16117 MONTOYA STREET
IRWINDALE, CA. 91702
10 US EPA ID Number: CAL000113451
G State Facility's ID: CAL000113451
H Facility's Phone: (626)334-1835

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 Number
a ETHYLENE GLYCOL SOLUTION, ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S., 9, UN3082 PGIII (ETHYLENE GLYCOL)	001	TT	00110	G	State 343 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
WASTE ETHYLENE GLYCOL (ANTIFREEZE)

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

15. Special Handling Instructions and Additional Information
GLOVES AND PROTECTIVE CLOTHING. ROMIC PROFILE NO. 201111
EMERGENCY RESPONSE PHONE (650) 324-1638

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	Signature	Month	Day	Year
Jim Rissman		10	03	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Manuel Velo		10	03	00

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	Signature	Month	Day	Year
Anastasia Pavlett		10	03	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700--22

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

20514997

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

20514997

IN CASE OF 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: CAD051482784149 | Manifest Document No: 97 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
KIK ENTERPRISES
9028 DICE ROAD SANTA FESSPRINGS, CA. 90670
4 Generator's Phone (626 398-4400

A State Manifest Document Number: 20514997
B State Generator's ID:

5 Transporter 1 Company Name: ROMIC ENVIRONMENTAL TECHNOLOGIES
6 US EPA ID Number: CAL000011345 1
C State Transporter's ID [Reserved.]
D Transporter's Phone: (626) 334-1835

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

9 Designated Facility Name and Site Address: ROMIC ENVIRONMENTAL TECHNOLOGIES
16117 MONTOYA STREET
IRWINDALE, CA. 91702
10 US EPA ID Number: CAL000011345 1
G. State Facility's ID: CAL000011345 1
H Facility's Phone: (626) 334-1835

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 Number
ETHYLENE GLYCOL SOLUTION, ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S., 9, UN3082 PGIII (ETHYLENE GLYCOL)	001	TT	1000	G	State 343 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
WASTE ETHYLENE GLYCOL (ANTIFREEZE)

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

15 Special Handling Instructions and Additional Information
GLOVES AND PROTECTIVE CLOTHING. ROMIC PROFILE NO. 201111
EMERGENCY RESPONSE PHONE (650) 324-1638

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	Signature	Month	Day	Year
X Jim Rissman		01	03	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Manuel Valor		01	03	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type. *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
CAD051482784	7213610		

3. Generator's Name and Mailing Address

[illegible] EL MONTE SPRINGS, CA 91733

4. Generator's Phone ( ) [illegible]240

5. Transporter 1 Company Name — 6 US EPA ID Number

[illegible] TRANSPORTATION CORP — CAD009915548

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

9. Designated Facility Name and Site Address — 10 US EPA ID Number

INDUSTRIAL SERVICE OIL
1700 S. SOTO ST.
LOS ANGELES, CA 90023 — CAD009945708

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
a. [illegible] HAZARDOUS WASTE, LIQUID	1	TP	00550	G
b.				
c				
d.				

Additional Descriptions for Materials Listed Above — Handling Codes for Wastes Listed Above

WASTEWATER AND OIL
E-NO. NO. NONE

15 Special Handling Instructions and Additional Information

24 HOUR EMERGENCY CONTACT: [illegible]
USE OSHA APPROVED SAFETY PRECAUTIONS

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	Signature	Month	Day	Year
[illegible]	[signature]	09	29	95

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	09	29	95

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	Signature	Month	Day	Year
[illegible] HAPNOT	[signature]	09	29	95

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/95)
EPA 8700—22

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-0

958723600

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type. *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No.	Manifest Document No	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
CADOS148278472360			

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

95872360

GENERATOR

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

5. Transporter 1 Company Name — 6. US EPA ID Number: CA0000904540

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

9. Designated Facility Name and Site Address — 10. US EPA ID Number
INDUSTRIAL SERVICE OIL
1700 S. SOTO ST.
LOS ANGELES, CA. 90023
CAD099152708

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
a.	1	12	00550	G
b.				
c.				
d.				

J. Additional Descriptions for Materials Listed Above — K. Handling Codes for Wastes Listed Above

WASTEWATER AND OIL
N.O.S. NON-RCRA

15 Special Handling Instructions and Additional Information

24 HR. EMERGENCY CONTACT: [illegible] (24) [illegible]
USE APPROVED SAFETY PROCEDURES

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	Signature	Month	Day	Year
[illegible]	[illegible]	07	21	95

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	07	21	95

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)
EPA 8700—22

Yellow. GENERATOR RETAINS

State California—Environmental Protection Agency
Form pproved OMB No 2050-0039 (Expires 9-30-99)
Pleas print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784551 Manifest Document No: 83 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
PIR International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20051741

B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc. | 6 US EPA ID Number: CAD982444481

C State Transporter's ID [Reserved]:

D Transporter's Phone: (909)873-4141

7 Transporter 2 Company Name | 8 US EPA ID Number

E. State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
130 W. Monte Avenue
Rialto, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent)	002	CF	02000	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a 01-14 | b | c | d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038
BILL TO: CIRCLE GREEN

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	Signature	Month	Day	Year
JOHN HOUCK		08	28	00

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOHN KERSCHEN		08	28	00

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19 Discrepancy Indication Space
9:30

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

Printed/Typed Name	Signature	Month	Day	Year
Scott Sievers		08	29	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

20051741

State of California—Environmental Protection Agency
Form A proved OMB No 2050-0039 (Expires 9-30-99)
Please rint or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD 0 5 1 4 8 2 7 8 4	5 1 8 3		

20051741

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802· WITHIN CALIFORNIA, CALL 1-800-852-7

GENERATOR

3 Generator's Name and Mailing Address
Fik International
9026 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6424

A State Manifest Document Number: **20051741**
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9. Designated Facility Name and Site Address
Filter Recycling Services, Inc.
130 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent)	002	P	02000	P	State 352 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2032
BILL TO: CIRCLE GREEN

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	Signature	Month	Day	Year
JOHN HOUCK		05	26	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOHN KENSCHEN		05	26	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700--22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051148278453729		1 of 1	

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: **20041581**
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent)	002	C F	00800	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN [illegible] FOR RECYCLING AT THE FILTER RECYCLING FACILITY IN RIALTO CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a 14/01
b
c
d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038

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	Signature	Month	Day	Year
PRISCILLA PRENTISS		06	29	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VanAlstin		06	29	00

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	Signature	Month	Day	Year
Scottie Sizemore		06	30	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

20041581

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD052148275	32 29	1 of 1	

GENERATOR

3 Generator's Name and Mailing Address
Kik International
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: **20041581**

B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444881

C State Transporter's ID [Reserved]:

D Transporter's Phone: (909)873-4141

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

E State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444881

G State Facility's ID:

H Facility's Phone: (909)421-2012

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 Number
a. Non-RCRA hazardous waste solid (absorbent)	002	C	00800	P	State 992 / EPA/Other NONE
b.					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052225

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038

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	Signature	Month	Day	Year
Priscilla Robles		06	29	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VanAlstine		06	29	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

20041581

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784 | Manifest Document No: 18011 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

20218011

GENERATOR

3 Generator's Name and Mailing Address
KIK SO-CAL INC.
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2253

A State Manifest Document Number: 20218011

B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL

6 US EPA ID Number: CAO000090540

C State Transporter's ID [Reserved]:

D Transporter's Phone: (626) 339-2340

7 Transporter 2 Company Name:

8 US EPA ID Number:

E. State Transporter's ID [Reserved]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
D/K ENVIRONMENTAL
3650 EAST 26th STREET
VERNON, CA 90023

10 US EPA ID Number: CAT080033681

G State Facility's ID: CAT080033681

H Facility's Phone: (323) 268-5056

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 Number
a. NON RCRA HAZARDOUS WASTE LIQUID	001	TT	013000	G	State 135 / EPA/OA ONLY
b. THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE D/K ENVIRONMENTAL FACILITY IN LOS ANGELES, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAT080033681					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J Additional Descriptions for Materials Listed Above
PROFILE NO.: ~~[illegible]~~ NONE 281208-24
E.R.G. NO.:
WASTE WATER, OIL, MUD

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

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: TOM TICE (626) 339-2340
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
X Charles Hamphill	X	05	13	10

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Rick Fite		05	13	00

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space
11A) RECD 7085

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

Printed/Typed Name	Signature	Month	Day	Year
Martin Currin		05	13	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

20218011

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

KIK SO-CAL INC

Manifest No:20218011 **Date: 05/13/00**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U.S. Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph P. Balfour **Date:** 05/25/00

State of California—Environmental Protection Agency
Form Approved OMB No 2050–0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784 | Manifest Document No: 18011 | 2 Page 1 of 1 | *Information in the shaded areas is not required by Federal law*

3 Generator's Name and Mailing Address
KIK SO-CAL INC.
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2253

A State Manifest Document Number: 20218011

B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL.

6 US EPA ID Number: CAO000090540

C State Transporter's ID [Reserved]:

D Transporter's Phone: (626) 339-2340

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID [Reserved.]:

F Transporter's Phone:

9 Designated Facility Name and Site Address
DIK ENVIRONMENTAL
3650 EAST 26th STREET
VERNON, CA 90023

10 US EPA ID Number: CAT080033681

G State Facility's ID:

H Facility's Phone: (323) 268-5056

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 Number
a. NON RCRA HAZARDOUS WASTE LIQUID	001	TT	01300	G	State 135 / EPA/Other ONLY
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J Additional Descriptions for Materials Listed Above
PROFILE NO.:
E.R.G. NO.: NONE
WASTE WATER, OIL, MUD

K Handling Codes for Wastes Listed Above
a | b
c | d

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: TOM TICE (626) 339-2340
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
X Charles Hamphill	X	05	13	10

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		05	13	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	Signature	Month	Day	Year

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

20218011

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784525 | Manifest Document No: 83 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik Socal
9028 Dice Road
Santa Fe Springs, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20040945
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste liquid (RHODASURF)		DM	00165	G	State 343 EPA/Other NONE
b NON-RCRA HAZARDOUS WASTE SOLID (ABSORBENT PADS)		DM	00700	P	State 352 EPA/Other NONE
c					State EPA/Other
d					State EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above
11A) RHODASURF PROFILE#00051204
11B) ABSORBENT PADS PROFILE # 97052325

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

15 Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE CLOTHING
24 HOUR EMERGENCY NUMBER 1-909-721-2038

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	Signature	Month	Day	Year
JOHN HOUCK		05	15	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD		05	15	00

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	Signature	Month	Day	Year
Sirak Sirano		05	16	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

20040945

GENERATOR

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051482784525	83		

GENERATOR

3 Generator's Name and Mailing Address
Kik Socal
9028 Dice Road
Santa Fe Springs, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: **20040945**
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste liquid(RHODASURF)	003	D M	00165	G	State 343 EPA/Other NONE
b NON-RCRA HAZARDOUS WASTE SOLID (ABSORBENT PADS)	001	CF	00700	P	State 352 EPA/Other NONE
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
11A) RHODASURF PROFILE#00051204
11B) ABSORBENT PADS Profile #_____

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

15 Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE CLOTHING
24 HOUR EMERGENCY NUMBER 1-909-721-2038

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	Signature	Month	Day	Year
JOHN HOUCK		05	15	10

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD		05	15	10

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

20040945

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98769569

IN CASE OF 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: CAD051482764695	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
KIK INTERNATIONAL SO. CAL.
9026 DICE ROAD, SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

A State Manifest Document Number: 98769569

B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL

6 US EPA ID Number: CAD009045400

C State Transporter's ID:

D Transporter's Phone: (626) 339-2340

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
INDUSTRIAL SERVICE OIL
1700 SOUTH SOTO STREET
LOS ANGELES, CA 90023

10 US EPA ID Number: CAD099452708

G State Facility's ID:

H Facility's Phone: (562) 598-5577

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 Number
a. NON RCRA HAZARDOUS WASTE LIQUID	001	TT	00300	G	State 223 / EPA/Other CA ONLY
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
WASTE WATER & OIL
E.R.G. NO.: NONE

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

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT. TOM TICE (626) 339-2340
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
X John Hick	X	04	27	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
TIM TICE		04	27	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

Industrial Service Oil Co. — Inc.

PETROLEUM PRODUCTS
BUYERS AND SELLERS

P.O. BOX 1158 • DOWNEY, CA 90240 • OFFICE (310)869-9667

FAX 310/923-9855

RESTRICTED WASTE NOTIFICATION STATEMENT

GENERATOR NAME: Kik Int'l

GENERATOR ADDRESS: 9028 Dice Rd.

GENERATOR EPA ID NUMBER: CAD 051 482 784

MANIFEST NUMBER: 98769569

TREATMENT FACILITY: Industrial Service Oil Company, Inc.

The following manifested wastes are subject to the Land Disposal Restrictions of CCR Title 22, Section 66268.

____ USEPA D Code Wastes (Description below)

____ Antifreeze (Ethylene Glycol)

X Organic Liquids (Non-Chlorinated)

____ Organic Liquid and Water Solution

____ Other - (Describe below)

Waste Code: EPA or Calif.	Wastewater or Non-Wastewater	Regulated Hazardous Constituent	Treatment Standard
223	N/W	None	Recycle

The wastes DO NOT comply with the treatment standards specified in 2 CCR 66268. A signature is not required below.

Check one:

Waste Analysis ____ is available and attached.
Waste Analysis X is not available.

9/

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784 | Manifest Document No: 51716 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik Socal
9028 Dice Road
Santa Fe Springs, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20040044
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent) THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481	002	C F ~~D~~ ~~H~~	02000	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a 14/01
b
c
d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038

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	Signature	Month	Day	Year
JOHN HOUCK		04	10	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOHN KERSCHEN		04	10	00

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	Signature	Month	Day	Year
Sonia Silvano		04	11	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/99)
EPA 8700—22

GENERATOR

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

20040044

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784517 | Manifest Document No: 6 17 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik Socal
9028 Dice Road
Santa Fe Springs, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 20040044
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a Non-RCRA hazardous waste solid (absorbent)	002	CF	02000	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a | b | c | d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response 1-909-721-2038

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	Signature	Month	Day	Year
JOHN KIRK		04	10	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOHN KEILSCH		04	10	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

20040044

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

California—Environmental Protection Agency
Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type · Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784694 03 | 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
KIK INTERNATIONAL SO. CAL.
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 906-2240

A State Manifest Document Number: 98769403
B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL
6 US EPA ID Number: CAD000090450
C State Transporter's ID:
D Transporter's Phone: (626) 339-2340

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
CROSBY & OVERTON
1630 WEST 17TH STREET
LONG BEACH, CA 90813
10 US EPA ID Number: CAD028409019
G State Facility's ID: CAD028409019
H Facility's Phone: (800) 827-6729

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 Number
a NON RCRA HAZARDOUS WASTE LIQUID	001	T	00300	G	State: 135 / EPA/Other: CA ONLY
b THE REFERENCED WASTE WAS RECEIVED AND TREATED TO STANDARDS MANDATED BY THE FEDERAL CLEAN WATER ACT AND EFFLUENT REQUIREMENTS SET FORTH BY THE LOS ANGELES COUNTY SANITATION DISTRICTS. WASTE TREATMENT IS PERFORMED UNDER PERMITS GRANTED TO CROSBY & OVERTON INC. BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL TOGETHER WITH THE ENVIRONMENTAL PROTECTION AGENCY IN ACCORDANCE WITH THE PROVISIONS OF THE RESOURCE CONSERVATION AND RECOVERY ACT OF 1976 TOGETHER WITH APPLICABLE FEDERAL AND STATE REGULATIONS. CROSBY & OVERTON HAS ALL OF THE NECESSARY PERMITS TO ACCEPT THE REFERENCED WASTE AND ALL THE WASTE HAS BEEN HANDLED IN ACCORDANCE WITH RCRA AND PROPOSITION 65, SUCH THAT THE CERTIFICATE HOLDER'S LIABILITY HAS BEEN TERMINATED					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
WASTE WATER
E.R.G. NO.: NONE

K Handling Codes for Wastes Listed Above
a 15 | b | c | d

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: TOM TICE (626) 339-2340
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
Jim RISSMAN	Jim Rissman	02	04	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Rick Fite		02	04	00

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	Signature	Month	Day	Year
FIDEL MALDONADO		02	04	00

DO NOT WRITE BELOW THIS LINE.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700-22

GENERATOR

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

98769403

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784694 03 | Manifest Document No | 2 Page 1 of | Information in the shaded areas is not required by Federal law

98769403

GENERATOR

3 Generator's Name and Mailing Address
KIK INTERNATIONAL SO. CAL.
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

A State Manifest Document Number: 98769403

B. State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL

6 US EPA ID Number: CAD000090540

C State Transporter's ID:

D Transporter's Phone: (626) 339-2340

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
CROSBY & OVERTON
1630 WEST 17TH STREET
LONG BEACH, CA 90813

10 US EPA ID Number: CAD028409019

G State Facility's ID:

H Facility's Phone: (800) 827-6729

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 Number
a NON RCRA HAZARDOUS WASTE LIQUID	001	T T	00300	G	State 135 / EPA/Other CA ONLY
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
WASTE WATER
E.R.G. NO.: NONE

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

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: TOM TICE (626) 339-2340
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
Jim Fitzsimmons				

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Pat Fite		02	04	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

98769403

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD052141487 | Manifest Document No: 45002 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kirk Socal
9028 Dice Road
Santa Fe Springs, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 99569607
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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	Waste Number
a. Non-RCRA hazardous waste solid (absorbent)	001	CF	1500	F	State 352 EPA/Other NONE
b. THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

12 Special Handling Instructions for Materials Listed Above: PROFILE# 97052325
K Handling Codes for Wastes Listed Above: a. 01 b. c. d.

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response 1-909-721-2045
BILL TO: CIRCLE GREEN ENVIRONMENTAL

RECEIVED FEB 23 ... DISPOSAL

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	Signature	Month	Day	Year
JOHN HOUCK		01	13	00

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VANASTINE		01	13	00

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	Signature	Month	Day	Year
Sarah Simmons		02	01	00

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

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

99569607

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD041482784502 | 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
Kik Socal
9023 Dice Road
Santa Fe Springs, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 99569607
B State Generator's ID:
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141
E State Transporter's ID [Reserved]:
F Transporter's Phone:
G State Facility's ID:
H Facility's Phone: (909)421-2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

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 Number
a *Non-RCRA hazardous waste solid (absorbent)	001	CF	1500	P	State 352 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above: PADS/OIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear appropriate protective clothing
ERG# 9) 128
24-Hour Emergency Response 1-909-721-2045
BILL TO: CIRCLE GREEN ENVIRONMENTAL

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	Signature	Month	Day	Year
JOHN HOUCK		01	31	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M. B VANAST		01	31	00

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

99569607

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

FORM IC

OMB# 2050-0024 Expires 10/30/2000

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: KIK International

U. S. EPA ID NO: CAD051482784

FORM IC

U.S. ENVIRONMENTAL PROTECTION AGENCY

1999 Hazardous Waste Report

IDENTIFICATION AND CERTIFICATION

Instructions: Please see the detailed instructions beginning on page 7 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each section is provided below

Sec. I Site name and location address. Check the box ☐ in items A, B, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instructions page 7.

A. U. S EPA ID No
Same as label ☐ or → CAD051482784

B. County
Same as label ☐ or → Los Angeles

C. Site/company name
Same as label ☐ or →
KIK International

D. Has the site name associated with this U. S EPA ID changed since 1997?
☒ 1 Yes ☐ 2 No

E. Street name and number. If not applicable, enter industrial park, building name, or other physical location description
Same as label ☐ or → 9028 Dice Road

F. City, town, village
Same as label ☐ or →
Santa Fe Springs

G. State
Same as label ☐ or → CA

H. Zip Code
Same as label ☐ or → 90670-2520

Sec. II Mailing address of site. Instructions page 7.

A. Is the mailing address the same as the location address? ☒ 1 Yes (SKIP TO SEC III) ☐ 2 No (CONTINUE TO BOX B)

B. Number and street name of mailing address

C. City, town, village

D. State

E. Zip Code

Sec. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instructions page 7

A. Last Name	First name	M.I.	B. Title	C. Telephone Number
Johnson	Derrell	M.	Safety/Env. Supervisor	562 906-2240 Extension

Sec. IV "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations." Instructions page 8.

A. Last Name	First name	M.I	B. Title	C. Signature	D. Date of signature
Wiese	Greg	J.	General Manager	Greg J Wiese	03 30 09 (Month Day Year)

U S. EPA ID NO. CAD 051 481 278 4

Sec. V Generator status. Instructions begin on page 8.

A. 1999 RCRA generator status

(CHECK ONE BOX BELOW)

- [X] 1 LQG
- [ ] 2 SQG
- [ ] 3 CESQG

} SKIP TO SEC. VI

- [ ] 4 Non-generator (CONTINUE TO BOX B)

B. Reason for not generating

(CHECK ALL THAT APPLY)

- [ ] 1 Never generated
- [ ] 2 Out of business
- [ ] 3 Only excluded or delisted waste
- [ ] 4 Only non-hazardous waste
- [ ] 5 Periodic or occasional generator
- [ ] 6 Waste minimization activity
- [ ] 7 Other (SPECIFY IN COMMENTS BOX BELOW)

Sec. VI On-site waste management status. Instructions page 10.

A. Storage subject to RCRA permitting requirements

1

B. Treatment, disposal, or recycling subject to RCRA permitting requirements

1

Comments:

FORM GM

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME. KIK International

U. S. EPA ID NO: CAD051482784

U.S. ENVIRONMENTAL PROTECTION AGENCY

1999 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I

A. Waste description (page 12) "Corrosive waste from Waste Water Treatment Operation in Bleach Production; mixture of water and Sodium Hydroxide."

B. U. S. EPA hazardous waste code (page 12): 0002 N/A N/A N/A N/A

C. State hazardous waste code (page 13): 122

D. SIC code (page 13)	E. Origin code (page 13) / System Type	F. Source code (page 14)	G. Point of measurement (p. 14)	H. Form code (page 14)	I. RCRA-radioactive mixed (page 14)
2841	2 / M	A37	1	B102	2

Sec. II

A. Quantity generated in 1999 (page 15): 120000.0

B. UOM (page 15): 5 — Density: 8.33 — X 1 lbs/gal ☐ 2 sg

C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
X 2 No (SKIP TO SEC III)

ON-SITE PROCESS SYSTEM

On-site process system type (page 16)	Quantity treated, disposed, or recycled on site in 1999 (page 16)
M	

ON-SITE PROCESS SYSTEM 2

On-site process system type (page 16)	Quantity treated, disposed, or recycled on site in 1999 (page 16)
M	

Sec. III

A. Was any of this waste shipped off site in 1999 for treatment, disposal, or recycling? (page 17)
X 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. U. S. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1999 (page 17)
Site 1	CAT080033681	M / 078	1	120000.0
Site 2	N/A	M		
Site 3	N/A	M		

Comments

Treated, neutralized and discharged per LA Co. San. requirements.

No. 028013

BLACK GOLD INDUSTRIES

ENVIRONMENTAL SERVICES A CALIFORNIA CORPORATION

527 N. Rice Ave.
Oxnard, CA 93030-8924

Bus (805) 981-4616
Fax (805) 981-0105
EPA# CAD983609678

DATE: 7/17/2000

BILL TO:

Mars Environmental 06883
P.O. Box 18029
Anaheim, CA 92801

SITE LOCATION:

KiK
9028 Dice Road
Santa Fe Springs, CA 90670

P.O. #	TERMS	EPA#	PHONE #	MANIFEST#
	Net 30	CAD051482784	714-281-7355	1946

DESCRIPTION	QTY	RATE	AMOUNT
Oil NA1270 1000 P.P.M.			
Oil Service Fee			
Antifreeze NA3082			
Used Oil Filters			
Fuel NA1863/NA1993			
Water Haz Liquids			
Water Haz Solids			
Water Non-Haz	3,900G.		
Toxic Drums (Flammable Liquid)			
Toxic Drums (Flammable Solid)			
Toxic Drums (Non RCRA Liquid)			
Toxic Drums (Non RCRA Solid)			
Toxic Drums (Paint Related)			
Toxic Drums (Latex)			
Toxic Cubic Yard Box			
Toxic Non Drum			
Toxic Miscellaneous			
Bin Rental			
Bin Product Disposal			
Hauling			
Labor			
Transportation			
Empty Drums Pick - Up ☐ Sold ☐			
TSDF: DeMenno Kerdoon, 2000 N. Alameda St., Compton, CA 90222 CAT080013352		Total	
MC/VISA - CASH - CHECK # THANK YOU!			

Prepared By: DA

Signature Charles Hamplin 7-17-00

Print name Charles Hamplin

PAY FROM THIS INVOICE

1946

NON-HAZARDOUS WASTE DATA FORM

TO BE COMPLETED BY GENERATOR

NAME kIK

ADDRESS 9028 Dice Road

CITY, STATE, ZIP Santa Fe Springs CA 90670

E.P.A. I.D. NO.

PHONE NO. ( ) 714-281-7355

CONTAINERS: No. _____ VOLUME 3,900 G. WEIGHT _____

TYPE: ☐ TANK TRUCK XX ☐ DUMP TRUCK ☐ DRUMS ☐ CARTONS ☐ OTHER _____

WASTE DESCRIPTION Surfactant GENERATING PROCESS _____

COMPONENTS OF WASTE	PPM	%	COMPONENTS OF WASTE	PPM	%
1.			5.		
2.			6.		
3			7.		
4.			8.		

PROPERTIES: pH____ ☐ SOLID ☐ LIQUID ☐ SLUDGE ☐ SLURRY ☐ OTHER _____

HANDLING INSTRUCTIONS: _____

THE GENERATOR CERTIFIES THAT THE WASTE AS DESCRIBED IS 100% NON-HAZARDOUS.

Charles Hemphill Charles Hemphill 7-17-00

TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME BLACK GOLD INDUSTRIES / ENVIRONMENTAL SERVICES

E.P.A. I.D. NO. C A D 9 8 3 6 0 9 6 7 8

ADDRESS 527 NORTH RICE AVENUE

SERVICE ORDER NO. _____

CITY, STATE, ZIP OXNARD, CA 93030

PICK UP DATE _____

PHONE NO. (805) 981-4616

Daria Alvarez 7-17-00

TRUCK, UNIT, I.D. NO. TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TSD FACILITY

NAME McKittrick Waste Treatment Site

E.P.A. I.D NO.

ADDRESS 56533 Hwy 58 W.

DISPOSAL METHOD

☐ LANDFILL ☐ OTHER _____

CITY, STATE, ZIP Mckittrick, Ca. 93251

PHONE NO. 661 762-7366

TRUCK, UNIT, I D NO. TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN	OLD/NEW	L A	TONS
TRANS		S B	
C/Q		RT/CD	HWDF NONE

DISCREPANCY

1/11/99 INC 12876 Folder

City of Santa Fe Springs

Headquarters Fire Station

11300 Greenstone Ave. • CA • 90670-4619 • (562) 944-9713 • Fax (562) 941-1817 • www santafesprings.org

February 23, 1999

Mr. Al Molina
ProCal Air Separation Facility
8934 Dice Road
Santa Fe Springs, CA 90670

SUBJECT: REMEDIATION OF CAUSTIC RELEASE TO SURFACE SOILS AT PROCAL SHALLOW PIT ON JANUARY 11, 1999

Dear Mr Molina:

The Santa Fe Springs Fire Department (SFSFD) has completed a review of the report submitted by Circle Green Environmental of Pasadena, dated February 17, 1999. Assuming that the submitted data is accurate and correctly represents actual site conditions, the SFSFD has determined that the caustic release to soils in the subject area has been satisfactorily remediated for the current use. The SFSFD has no further requirements regarding assessment or remediation of this release at this time.

This letter does not relieve you of any liability under the California State Health and Safety Code, the Water Code, or other laws or regulations, for past, present, or future operations at the site. Nor does it relieve you of responsibility for any additional or unidentified conditions at the site which could threaten public health or the environment.

If you have any questions, please contact Richard Kallman or Steve Chase of this agency at (562) 944-9713.

Sincerely,

NORBERT P. SCHNABEL, FIRE CHIEF

For DK

David R. Klunk,
Director of Env. Protection

DK/sc

c: Mr. Derrell Johnson, T-Chem Products
Mr. Dan Denisiu, Circle Green Environmental

February 22, 1999

To: SFSFD Files

From: Steve Chase

Re: T-Chem Products

T-Chem's copy of the letter from SFSFD to Mr. Al Molina, ProCal Air, dated 2/23/99, was picked up in person by the undersigned employee of T-Chem appearing in person at the SFSFD HQ at 1:30 pm.

picked up by Santiago E. Hernandez

date 2-22-99

T·CHEM

PRODUCTS, INC.

February 3,1999

Mr Dave Rasmussen
RWQCB
101 Centere Plaza Dr
Monterey Park, Ca. 91754

Reference: January 11,1999 Wastewater release Incident.

Mr Rasmussen,

This correspondence is in regard to the incident referenced above. Also attached is a copy of the follow-up reporting form, control number 9980122, filed with OES. Information can also be obtained from Richard Kallman the responding person from SFSFD CUPA, at 562-944-9713.

The amount of water released was estimated between 3000-6000 gals.

The water was contained in the neighbors stormwater catch pond with small amount of contaminated soil covering an area between the release area and the pond.

Water out of the stormwater collection area is gravity fed to a sump collection area on the affected property. Therefore the water cleanup including flush, was all pumped out through the sump area so as to remove all contaminated water. The amount of water in this sump collection area was unknown prior to the incident.

Circle Green Environmental , a certified hazardous waste handler removed a total 12000 gallons of waste water from this sump. Another 3000 gals of liquid sludge, was removed from bottom of the pond, for a total of 15000 gallons liquid, including flush water, removed. All the contaminated soil is scheduled for final removal from property today. Chain of command for soil removal was coordinated through our reporting agency, Santa Fe Springs CUPA. Any questions on this may be obtained from Steve Chase at 562-944-9713.

As a handler of hazardous chemicals, T-Chem Products has a deep concern for the safety of the environment and the welfare of our neighbors. This is reflected in our commitment to install the best of containment equipment, along with going beyond the requirements in our level of training in the hazardous response area.

Unable to determine the exact cause, the cause of the incident is classified as human error. Even so the employee involved has been terminated from the company. So as not to repeat an incident of this kind, in the future, the operator(s), in this area will be more observant of required duties, as trained.

Thank you , I sincerely hope that this is what you required. If you have any further questions, please call me at 562-906-2240 or 909-301-9839

Derrell M Johnson
Safety/ Environmental Supervisor

1 Attachment OES Report 990122

b,/rmppdoc. pg 23 02/01/99dj

9028 Dice Road, Santa Fe Springs, CA 90670 · (562) 946-6427 FAX· (562) 941-9780

EMERGENCY RELEASE FOLLOW-UP NOTICE REPORTING FORM

A BUSINESS NAME: T-Chem Products, Inc.

FACILITY EMERGENCY CONTACT & PHONE NUMBER: Derrell Johnson (562) 906.2240

B INCIDENT DATE: MO 01 DAY 11 YR 99

TIME OES NOTIFIED: 1310 (use 24 hr time)

OES CONTROL NO.: 990122

C INCIDENT ADDRESS LOCATION: 9028 Dice Road

CITY / COMMUNITY: Santa Fe Springs

COUNTY: LA ZIP: 90670

D

CHEMICAL OR TRADE NAME (print or type): Untreated Waste Water

CAS Number: 001310-73-2

CHECK IF CHEMICAL IS LISTED IN 40 CFR 355, APPENDIX A: ☐

CHECK IF RELEASE REQUIRES NOTIFICATION UNDER 42 U.S.C. Section 9603 (a): ☐

PHYSICAL STATE CONTAINED: ☐ SOLID ☒ LIQUID ☐ GAS

PHYSICAL STATE RELEASED: ☐ SOLID ☒ LIQUID ☐ GAS

QUANTITY RELEASED: 3000-6000 Gals.

ENVIRONMENTAL CONTAMINATION: ☐ AIR ☐ WATER ☒ GROUND ☒ OTHER

TIME OF RELEASE: Prior 7:15am

DURATION OF RELEASE: ___ DAYS ___ HOURS ___ MINUTES

E ACTIONS TAKEN

7:15am - Observation made of water draining to Pro Cal storm water containment pond. 7:30am - Sample analyzed in lab (.02CL^2.3NOAH12.5PH) notified Pro Cal-determined water not used in process. 9:40am - notified SFSFD Cupa (Dave Klunk) of incident. 10:30am - Richard Kallman (SFSFD CUPA) on site-contained in storm water pond-notification made to certified waste hauler.

F KNOWN OR ANTICIPATED HEALTH EFFECTS (Use the comments section for addition information)

☐ ACUTE OR IMMEDIATE (explain) _____

☐ CHRONIC OR DELAYED (explain) _____

☒ NOTKNOWN (explain) None anticipated

G ADVICE REGARDING MEDICAL ATTENTION NECESSARY FOR EXPOSED INDIVIDUALS

N/A

H COMMENTS (INDICATE SECTION (A-G) AND ITEM WITH COMMENTS OR ADDITIONAL INFORMATION)

D - Duration unable to determine-oral conversation showed 3000 - 6000 gals.

E - Cause - Human Error - Employee terminated.

E - Released water not used in any plant process-storm water only-dampness on rock & soil area between release point & pool-circle green removed & flushed all contaminated water & soil. Completion due Feb. 4, 1999.

I CERTIFICATION I certify under penalty of law that I have personally examined and I am familiar with the information submitted and believe the submitted information is true, accurate, and complete

REPORTING FACILITY REPRESENTATIVE (print or type): Derrell M. Johnson

SIGNATURE OF REPORTING FACILITY REPRESENTATIVE: [signature] DATE 2/3/99

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93739394

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RES SE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784 | Manifest Document No | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address: T-Chem Products INC. 9028 Dice RD. Santa Fe Springs, CA 90670

4 Generator's Phone: 562 946-6427

A State Manifest Document Number: 93739394

B State Generator's ID: ~~CAD051482784~~ 9P

5 Transporter 1 Company Name: Odyssey Transp.

6 US EPA ID Number: CAD087121001 9

C State Transporter's ID: 0541

D Transporter's Phone: (310) 760-3336

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: D/K ENVIROMENTAL 5650 E 26th ST. VERNON, CA 90023

10 US EPA ID Number: CAT080033681

G State Facility's ID: CAT080033681

H Facility's Phone: (213) 268 5056

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 Number
a WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PG II 8	001	TT	01000 ~~05500~~	G	State 122 EPA/Other D002
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE D/K ENVIRONMENTAL FACILITY IN LOS ANGELES, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAT080033681

J Additional Descriptions for Materials Listed Above: SODIUM HYDROXIDE AND WATER 2901 2, 06

K Handling Codes for Wastes Listed Above: a 0-1 b c d

15 Special Handling Instructions and Additional Information: WEAR protective CLOTHING AND USE proper Safety equipment.

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	Signature	Month	Day	Year
JOHN Houck		01	15	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTÚ	Jose A. Cantu	01	15	99

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	Signature	Month	Day	Year
Claudia Perez		01	15	99

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (9/93)
EPA 8700—22

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

T-CHEM PRODUCTS INC.

Manifest NO: 93739394 **Date: 01/15/99**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U.S Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph P. Belfour **Date:** 1/20/99

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93739394

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESP E CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD051482784 — Manifest Document No.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address: T-Chem Products Inc. 9028 Dice Rd. Santa Fe Springs, CA 90670
4. Generator's Phone: 562 946-6427
A. State Manifest Document Number: 93739394
B. State Generator's ID: CAD051482784
C. State Transporter's ID: 0541
D. Transporter's Phone: (310) 760-3336
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAT080033681
H. Facility's Phone: (213) 268 5056

5. Transporter 1 Company Name: Odyssey Transp.
6. US EPA ID Number: CAD087121001 9
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: DK Environmental, 5650 E 26th St., Vernon, CA 90023
10. US EPA ID Number: CAT080033681

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 Number
a. WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PG II 8	001	TT	01000 ~~05500~~	G	State 122 / EPA/Other D002
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above: SODIUM HYDROXIDE AND WATER 2-90112.06

K. Handling Codes for Wastes Listed Above: a. D-1 b. c. d.

15. Special Handling Instructions and Additional Information: WEAR PROTECTIVE CLOTHING AND USE PROPER Safety equipment.

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	Signature	Month	Day	Year
JOHN Houck		01	15	19

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	01	15	19

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type — *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96710231

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-7

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051148284 | Manifest Document No: | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
T-Chem Products, Inc.
9028 Dice RD. Santa Fe Springs CA 90670
4. Generator's Phone (562) 946-6427

A State Manifest Document Number: 96710231
B State Generator's ID:

5 Transporter 1 Company Name: Odyssey Transp.
6 US EPA ID Number: CAD087210019
C State Transporter's ID: 0541
D Transporter's Phone: 310-768-3336

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
D/K Environmental
3650 E 26th St
Vernon, CA 90023
10 US EPA ID Number: CAT080033681
G State Facility's ID: CAT080033681
H Facility's Phone: 213-268-3536

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 Number
a. *WASTE Corrosive Liquid, n.o.s. (Sodium Hydroxide) UN1760, PG II 8	001	TT	05500	GAL	State 122 EPA/Other D002
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE D/K ENVIRONMENTAL FACILITY IN LOS ANGELES, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAT080033681

J. Additional Descriptions for Materials listed Above: Sodium Hydroxide and H2O 2901125 06
K. Handling Codes for Wastes Listed Above: a. 0-1 b. c. d.

15. Special Handling Instructions and Additional Information
Wear protective clothing & use proper Safety equipment.

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	Signature	Month	Day	Year
Vincent Perez		01	14	97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	01	14	97

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	Signature	Month	Day	Year
Claudia Perez		01	14	97

DO NOT WRITE BELOW THIS LINE.

Yellow — TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS (Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/95)
EPA 8700—22

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

T-CHEM PRODUCTS INC.

Manifest NO: 96710231 **Date: 01/14/99**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U.S. Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph P. Balfour **Date:** 1/20/99

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96710231

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL R ONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-85

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051148278 4 | Manifest Document No. | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
T-Chem Products, Inc
1029 Dice Rd Santa Fe Springs CA 90670

4 Generator's Phone (562) 946-6427

A. State Manifest Document Number: 96710231

B. State Generator's ID:

5. Transporter 1 Company Name: Odyssey Trans.
6 US EPA ID Number: CAD982108019

C. State Transporter's ID: 0541

D. Transporter's Phone: 310 324 3326

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
DK Environmental
2501 E 26th St
Vernon, CA 90023

10 US EPA ID Number: CAT080033681

G. State Facility's ID: CAT080033681

H. Facility's Phone: 213 268-5056

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 Number
a. WASTE Corrosive Liquid, N.O.S (Sodium Hydroxide) UN1760, PGII &	001	T	05500	GAL	State 122
					EPA/Other D002
b.					State
					EPA/Other
c					State
					EPA/Other
d					State
					EPA/Other

J. Additional Descriptions for Materials Listed Above: Sodium Hydroxide and H2O

K. Handling Codes for Wastes Listed Above: a. D-1 b.

c. d.

15. Special Handling Instructions and Additional Information
Wear protective clothing & use proper safety equipment.

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	Signature	Month	Day	Year
Ernesto Ochoa		01	14	97

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	01	14	97

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
CAD051482784	93739235		

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA. 90670

4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 93739235

B State Generator's ID: CAD051482784

5 Transporter 1 Company Name: ODYSSEY TRANSPORTATION

6 US EPA ID Number: CAD087210019

C State Transporter's ID: 0541

D Transporter's Phone: (310) 768-3336

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
D/K ENVIRONMENTAL
3650 E. 26TH ST.
VERNON, CA. 90023

10 US EPA ID Number: CAT080033681

G State Facility's ID: CAT080033681

H Facility's Phone: (213) 268-5056

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 Numbers
a. WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE), UN1760, PGII, 8	001	TT	05500	G	State 122 EPA/Other D002
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above: SOLELY MATERIALS AND LABELS

K Handling Codes for Wastes Listed Above: R-C-1

15. Special Handling Instructions and Additional Information
WEAR PROTECTIVE CLOTHING, AND USE OSHA APPROVED SAFETY PRECAUTIONS
#290112-06

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	Signature	Month	Day	Year
		01	12	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE CANTU	Jose Cantu	01	12	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

93739235

DTSC 8022A (9/93)
EPA 8700—22

Yellow GENERATOR RETAINS

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

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No. 9255 | 2 Page 1 of 3 of 1

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4. Generator's Phone (562) 906-2240

5. Transporter 1 Company Name: CIRCLE GREEN ENVIRONMENTAL
6. US EPA ID Number:
A. Transporter's Phone: (626) 398-4400

7. Transporter 2 Company Name: J-CAL TRANSPORTATION
8. US EPA ID Number:
B. Transporter's Phone: (562) 920-7709

9. Designated Facility Name and Site Address
CDE RESOURCES, INC.
2590 GLEN HELEN RD.
DEVORE, CA 92407
10. US EPA ID Number:
C. Facility's Phone: (909) 473-1521

11. Waste Shipping Name and Description	12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, SOLID	001	D	00015	T
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above
11.A IMPACTED SOIL

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS APPROVAL #GAK91073

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
JOHN HOUCK		02	12	99

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DANIEL ENRIQUEZ		02	12	99

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
STUART KIRKER		2	12	99

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR'S COPY

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

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No

Manifest Document No 9255

2. Page 1 of 1

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4. Generator's Phone (562) 906-2240

5. Transporter 1 Company Name
CIRCLE GREEN ENVIRONMENTAL

6 US EPA ID Number

A Transporter's Phone
(626) 398-4400

7 Transporter 2 Company Name
J-CAL TRANSPORTATION

8 US EPA ID Number

B Transporter's Phone
(562) 920-7709

9. Designated Facility Name and Site Address
CDE RESOURCES, INC.
2590 GLEN HELEN RD.
DEVORE, CA 92407

10. US EPA ID Number

C Facility's Phone
(909) 473-1521

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, SOLID	001	DT	00020	T
b				
c				
d.				

D Additional Descriptions for Materials Listed Above
11.A IMPACTED SOIL

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS APPROVAL #GAK91073

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
Charles Remy Vice		02	05	97

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DAN DENISH		02	07	97

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 waste materials covered by this manifest except as noted in Item 19

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

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

NON-HAZARDOUS WASTE MANIFEST	1 Generator's US EPA ID No	Manifest Document No. 9255	2. Page 1 of 1

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

5 Transporter 1 Company Name	6. US EPA ID Number	A Transporter's Phone
CIRCLE GREEN ENVIRONMENTAL		(626) 398-4400
7 Transporter 2 Company Name	8. US EPA ID Number	B Transporter's Phone
J-CAL TRANSPORTATION		(562) 920-7709
9 Designated Facility Name and Site Address CDE RESOURCES, INC. 2590 GLEN HELEN RD. DEVORE, CA 92407	10. US EPA ID Number	C Facility's Phone (909) 473-1521

11 Waste Shipping Name and Description	12 Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, SOLID	001	DT	00018	T
b.				
c.				
d				

D Additional Descriptions for Materials Listed Above
11.A IMPACTED SOIL AND ROCK

E Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS APPROVAL #GAK91073

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
JOHN HAUCK		01	29	99

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DAN DENISIU		01	29	99

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 waste materials covered by this manifest except as noted in Item 19

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR'S COPY

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

NON-HAZARDOUS WASTE MANIFEST

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

Manifest Document No 9255

2 Page 1 of 1

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

5 Transporter 1 Company Name
CIRCLE GREEN ENVIRONMENTAL

6. US EPA ID Number . . . . . .

A Transporter's Phone (626) 398-4400

7 Transporter 2 Company Name
K-VAC ENVIRONMENTAL

8. US EPA ID Number . . . . . .

B Transporter's Phone (909) 237-5972

9 Designated Facility Name and Site Address
CDE RESOURCES, INC.
2590 GLEN HELEN RD.
DEVORE, CA 92407

10 US EPA ID Number . . . . . .

C Facility's Phone (909) 473-1521

11 Waste Shipping Name and Description	12 Containers No	12 Containers Type	13 Total Quantity	14. Unit Wt/Vol
a NON-HAZARDOUS WASTE, SOLID	002	CM	00018	T
b				
c				
d				

D Additional Descriptions for Materials Listed Above
11.A IMPACTED SOIL AND ROCK

E Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS APPROVAL #GAK91073

16 **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name	Signature	Month	Day	Year
John Houck		01	29	99

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dan Lenski		01	29	99

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 waste materials covered by this manifest except as noted in Item 19

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR

TRANSPORTER

FACILITY

Printed by [illegible]
North [illegible]

GENERATOR'S COPY

[illegible]

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

NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No. 9 2 5 5 3	2 Page 1 of 1	

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4. Generator's Phone (562) 906-2240

5. Transporter 1 Company Name	6. US EPA ID Number	A Transporter's Phone
CIRCLE GREEN ENVIRONMENTAL		(626) 398-4400
7. Transporter 2 Company Name	8 US EPA ID Number	B. Transporter's Phone
J-CAL TRANSPORTATION		(562) 920-7709
9. Designated Facility Name and Site Address CDE RESOURCES, INC. 2590 GLEN HELEN RD. DEVORE, CA 92407	10. US EPA ID Number	C. Facility's Phone (909) 473-1521

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, SOLID	001	DT	00018	T
b.				
c.				
d.				

D Additional Descriptions for Materials Listed Above
11.A IMPACTED SOIL AND ROCK

E Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS APPROVAL #GAK91073

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
JOHN HOUCK		01	29	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dan Denisiu		01	29	99

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 waste materials covered by this manifest except as noted in Item 19

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

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

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. .

Manifest Document No. 9255

2 Page 1 of 1

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 946-6427

5. Transporter 1 Company Name: CIRCLE GREEN ENVIRONMENTAL
6 US EPA ID Number: .
A Transporter's Phone: (626) 398-4400

7. Transporter 2 Company Name: GRAYSON SERVICES
8 US EPA ID Number: . .
B Transporter's Phone: (805) 399-6300

9 Designated Facility Name and Site Address
RESOURCE RENEWAL TECHNOLOGY
HWY.166 1/4 MILE W. OF PENTLAND RD.
MARICOPA, CA 93252
10 US EPA ID Number:
C Facility's Phone: (805) 395-1692

11. Waste Shipping Name and Description	12 Containers No.	12 Containers Type	13. Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, LIQUID	001	TT	02000	G
b.				
c				
d.				

GENERATOR

D Additional Descriptions for Materials Listed Above
11.A COLLECTION POND SLUDGE AND WASTEWATER

E Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS APPROVAL # 9541 1

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
JOHN HOUCK		01	14	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
I AN TENISU		01	14	99

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DAVE EKAM		01	14	99

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
JOHN HOUCK		01	14	99

GENERATOR'S COPY

CITY OF SANTA FE SPRINGS FIRE DEPARTMENT

Fire Protection Division • Environmental Protection Division
11300 Greenstone Avenue • Santa Fe Springs, CA 90670-4619 • (562) 944-9713 • FAX (562) 941-1817 • fire@santafesprings.org

cc. SC R. Wardley

NOTICE OF VIOLATION & ORDER TO COMPLY

Business Name: T-Chem Contact: Scott Chancellor
Site Address: 9028 Dice Unit # ____ Telephone: 906-2240
Business Owner: ____ Inspected by: Richard Fallman

☒ FIRST NOTICE 1-11-99 (DATE) ☐ SECOND NOTICE ____ (DATE) ☐ THIRD NOTICE ____ (DATE)

Compliance Due Date: 1-18-99 | Compliance Due Date: | Compliance Due Date:

1st Notice NO CHARGE
2nd Notice $50 Fine
3rd Notice $100 Fine
Office Meeting $500 Fine

CORRECT THE BELOW STATED VIOLATIONS, SIGN AND RETURN FORM TO AVOID LATE FINES

SRC ← INT

ITEM	DESCRIPTION OF VIOLATIONS:
1.	Remove Liquid From Procal containment basin and properly treat and dispose. Completed 1/14/99
2.	~~Test contaminated soil and remove any material deemed to be Hazardous.~~ PAY
3.	Provide determination and disposition of soil. If required to be removed provide implentation schedule. Circle Green Has started implementation and Steve Chase - Removal of soil Began mon 1/25/99 - All Completed no later than Fri 1/29/99 -

The above conditions or practices represent a violation of the referenced code for which there are civil and or criminal penalties. Failure to correct the above violations by the specified due date may result in legal action being taken against the above parties. The giving of this notice and recent inspection of your facility is not a representation by the City of Santa Fe Springs that no other violations exist on your premises. After you have corrected the violation, please sign and print your name along with the date and return this notice with any required documentation to the Santa Fe Springs Fire Department at the above address.

I HEREBY CERTIFY THAT THE ABOVE SPECIFIED VIOLATIONS HAVE BEEN CORRECTED.

Signature of Responsible Party | Name - Printed: Donald Johnson | Date: 1/21/99

WHITE OWNER/OCCUPANT COPY | CANARY - FIRE DEPARTMENT COPY | PINK - FPB/EPD COPY

R & S Graphics, Inc.

T-CHEM PRODUCTS

CHEMICAL INCIDENT REPORT

LOCATION : WASTE H2O PLANT

DATE : 1-11-99

TIME : 9:15 AM

YOUR NAME: Charles Hershell

DESCRIBE INCIDENT: At 7:15 AM I was approached by Jim-Rissman, Ray Weiter & Scott Chancellor TO Come TO the waste Water ~~Treatment~~ plant. I did so & was notified that Jamie Cacho was being sent home because he was caught dosing ~~Product~~ Water TO the neighboring ~~Gasco~~ plant into the dirt area into their ~~Collecting~~ pit for Rain water. I was informed that Jamie C. Claimed there was 6,000 Gals of water released on-TO this-Property.

DESCRIBE ACTION TAKEN (INCLUDE PERSONS INVOLVED):

Jamie ~~Cacho~~ was Terminated & flow of water was Stopped. Richard Wadley was notified who in turn ~~notified~~ the person in charge of the Gas Co plant Samples of the water were TAKEN & Given TO QC. for analysis results were 12.51 PH. .02 Cl_2 & .3 caustic.

NOTIFICATIONS:

Persons	Affiliation/Agency	Time
Richard Wadley		8:30 AM
~~SUSU WIESE~~ (Serious or injury incidents)	T-CHEM MNGT.	
SCOTT CHANCELLOR (All incidents)	T-CHEM MNGT	7:15 AM
DEPARTMENT LEAD PERSON (All incidents)	T-CHEM FOREMAN	7:15 AM

Signature: _____

ate of California—Environmental Protection Agency
orm Approved OMB No 2050-0039 (Expires 9-30-99)
lease print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98033807

IN CASE OF 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: CAD009144124 | Manifest Document No: | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T CHEM
[illegible] PICO BLVD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (5) 946-6477

A State Manifest Document Number: 98033807
B State Generator's ID:

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC.
6 US EPA ID Number: CAD982444441
C State Transporter's ID:
D Transporter's Phone: (909)873-4141

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
FILTER RECYCLING SERVICES, INC.
180 WEST MONTE AVE.
PIALTO, CA 9[illegible]16
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a NON RCRA HAZARDOUS WASTE SOLID	0002	C F	00110	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above: PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response CHEMTREC 1-800-424-9300 EPA#170
BILL TO: CRYSTAL CREEK ENVIRONMENTAL

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	Signature	Month	Day	Year
[illegible]				

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]				

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

Waste water incident 01 - 11 - 99

On Monday January Eleventh Nineteen hundred Ninetynine, I was asked to come downstairs from the tank farm office by Ray Wetter and Jim Rissman to the waste water treatment plant. Once I got down to where Ray and Jim were I was also met by Scott Chancellor.Ray informed me that Jamie Cacho the waste water treatment operator had just been sent home. I asked for what reson! Ray told me Jim had found a one inch water hose was being used by Jamie to transfer treated waste water from one of our storage tanks over to our neighbors property, Gas Co. Inc.

On further inspection Jim showed me where the waste water had ran on to the ground outside our fence and from the ground the water had ran into Gas Co's rain water containment pit. I asked Jim if we had an idea how much water had been dumped, and Scott said Jamie told him it was about 6,000 Gals. The next questinon on everyones mind was, Why? A question no one had an answer to at the time.

While Jamie was getting his personal possesions together Scott had me get a sample of the water from the tank and take ton the Q.C. lab for a p.h. check. The p.h. was 12.51. I also had Edison check the chlorine and causic content. The chlorine was .02% and the caustic content was .3%. I gave the information to Scott Chancellor and Jim Rissman.

Signed: Charles Hopkins

January 12. 1999

To: Whom it may Concern,

Subj: Improper discharge of waste water

From: Raymond Wetter

At approx. 7:10 am, January 11. 1999 while on a walking tour with Jim Rissman, Maintenance Supv. of the Tank Farm area We discovered that Jaime Cacho. WW Plant Operator had strung a hose from the water treatment plant to the fenceline bordering Procal Air Company and was discharging High pH wastewater into thier impoundment pond. We proceeded to the Bleach Plant and paged Scott Chancellor, Jaime's immediate supervisor. When Scott arrived in the Tank Farm all three of us confronted Jaime about this practice Jaime informed us that he was having trouble treating the water and needed to dump it. He had no response when asked why he did not dump to the sewer, the only approved method for disposing of waste water Jaime stated that he had dumped about 6, 000 gallons of water through the fence and that we should not worry that the sun would be out and would evaporate the water in the pond. Jim Rissman directed Jaime to punch out and that Scott Chancellor would contact him later in the week to determine his employment at T-Chem. During our discussion's with Jaime, a sample of wastewater was submitted to Q.C., pH was checked and reported at 12-, I am not aware what other tests were ran or results obtained. Upon my departure from T-Chem, Bob Brown. Maintenance, arrived to perform the task of treating Waste Water

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96710231

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RES. SE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784 | 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: I-Chem Products Inc
5028 Dice RD. Santa Fe Springs CA 90670
4. Generator's Phone (562) 946-6427

A. State Manifest Document Number: 96710231
B. State Generator's ID:

5. Transporter 1 Company Name: Odyssey Transp | 6. US EPA ID Number: CAD087211019
C. State Transporter's ID: 0541
D. Transporter's Phone: 310-768-3336

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: D/K Environmental
3650 E 26th St
Vernon CA 90023 | 10 US EPA ID Number: CAT080033681
G. State Facility's ID: CAT080033681
H. Facility's Phone: 213.268-3536

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 Number
a. WASTE Corrosive Liquid, n.o.s (Sodium Hydroxide) UN1760, PGII 8	001	TT	051500	GAL	State 122 EPA/Other D002
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE D/K ENVIRONMENTAL FACILITY IN LOS ANGELES, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED OUR EPA NUMBER IS CAT080033681

J. Additional Descriptions for Materials Listed Above | K. Handling Codes for Wastes Listed Above: a. H20 b.

15 Special Handling Instructions and Additional Information
Wear protective clothing & use proper Safety equipment.

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	Signature	Month	Day	Year
Darrel Johnson		01	14	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	01	14	99

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	Signature	Month	Day	Year
Claudia Perez		01	14	99

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out of state produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/95)
EPA 8700—22

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

T-CHEM PRODUCTS INC.

Manifest NO: 96710231 **Date: 01/14/99**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U S. Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph P. Belpour **Date:** 1/20/99

State of California—Environmental Protection Agency
Form Approved OMB No 2050–0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Contro
Sacramento, California

96710231

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESP...SE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7...

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD015148278 4 | Manifest Document No:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address: T. Cum Products, Inc 2... Pine Rd ...nta Fe Springs, CA 9067...
4. Generator's Phone (562) 946-6127

A. State Manifest Document Number: 96710231
B. State Generator's ID:
C. State Transporter's ID: 0541
D. Transporter's Phone: 310-715-3336
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAT080033681
H. Facility's Phone: 213 268-5056

5. Transporter 1 Company Name: Valley Trans. P. | 6. US EPA ID Number: CAD982121019
7. Transporter 2 Company Name | 8. US EPA ID Number:
9. Designated Facility Name and Site Address: DK Environmental 2... 26th St Vernon CA 90023 | 10. US EPA ID Number: CAT080033681

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 Number
a. WASTE Corrosive Liquid, N.O.S. (Sodium Hydroxide) UN1760, PG II 8	001	T	055000	GAL	State 122 EPA/Other D002
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: 0-1

15. Special Handling Instructions and Additional Information
Wear protective clothing & use proper Safety equipment.

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	Signature	Month	Day	Year
[illegible]		5	1	19

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	5	1	19

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)
EPA 8700—22

Yello... GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type. *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD051482784 — Manifest Document No.: 39235
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA. 90670
4. Generator's Phone (562 946-6427

5. Transporter 1 Company Name: ODYSSEY TRANSPORTATION
6. US EPA ID Number: CAD087210019
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address
D/K ENVIRONMENTAL
3650 E. 26TH ST.
VERNON, CA. 90023
10. US EPA ID Number: CAT080033681

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. WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PGII, 8	001	TT	05500	G
b.				
c				
d				

15. Special Handling Instructions and Additional Information
WEAR PROTECTIVE CLOTHING, AND USE OSHA APPROVED SAFETY PRECAUTIONS
#29012-06

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	Signature	Month	Day	Year
MANUEL HERRERA		01	12	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE CANTU	Jose Cantu	01	12	99

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	Signature	Month	Day	Year
Claudia Perez		01	13	99

DO NOT WRITE BELOW THIS LINE.

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

DTSC 8022A (9/93)
EPA 8700—22

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

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93739235

IN CASE OF 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: CAD051482784 Manifest Document No: 39235 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA. 90670
4. Generator's Phone (562 946-6427

A State Manifest Document Number: 93739235
B State Generator's ID: CAD051482784

5 Transporter 1 Company Name: ODYSSEY TRANSPORTATION
6 US EPA ID Number: CAD087211001 9
C. State Transporter's ID: 0541
D. Transporter's Phone: (310) 768-3336

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
D/K ENVIRONMENTAL
3650 E. 26TH ST.
VERNON, CA. 90023
10 US EPA ID Number: CAT080033681
G State Facility's ID: CAT080033681
H. Facility's Phone: (213) 268-5056

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 Number
a. WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PGII, 8	001	TT	05500	G	State 122 / EPA/Other D002
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J. Additional Descriptions for Materials Listed Above: SODIUM HYDROXIDE AND WATER

K. Handling Codes for Wastes Listed Above: a. RO-1 b. c. d.

15 Special Handling Instructions and Additional Information
WEAR PROTECTIVE CLOTHING, WD USE OSHA APPROVED SAFETY PRECAUTIONS
#290112-06

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	Signature	Month	Day	Year
		01	12	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE CANTU		01	12	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98033807

IN CASE OF 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: CAD052148273 | Manifest Document No: 3745 2 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM
9026 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 98033807
B State Generator's ID:
C State Transporter's ID:
D Transporter's Phone: (909)873-4141
E State Transporter's ID:
F Transporter's Phone:
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC.
6 US EPA ID Number: CAD982444481
7 Transporter 2 Company Name:
8 US EPA ID Number:
9 Designated Facility Name and Site Address: FILTER RECYCLING SERVICES, INC.
180 WEST MONTE AVE.
RIALTO, CA 92316
10 US EPA ID Number: CAD982444481

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 Number
a NON-RCRA HAZARDOUS WASTE SOLID	002	C F	01100	P	State: 352 / EPA/Other: NONE
b					State: / EPA/Other:
c					State: / EPA/Other:
d					State: / EPA/Other:

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

12 Additional Descriptions for Materials Listed Above: PROFILE# 2705232
K Handling Codes for Wastes Listed Above: a 14(6) b c

RECEIVED
JAN 13 1999
T-CHEM PRODUCTS
FRONT OFFICE

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response CHEMTREC 1-800-424-9300 ERG#128
BILL TO: CIRCLE GREEN ENVIRONMENTAL

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	Signature	Month	Day	Year
Jaime Cacho		1	12	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
STAN (FDCA)		1	12	99

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	Signature	Month	Day	Year
Sergio Serrano Jr		1	13	99

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (4/97)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98033287

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051432784 — Manifest Document No: 10252 — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
CHEM
3026 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-4427

A State Manifest Document Number: 98033287
B State Generator's ID:

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC. — 6 US EPA ID Number: CAD982444481
C State Transporter's ID:
D Transporter's Phone: (909)873-4141

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
FILTER RECYCLING SERVICES, INC.
180 WEST MONTE AVE.
RIALTO, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a NON-RCRA HAZARDOUS WASTE SOLID	001	C	4/200	P	State 352
					EPA/Other NONE
THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481					State
					EPA/Other
c					State
					EPA/Other
d					State
					EPA/Other

J Additional Descriptions for Materials Listed Above: 11a) PADS/OIL PROFILE# 97052325
K Handling Codes for Wastes Listed Above: a 14-01 b c d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing.
24-Hour Emergency Response CHEMTREC 1-800-424-9300 ERG#138

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	Signature	Month	Day	Year
[illegible] Cohen	[signature]	10	21	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
W. B VAN ALSTINE	[signature]	10	21	99

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	Signature	Month	Day	Year
ERIC SOLEM	[signature]	10	21	99

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700—22

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

98033287

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98033287

IN CASE OF 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: CAD059143744 — Manifest Document No: 5 2 — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T CHEM
9029 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 98033287
B State Generator's ID:

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC.
6 US EPA ID Number: CAD982444488
C State Transporter's ID:
D Transporter's Phone: (909)873-4141

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
FILTER RECYCLING SERVICES, INC.
100 WEST MONTE AVE.
RIALTO, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a NON-RCRA HAZARDOUS WASTE SOLID	001	CF	0/200	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

PO# 77509

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a b c d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response CHEMTREX 1-800-424-9300 REF#1??

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: [illegible] Signature: [illegible] Month 1 Day 2 Year [illegible]

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: W. B VanAlstine Signature: WBVanAlstine Month 1 Day 02 Year 98

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: Signature: Month Day Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

...of California—Environmental Protection Agency
Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98074453

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

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784 | Manifest Document No: 74453 | 2 Page 1 of 1

Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

A State Manifest Document Number: 98074453

B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL

6 US EPA ID Number: CAO000090454 0

C State Transporter's ID:

D Transporter's Phone: (626) 339-2340

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
INDUSTRIAL SERVICE OIL
1700 SOUTH SOTO STREET
LOS ANGELES, CA 90023

10 US EPA ID Number: CAD099452708

G State Facility's ID: CAD099452708

H Facility's Phone: (562) 598-5577

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	K Waste Number
a NON RCRA HAZARDOUS WASTE LIQUID	001	T T	002250	G	State 223 EPA/CA ONLY
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
WASTE WATER
E.R.G. NO.: 171

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

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: TOM TICE (626) 339-2340
GLOVES AND 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	Signature	Month	Day	Year
Sandra E. Hernandez	X	08	26	98

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Tim Tice		08	26	98

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	Signature	Month	Day	Year
John Trebbett		08	26	98

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700—22

S e of Co' rnia—Environmental Protection Agency
F n A- p ved OMB No 2050-0039 (Expires 9-30-99)
ase print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98074453

IN CASE OF 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	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051432784	74435		

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

A State Manifest Document Number: 98074453

B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL

6 US EPA ID Number: CAD000904540

C State Transporter's ID:

D Transporter's Phone: (626) 339-2340

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
INDUSTRIAL SERVICE OIL
1700 SOUTH SOTO STREET
LOS ANGELES, CA 90023

10 US EPA ID Number: CAD099452708

G State Facility's ID:

H Facility's Phone: (562) 598-5577

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 Number
a. NON RCRA HAZARDOUS WASTE LIQUID	001	T	02250	G	State 223 EPA/Other CA ONLY
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J Additional Descriptions for Materials Listed Above
WASTE WATER
E.R.G. NO.: 171

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

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: TOM TICE (626) 339-2340
GLOVES AND 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	Signature	Month	Day	Year
[illegible]	X [signature]	08	26	97

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
TOM TICE	[signature]	08	26	97

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700--22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98033185

IN CASE OF 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: CAD051482784 | Manifest Document No: 39 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T CHEM
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone ( )

A State Manifest Document Number: 98033185
B State Generator's ID:

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC.
6 US EPA ID Number: CAD982444481
C State Transporter's ID:
D Transporter's Phone: (909)873-4141

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
FILTER RECYCLING SERVICES, INC.
180 WEST MONTE AVE.
RIALTO, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a NON-RCRA HAZARDOUS WASTE SOLID THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTESTREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481	002	F	01000	P	State 352 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
11a) pads/oil (352) #97052325

K Handling Codes for Wastes Listed Above
a 14-01
b
c
d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response CHEMTREC 1-800-424-9300 ERG#128

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	Signature	Month	Day	Year
Dennis Cochran		08	17	98

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Michael B. VanAstyn		08	17	98

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	Signature	Month	Day	Year
ERIC SOLEM		08	18	98

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700-22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98033185

IN CASE OF 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: CAD055148273 | Manifest Document No: 98033185 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T CHEM
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone ( )

A State Manifest Document Number: 98033185
B State Generator's ID:

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC.
6 US EPA ID Number: CAD982444881
C State Transporter's ID:
D Transporter's Phone: (909)873-4141

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
FILTER RECYCLING SERVICES, INC.
180 WEST MONTE AVE.
RIALTO, CA 92316
10 US EPA ID Number: CAD982444881
G State Facility's ID: CAD982444881
H Facility's Phone: (909)421-2012

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 Number
a. *NON-RCRA HAZARDOUS WASTE SOLID	002	F	04000	P	State 352 / EPA/Other NONE
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J Additional Descriptions for Materials Listed Above
(11a) pads/oil (352) #97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response CHEMTREC 1-800-424-9300 ERG#128

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	Signature	Month	Day	Year
		08	17	98

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Michael B. VanAlstine		08	17	98

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency,
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051482784	38286		

3 Generator's Name and Mailing Address
T CHEM
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone ( )

A State Manifest Document Number: 97420737
B State Generator's ID:

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC.
6 US EPA ID Number: CAD982444481
C State Transporter's ID:
D Transporter's Phone: (909)873-4141

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
FILTER RECYCLING SERVICES, INC.
180 WEST MONTE AVE.
RIALTO, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a ?NON-RCRA HAZARDOUS WASTE SOLID	002	C	01200	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above
11a) pads/oil (352) #97052325

K Handling Codes for Wastes Listed Above
a 14-01
b
c
d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response CHEMTREC 1-800-424-9300 ERG#128

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	Signature	Month	Day	Year
Brandi Johnson		06	24	98

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Lodden		06	24	95

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space

RECEIVED JUL 13 1998

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

Printed/Typed Name	Signature	Month	Day	Year
ERIC SOLEM		06	25	98

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700--22

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

97420737

GENERATOR

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

97420485 IN CASE OF 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: CAD051148278 4 | Manifest Document No: 2011 BS | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
T Chem
9028 Dice Road
Santa Fe Springs, CA 90670

4 Generator's Phone ( )

A. State Manifest Document Number: 97420485

B. State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services

6 US EPA ID Number: CAD982444481

C. State Transporter's ID:

D. Transporter's Phone: 909-873-4141

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
Filter Recycling Services, Inc.
180 W Monte Ave.
Rialto, CA 92316

10 US EPA ID Number: CAD982444481

G. State Facility's ID: CAD982444481

H. Facility's Phone: 909-421-2012

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 Number
a. Non-RCRA Hazardous Waste Solid	001	CW	00550	P	State 352 EPA/Other non-RCRA
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) pads/oil 97052325

K. Handling Codes for Wastes Listed Above
a. 14-01
b.
c.
d.

15 Special Handling Instructions and Additional Information
wear appropriate protective clothing
24 hour emergency number CHEMTREC 1-800-424-9300 ERG#128

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	Signature	Month	Day	Year
Scott Chamberlain		05	21	98

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Ledden		05	21	98

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	Signature	Month	Day	Year
ERIC SOLEM		05	29	98

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700—22

THIS WASTE STREAM HAS BEEN QUALIFIED
FOR RECYCLING/TREATMENT AT THE
FILTER RECYCLING FACILITY IN RIALTO
CALIFORNIA. THIS FACILITY HAS THE
NECESSARY PERMITS TO RECEIVE YOUR WASTE
STREAM AS QUALIFIED. OUR EPA NUMBER IS
CADQR2444A81

10-91

Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051432784	2011 BT		

3 Generator's Name and Mailing Address	A State Manifest Document Number
T Chem 9028 Dice Road Santa Fe Springs, CA 90670 4 Generator's Phone ( )	97420485 B State Generator's ID

5 Transporter 1 Company Name	6 US EPA ID Number	C State Transporter's ID
Filter Recycling Services	CAD982444481	D Transporter's Phone 909-873-4141
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	10 US EPA ID Number	G State Facility's ID
Filter Recycling Services, Inc. 180 W Monte Ave. Rialto, CA 92316	CAD982444481	CAD982444481 H Facility's Phone 909-421-2012

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 Number
a Non-RCRA Hazardous Waste Solid	001	CW	00550	P	State 352 EPA/Other non-RCRA
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
11a) pads/oil 97052325	a b c d

15 Special Handling Instructions and Additional Information
wear appropriate protective clothing
24 hour emergency number CHEMTREC 1-800-424-9300 ERG#128

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	Signature	Month	Day	Year
Jon Chamberlain		05	21	98

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Eric Lodding		05	21	98

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

97420485

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-97)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
[illegible]	[illegible]		

3 Generator's Name and Mailing Address

4 Generator's Phone ( )

A State Manifest Document Number: 97422248

B State Generator's ID

C State Transporter's ID

D Transporter's Phone

E State Transporter's ID

F Transporter's Phone

G State Facility's ID

H Facility's Phone

5 Transporter 1 Company Name | 6 US EPA ID Number

7 Transporter 2 Company Name | 8 US EPA ID Number

9 Designated Facility Name and Site Address | 10 US EPA ID Number

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	002	CW	01600	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

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	Signature	Month	Day	Year
Jackell Johnson		01	21	97

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]				

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	Signature	Month	Day	Year

GENERATOR

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

97422248

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

97422248

IN CASE OF 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	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD[illegible]212248			

GENERATOR

3 Generator's Name and Mailing Address
[illegible]
6674 Dice Rd Santa Fe Springs, CA 90670
4 Generator's Phone ( )

A State Manifest Document Number: 97422248
B State Generator's ID:
C State Transporter's ID:
D Transporter's Phone:
E State Transporter's ID:
F Transporter's Phone:
G State Facility's ID: CAD982444461
H Facility's Phone: (909) 421-7612

5 Transporter 1 Company Name: Filter Recycling Services
6 US EPA ID Number: CAD[illegible]

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

9 Designated Facility Name and Site Address: Filter Recycling Services
150 W. Merrill
Rialto, CA 92376
10 US EPA ID Number: CAD982444461

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	State Waste No.
a. Nonrcra Hazardous waste solid	002	CF	01600	P	CA/NO: 331
b. THIS WASTE STREAM HAS BEEN QUALIFIED					EPA/St:
c. FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO CALIFORNIA. THIS FACILITY HAS THE					State:
d. CESSARY PERMITS TO RECEIVE YOUR WA[illegible] TREAM AS QUALIFIED. OUR EPA NUMBER IS					EPA/Other:

J Additional Descriptions for Materials Listed Above
[illegible]

K Handling Codes for Wastes Listed Above
H040

15 Special Handling Instructions and Additional Information
Wear appropriate PPE Maintain Air Emergency [illegible]
ERG# 128

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	Signature	Month	Day	Year
Larrell Johnson		01	21	98

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Cooter		01	21	98

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	Signature	Month	Day	Year
[illegible]		01	23	98

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

97422710

IN CASE OF 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 [illegible] Manifest Document No 2217 P

2 Page 1 of

Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
[illegible]

4 Generator's Phone ([illegible]

A State Manifest Document Number 9742271O

B State Generator's ID

5 Transporter 1 Company Name [illegible]

6 US EPA ID Number

C State Transporter's ID

D Transporter's Phone

7 Transporter 2 Company Name

8 US EPA ID Number

E State Transporter's ID

F Transporter's Phone

9. Designated Facility Name and Site Address
[illegible]

10 US EPA ID Number

G State Facility's ID CAD098244444 8

H Facility's Phone (909) 421-2100

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 Numbers
a NON-RCRA HAZARDOUS WASTE SOLID	001	CW	001000	P	State 352 EPA/Other W01 EC2A
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
DOT 9/III
AC PROFILE # 220852325

K Handling Codes for Wastes Listed Above
01

L
M

15 Special Handling Instructions and Additional Information
WEAR appropriate PPE [illegible]

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	Signature	Month	Day	Year
Dennis Johnson	[signature]	01	23	98

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Lodden	[signature]	01	23	98

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	Signature	Month	Day	Year
[illegible]	[signature]	01	26	98

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out of state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (4/97)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-92)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

PO# 76541

Department of Toxic Substances
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	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

4 Generator's Phone ( )

State Manifest Document Number 9742271

5 Transporter 1 Company Name | 6 US EPA ID Number

7 Transporter 2 Company Name | 8 US EPA ID Number

9 Designated Facility Name and Site Address | 10 US EPA ID Number

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.
a.	0021	CM	01100	P
b.				
c.				
d.				

Additional Descriptions for Materials Listed Above | Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information

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

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	Signature	Month	Day	Year
		01	12	12

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sonia Lillian		01	13	12

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	Signature	Month	Day	Year

GENERATOR

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

97422710

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700-22

Yellow GENERATOR RETAINS

DRUMS SHIPPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST #	OUTOF STATE	DATE	NO
				Reporting Period:	Jan - Dec	1998		
1	1000	A/B Pads	01	FILTER RECYC.	97422710	No	01/23/98	1
2	1600	O& A/B Pads	02	FILTER RECYC.	97422248	No	03/20/98	2
1	550	A/B Pads	01	FILTER RECYC.	97420485	No	05/21/98	3
2	1200	O& A/B Pads	02	FILTER RECYC.	97420737	No	06/24/98	4
2	1000	Oil Pads	02	FILTER RECYC.	98033185	No	08/17/98	5
1	250	Waste water	01	INDUST.SER. OIL	98074453	No	08/26/98	6
1	1200	Oil Pads	01	FILTER RECYC.	98033287	No	10/21/98	7
2	1400	O& A/B Pads	02	FILTER RECYC.	98033807	No	12/22/98	8
12	**8200**	**<<

Filter Recycling Services, Inc.

03/29/99
T-Chem
9028 Dice Road
Santa Fe Springs, CA 90670

This letter is to inform you that Filter Recycling Services, Inc. has the appropriate permits and/or Interim status and has accepted your material for Recycling.

Filter Recycling Services certifies that the material indicated has been properly treated and recycled.

Date	Manifest No.	Quantity
03/22/99	98719097	02 boxes

Matrix One: Pads/oil
Matrix Two:
Matrix Three:

If this information does not agree with your records, please notify us within ten days so we can resolve any discrepancies. Phone Number (909) 873-4141

THIS NOTICE IS REQUIRED BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL.

Filter Recycling Services, Inc.

06/02/99
T Chem
9028 Dice Road
Santa Fe Springs, CA 90670

This letter is to inform you that Filter Recycling Services, Inc. has the appropriate permits and/or Interim status and has accepted your material for Recycling.

Filter Recycling Services certifies that the material indicated has been properly treated and recycled.

Date	Manifest No.	Quantity
05/25/99	98710861	01 box

Matrix One: Pads/oil
Matrix Two:
Matrix Three:

If this information does not agree with your records, please notify us within ten days so we can resolve any discrepancies. Phone Number (909) 873-4141

THIS NOTICE IS REQUIRED BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL.

Filter Recycling Services, Inc.

07/27/99
T-Chem
9028 Dice Road
Santa Fe Springs, CA 90670

This letter is to inform you that Filter Recycling Services, Inc. has the appropriate permits and/or Interim status and has accepted your material for Recycling.

Filter Recycling Services certifies that the material indicated has been properly treated and recycled.

Date	Manifest No.	Quantity
07/20/99	98711865	02 boxes

Matrix One: Absorbent pads, oil
Matrix Two:
Matrix Three:

If this information does not agree with your records, please notify us within ten days so we can resolve any discrepancies. Phone Number (909) 873-4141

THIS NOTICE IS REQUIRED BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL.

Filter Recycling Services, Inc.

09/14/99
Kick So. Cal
9028 Dice Road
Santa Fe Springs, CA 90670

This letter is to inform you that Filter Recycling Services, Inc. has the appropriate permits and/or Interim status and has accepted your material for Recycling.

Filter Recycling Services certifies that the material indicated has been properly treated and recycled.

Date	Manifest No.	Quantity
09/07/99	98718753	02 boxes

Matrix One: **Absorbent Pads**
Matrix Two:
Matrix Three:

If this information does not agree with your records, please notify us within ten days so we can resolve any discrepancies. Phone Number (909) 873-4141

THIS NOTICE IS REQUIRED BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL.

Filter Recycling Services, Inc.

11/01/99
Kik SoCal
9028 Dice Road
Santa Fe Springs, CA 90670

This letter is to inform you that Filter Recycling Services, Inc. has the appropriate permits and/or Interim status and has accepted your material for Recycling.

Filter Recycling Services certifies that the material indicated has been properly treated and recycled.

Date	Manifest No.	Quantity
10/28/99	99566152	01 box

Matrix One: Pads/oil
Matrix Two:
Matrix Three:

If this information does not agree with your records, please notify us within ten days so we can resolve any discrepancies. Phone Number (909) 873-4141

THIS NOTICE IS REQUIRED BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL.

Filter Recycling Services, Inc.

11/22/99
Kik So. Cal
9028 Dice Road
Santa Fe Springs, CA 90670

This letter is to inform you that Filter Recycling Services, Inc. has the appropriate permits and/or Interim status and has accepted your material for Recycling.

Filter Recycling Services certifies that the material indicated has been properly treated and recycled.

Date	Manifest No.	Quantity
11/15/99	99566393	02 boxes

Matrix One: **Absorbent pads, oil**

Matrix Two:
Matrix Three:

If this information does not agree with your records, please notify us within ten days so we can resolve any discrepancies. Phone Number (909) 873-4141

THIS NOTICE IS REQUIRED BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL.

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

99566599

IN CASE OF 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: CAD051419278444884 | Manifest Document No: 99566599 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kik SoCal
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 99566599

B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.

6 US EPA ID Number: CAD982444481

C State Transporter's ID (Reserved):

D Transporter's Phone: (909)873-4141

7 Transporter 2 Company Name:

8 US EPA ID Number:

E State Transporter's ID (Reserved):

F Transporter's Phone:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: (909)421-2012

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	15 Waste Number
Non-RCRA hazardous waste solid (absorbents)	001	C	00550	P	352
					EPA/Other: NONE
b					State:
					EPA/Other:
c					State:
					EPA/Other:
d					State:
					EPA/Other:

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

11a) PADS/01D, K PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300

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	Signature	Month	Day	Year
JOHN HOUCK		12	07	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CURTIS WOODWARD		12	07	99

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	Signature	Month	Day	Year
Sraft Serrano J		12	09	99

DO NOT WRITE BELOW THIS LINE.

Yellow — TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD045148279 | Manifest Document No. 44994 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
Kil Social
9078 Dike Road
Santa Fe Springs, CA 90670
3A Generator's Phone 562-946-6427

A State Manifest Document Number: 99566599
B State Generator's ID:
C State Transporter's ID (Reserved):
D Transporter's Phone: (909)873-4141
E State Transporter's ID (Reserved):
F Transporter's Phone:
G State Facility's ID:
H Facility's Phone: (909)421-2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
7 Transporter 2 Company Name:
8 US EPA ID Number:
9 Designated Facility Name and Site Address: Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

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	J Waste Number
a Non-RCRA hazardous waste solid (absorbents)	001	C	00550	P	State 352 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a | b | c | d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300

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	Signature	Month	Day	Year
John Houck		12	07	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Curtis Woodward		12	07	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

PO# 78914

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802 WITHIN CALIFORNIA, CALL 1-800-852-75

99566599

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD052142784484834 | 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
Kik SoCal
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 99566393
B State Generator's ID:
C State Transporter's ID (Reserved):
D Transporter's Phone: (909)873-4141
E State Transporter's ID (Reserved):
F Transporter's Phone:
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
7 Transporter 2 Company Name:
8 US EPA ID Number:
9 Designated Facility Name and Site Address: Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

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 Number
a. Non-RCRA hazardous waste solid (absorbents) THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER is CAD982444481	001	DF	01000	P	State 332 EPA/Other NONE
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J Additional Descriptions for Materials Listed Above: PADS/011 PROFILE# 97052325

K Handling Codes for Wastes Listed Above: a. D1 b. c. d.

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300

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	Signature	Month	Day	Year
Jim RISSMAN	Jim Rissman	1	15	99

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VANALSTINE	M.B. VanAlstine	1	15	99

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	Signature	Month	Day	Year
Sruf Sriano T-	Sruf Sriano	1	16	99

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

99566393

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

99566393

IN CASE OF 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: CA50L4837844913 — Manifest Document No — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik SoCal
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 99566393
B State Generator's ID:
C State Transporter's ID (Reserved):
D Transporter's Phone: (909)873-4141
E State Transporter's ID (Reserved):
F Transporter's Phone:
G State Facility's ID:
H Facility's Phone: (909)421-2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92376
10 US EPA ID Number: CAD982444481

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	15 Waste Number
a. *Non-RCRA hazardous waste solid (absorbents)	002	DF	01000	P	State: JB2 EPA/Other: NONE
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

J Additional Descriptions for Materials Listed Above: 12a. PADS/OIL PROFILE# 97052325
K Handling Codes for Wastes Listed Above: a. b. c. d.

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300

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	Signature	Month	Day	Year
Jim Rissman		1	1	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. Vanalstine		1	1	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC/8022A (1/99)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type (Form designed for use on elite (12-pitch) typewriter)

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051418278447947			

GENERATOR

3 Generator's Name and Mailing Address
Kik SoCal
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 99566152
B State Generator's ID:
C State Transporter's ID [Reserved]:
D Transporter's Phone: (909)873-4141
E State Transporter's ID [Reserved]:
F Transporter's Phone:
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
7 Transporter 2 Company Name:
8 US EPA ID Number:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

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 Number
a. Non-RCRA hazardous waste solid (absorbents)	001	C F	00800	P	State 352 EPA/Other NONE
b. THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

11b Additional Descriptions for Materials Listed Above: PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300

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	Signature	Month	Day	Year
D. Fairchild Lawson		10	28	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VANALSTINE		10	28	99

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	Signature	Month	Day	Year
Evelyn Serrano		10	29	99

DO NOT WRITE BELOW THIS LINE.

Yellow — TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/99)
EPA 8700—22

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

99566152

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

99566152

IN CASE OF 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 / Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
	CAD052148284 / 47947		

3 Generator's Name and Mailing Address
Kik SoCal
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 99566152
B State Generator's ID:
C State Transporter's ID (Reserved):
D Transporter's Phone: (909)873-4141
E State Transporter's ID (Reserved):
F Transporter's Phone:
G State Facility's ID:
H Facility's Phone: (909)421-2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
130 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

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 Number
a. *Non-PCPA hazardous waste solid (absorbents)	001	C F	00860	P	State: 352 / EPA/Other: NONE
b.					State: / EPA/Other:
c.					State: / EPA/Other:
d.					State: / EPA/Other:

12a PADS/DIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300

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	Signature	Month	Day	Year
		10	28	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VANALST INC.		10	28	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/99)
EPA 8700--22

Yellow GENERATOR RETAINS

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

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No.

Manifest Document No 9 2 6 1 9

2 Page 1 of 1

3 Generator's Name and Mailing Address
KIK SO-CAL INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

5. Transporter 1 Company Name: CIRCLE GREEN ENVIRONMENTAL
6. US EPA ID Number:
A Transporter's Phone: (626) 398-4400

7 Transporter 2 Company Name: GRAYSON SERVICES
8 US EPA ID Number:
B. Transporter's Phone: (661) 399-6300

9. Designated Facility Name and Site Address
RESOURCE RENEWAL TECHNOLOGY
HWY.166 1/4 MILE W.OF PENTLAND RD.
MARICOPA, CA 93252
10 US EPA ID Number:
C Facility's Phone: (661) 395-1692

11. Waste Shipping Name and Description	12 Containers No.	Type	13. Total Quantity	14 Unit Wt/Vol
a NON-HAZARDOUS WASTE, LIQUID	001	TT	02300	G
b				
c				
d.				

D. Additional Descriptions for Materials Listed Above
11.A LIQUIDS FROM TOTES AND DRUMS

E Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS

16 GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
Charlotte Hill 11-5-99		11	05	99

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]		11	05	99

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Doug Hirst		11	05	99

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR'S COPY

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

NON-HAZARDOUS WASTE MANIFEST

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

Manifest Document No.: 9261

2. Page 1 of 1

3. Generator's Name and Mailing Address
KIK SO-CAL INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2200

5 Transporter 1 Company Name: CIRCLE GREEN ENVIRONMENTAL

6 US EPA ID Number: . .

A. Transporter's Phone: (626)398-4400

7. Transporter 2 Company Name: GRAYSON SERVICES

8. US EPA ID Number: . .

B Transporter's Phone: (661)399-6300

9. Designated Facility Name and Site Address
RESOURCE RENEWAL TECHNOLOGY
HWY 166 1/4 MILE W. OF PENTLAND RD
MARICOPA, CA 93252

10 US EPA ID Number: . . . . .

C Facility's Phone: (661)395-1692

11 Waste Shipping Name and Description	12 Containers No	12 Containers Type	13. Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE LIQUID	0 0	TT	05000	G
b.				
c.				
d.				

D Additional Descriptions for Materials Listed Above
CLARIFIER WASTEWATER AND SLUDGE, TOTES

E Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
Charles Hemphill 11-2-99	Charles Hemphill	11	02	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
T. Tyrrell		11	02	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space
Billy Reese

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

Printed/Typed Name	Signature	Month	Day	Year
Billy Ree				

GENERATOR

TRANSPORTER

FACILITY

GENERATOR'S COPY

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98718753

IN CASE OF 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: CAD052148284466851
Manifest Document No:
2 Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Kik SoCal
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 98718753
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481
C State Transporter's ID:
D Transporter's Phone: (909)873-4141

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
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481
G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
Non-RCRA hazardous waste solid (absorbents)	002	C F	01000	P	State: 352
					EPA/Other: NONE
b					State:
					EPA/Other:
c.					State:
					EPA/Other:
d					State:
					EPA/Other:

J Additional Descriptions for Materials Listed Above
11a). PADS/OIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300
BILL TO: Circle Green Environmental

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	Signature	Month	Day	Year
Priscilla Prentiss		09	07	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VanAstine		09	07	99

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	Signature	Month	Day	Year
Scott Serano		09	08	99

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

PO# 78C19

Department of Toxic Substances Control
Sacramento, California

98718753

IN CASE OF 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: CAD059148274 | Manifest Document No: 98718753 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
Yik Social
9029 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 98718753
B State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982044481
C State Transporter's ID:
D. Transporter's Phone: (909)873-4141

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
Filter Recycling Services, Inc.
190 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982044481
G State Facility's ID:
H Facility's Phone: (909)421-2012

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 Number
a. Non-RCRA hazardous waste solid (absorbents)	002	F	01000	P	State 352 EPA/Other NONE
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

11a) Additional Descriptions for Materials Listed Above: PADS/OIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 129
24-Hour Emergency Response CHEMTREC 1-800-424-9300
BILL TO: Circle Green Environmental

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	Signature	Month	Day	Year
Priscilla Vicente		09	17	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VanAlstine		09	07	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

10/15/98 01:59 FAX 001

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type Form designed for use on elite (12-pitch) typewriter.

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No	Manifest Document No	2. Page 1	Information in the shaded areas is not required by Federal law.
CAD054827347	6008	1 of 1	

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670

4. Generator's Phone (562) 906-2240

5. Transporter 1 Company Name: WESTERN ENVIRONMENTAL
6. US EPA ID Number: CAD009045400

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

9. Designated Facility Name and Site Address
INDUSTRIAL SERVICE OIL
1700 SOUTH SOTO STREET
LOS ANGELES, CA 90023
10. US EPA ID Number: CAD099452708

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
a. NON-RCRA HAZARDOUS WASTE LIQUID	001	TT	00350	G
b.				
c.				
d.				

WASTE ID NO.

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: TOM TICE (626) 339-2340
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
Jim Rizzuto		07	22	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Rick Fife		07	22	99

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	Signature	Month	Day	Year
Don Tibbitt		07	22	99

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

DTSC 8022A (4/97)
EPA 8700-22

Green: TRANSPORTER RETAIN

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98776108

IN CASE OF 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: CAD051482784 — Manifest Document No: 76008 — 2 Page 1 of 1

Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 906-2240

A State Manifest Document Number: 98776108

B State Generator's ID:

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL

6 US EPA ID Number: CAQ000090454 0

C State Transporter's ID:

D Transporter's Phone: (626) 339-2340

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
INDUSTRIAL SERVICE OIL
1700 SOUTH SOTO STREET
LOS ANGELES, CA 90023

10 US EPA ID Number: CAD099452708

G State Facility's ID:

H Facility's Phone: (562) 598-5577

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 Number
a. NON RCRA HAZARDOUS WASTE LIQUID	001	TT	00350	G	State: 223 / EPA/Other: CA ONLY
b.					State: / EPA/Other:
c.					State: / EPA/Other:
d.					State: / EPA/Other:

J Additional Descriptions for Materials Listed Above
WASTE WATER & OIL
E.R.G. NO.: NONE

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

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: TOM TICE (626) 339-2340
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
X Jim Richard	X	07	22	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Rick Fite		07	22	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

Industrial Service Oil Co. — Inc.

PETROLEUM PRODUCTS
BUYERS AND SELLERS

P.O. BOX 1158 • DOWNEY, CA 90240 • OFFICE (310)869-9667

FAX 310/923-9855

RESTRICTED WASTE NOTIFICATION STATEMENT

GENERATOR NAME: T- CHEM Products

GENERATOR ADDRESS: 9028 Dice road. santafe Springs

GENERATOR EPA ID NUMBER: CAD051482784

MANIFEST NUMBER: 98776108

TREATMENT FACILITY: Industrial Service Oil Company, Inc.

The following manifested wastes are subject to the Land Disposal Restrictions of CCR Title 22, Section 66268.

____ USEPA D Code Wastes (Description below)

____ Antifreeze (Ethylene Glycol)

____ Organic Liquids (Non-Chlorinated)

__✓__ Organic Liquid and Water Solution

____ Other - (Describe below)

Waste Code: EPA or Calif.	Wastewater or Non-Wastewater	Regulated Hazardous Constituent	Treatment Standard
223	W.W		Recycle

The wastes DO NOT comply with the treatment standards specified in 22 CCR 66268. A signature is not required below.

Check one:

Waste Analysis ____ is available and attached.
Waste Analysis __✓__ is not available.

9/93

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98711865

IN CASE OF 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: CAD052148278 | Manifest Document No: 45695 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM
9020 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 98711865
B State Generator's ID:
C State Transporter's ID:
D. Transporter's Phone: (909)873-4141
E State Transporter's ID:
F Transporter's Phone:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444481

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

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481
H Facility's Phone: (909)421-2012

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 Number
a. ~~Non-RCRA hazardous waste solid (absorbente)~~ THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481	002	CF ~~DM~~	02000	P	State 352 / EPA/Other NONE
b.					State / EPA/Other
c.					State / EPA/Other
					State / EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300
BILL TO: Circle Green Environmental

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	Signature	Month	Day	Year
Charles Hemphill		07	20	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VanArsdale		07	20	99

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	Signature	Month	Day	Year
Svati Sevano		07	21	99

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9 30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98711865

IN CASE OF 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: CAD055148274 Manifest Document No: 45695 2 Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 98711865
B State Generator's ID:
C State Transporter's ID:
D Transporter's Phone: (909)873-4141
E State Transporter's ID:
F Transporter's Phone:
G State Facility's ID:
H Facility's Phone: (909)421-2012

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982444488
7 Transporter 2 Company Name:
8 US EPA ID Number:

9 Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982444481

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 Number
a. *Non-RCRA hazardous waste solid (absorbents)	002	CF	04000	P	State 352 EPA/Other NONE
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
WEAR Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300
BILL TO: Circle Green Environmental

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	Signature	Month	Day	Year
Charles Hemphill		07	20	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VanAbstine		07	20	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-99)
Please print or type. Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD015148274 Manifest Document No. 41499
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
T-CHEM
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670
4. Generator's Phone (562) 946-6427

5. Transporter 1 Company Name: Filter Recycling Services, Inc.
6. US EPA ID Number: CAD982444481

7. Transporter 2 Company Name: SHIPPED JUN 16 1999
8. US EPA ID Number

9. Designated Facility Name and Site Address
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10. US EPA ID Number: CAD982444481

H. Facility's Phone: (909) 421-2012

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 Number
a. *Non-RCRA hazardous waste solid (absorbent, oil)	001	CF	00750	P	State 352 EPA/Other NONE
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above: 11a) PADS/OIL PROFILE# 97052325
K. Handling Codes for Wastes Listed Above: a. 14/01 b. c. d.

15. Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
ERG# a) 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300
BILL TO: CIRCLE GREEN ENVIRONMENTAL

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: Darrell R. Johnson — Signature — Month 05 Day 25 Year 99

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: M.B. VANALSTINE — Signature — Month 05 Day 25 Year 99
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: Sonia Serrano — Signature — Month 05 Day 26 Year 99

DO NOT WRITE BELOW THIS LINE.

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

DTSC 8022A (4/97)
EPA 8700—22

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

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type · *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98710861

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESI /E CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-755(

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD055148784 | Manifest Document No: 44499 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM
9128 DICE ROAD
SANTA FE SPRINGS, CA 90670
4 Generator's Phone (562) 946-6429

A. State Manifest Document Number: 98710861
B. State Generator's ID:

5 Transporter 1 Company Name: Filter Recycling Services, Inc.
6 US EPA ID Number: CAD982448441
C. State Transporter's ID:
D. Transporter's Phone: (909)873-4141

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
Filter Recycling Services, Inc.
180 W. Monte Avenue
Rialto, CA 92316
10 US EPA ID Number: CAD982448441
G. State Facility's ID:
H. Facility's Phone: (909)421-2012

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 Number
a. Non-RCRA hazardous waste solid (absorbent, oil)	001	CF	00750	P	State: 352 EPA/Other: NONE
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

11a) PADS/OIL PROFILE# 97052325

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

15 Special Handling Instructions and Additional Information
Wear appropriate Protective Clothing
ERG# at 128
24-Hour Emergency Response CHEMTREC 1-800-424-9300
BILL TO: CIRCLE GREEN ENVIRONMENTAL

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	Signature	Month	Day	Year
Darren M Tobman		05	25	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]		05	25	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98719097

IN CASE OF 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: CAD051482784432 | Manifest Document No: 36 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T CHEM
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone: 562 946-6427

A State Manifest Document Number: 98719097

B State Generator's ID:

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC. | 6 US EPA ID Number: CAD982444481

C State Transporter's ID:

D Transporter's Phone: (909)873-4141

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
FILTER RECYCLING SERVICES, INC.
180 WEST MONTE AVE.
RIALTO, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: (909)421-2012

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 Number
a NON-RCRA HAZARDOUS WASTE SOLID	002	CF	01800	P	State 352 / EPA/Other NONE
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above
J1a) PADS/OIL PROFILE# 97052325

K Handling Codes for Wastes Listed Above
a H/A | b | c | d

15 Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response CHEMTREC 1-800-424-9300 ERG#128
BILL TO: CIRCLE GREEN ENVIRONMENTAL

RECEIVED APR 19 1999 T-CHEM PRODUCTS FRONT OFFICE

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	Signature	Month	Day	Year
JOHN HOUCK		03	22	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VANALSTINE		03	22	99

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	Signature	Month	Day	Year
Sarah Serano		03	23	99

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (4/97)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

98719097

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

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD059448213 — Manifest Document No: 3316

2 Page 1 of 1

Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
T CHEM
9029 DICE ROAD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 946-6127

A State Manifest Document Number: 98719097

B State Generator's ID:

5 Transporter 1 Company Name: FILTER RECYCLING SERVICES, INC.

6 US EPA ID Number: CAD982444481

C State Transporter's ID:

D Transporter's Phone: (909)873-4141

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
FILTER RECYCLING SERVICES, INC.
180 WEST MONTE AVE.
RIALTO, CA 92316

10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: (909)421-2012

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 Number
a NON-RCRA HAZARDOUS WASTE SOLID	002	C F	0800	P	State 352 EPA/Other NONE
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J Additional Descriptions for Materials Listed Above
11a) PADS/OIL PROFILE# 97052325

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

15. Special Handling Instructions and Additional Information
Wear Appropriate Protective Clothing
24-Hour Emergency Response CHEMTREC 1-800-424-9300 ERG#128
BILL TO: CIRCLE GREEN ENVIRONMENTAL

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	Signature	Month	Day	Year
JOHN Houck		03	12	97

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M.B. VANALSTINE		03	12	97

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

Yellow GENERATOR RETAINS

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

NON-HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No.

Manifest Document No. 92564

2 Page 1 of 1

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4 Generator's Phone (562) 902-2240

5. Transporter 1 Company Name
CIRCLE GREEN ENVIRONMENTAL

6 US EPA ID Number

A. Transporter's Phone
(626) 398-4400

7. Transporter 2 Company Name
W.E.S.T.

8 US EPA ID Number

B. Transporter's Phone
(562) 946-8433

9. Designated Facility Name and Site Address
RESOURCE RENEWAL TECHNOLOGY
HWY.166 1/4MILE W. OF PENTLAND RD.
MARICOPA, CA 93252

10. US EPA ID Number

C Facility's Phone
(805) 395-1692

11. Waste Shipping Name and Description	12 Containers No.	12 Containers Type	13 Total Quantity	14. Unit Wt/Vol
a. NON-HAZARDOUS WASTE, LIQUID	001	T	04300 4733	G
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above
11.A CLARIFIER WASTEWATER AND SLUDGE

E Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS APPROVAL# 99913

GENERATOR

16 **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name	Signature	Month	Day	Year
John Howard		03	17	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
TRAN POLIS		03	17	99

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 waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR'S COPY

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type. Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93739394

IN CASE OF 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: CAD051482784 | 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
T-Chem Products Inc.
9028 Dice Rd. Santa Fe Springs, CA 90670

A. State Manifest Document Number: 93739394

4. Generator's Phone: 562 946-6427

B. State Generator's ID: CAD051482784

5. Transporter 1 Company Name: Odyssey Transp.

6. US EPA ID Number: CAD087210019

C. State Transporter's ID: 2541

D. Transporter's Phone: (310) 603-3336

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
D/K Environmental
5650 E 26th St.
Vernon, CA 90023

10. US EPA ID Number: CAT080033681

G. State Facility's ID: CAT080033681

H. Facility's Phone: (213) 268-5056

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. WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PG II 8	001	TT	01000 ~~05500~~	G	State 172
b.					EPA/Other
c.					State
d					EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE D/K ENVIRONMENTAL FACILITY IN LOS ANGELES, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAT080033681

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
WEAR protective CLOTHING AND USE proper Safety equipment.

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	Signature	Month	Day	Year
JOHN HOUCK		01	15	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	01	15	99

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	Signature	Month	Day	Year
Claudia Perez		01	15	99

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

T-CHEM PRODUCTS INC.

Manifest NO: 93739394 **Date: 01/15/99**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U.S. Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph P. Belfour **Date:** 1/20/99

State of California—Environmental Protection Agency
Form Approved OMB No. 2050–0039 (Expires 9-30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93739394

IN CASE OF 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: CAD051482784 — Manifest Document No:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
T-Chem Products Inc.
9028 Dice Rd. Santa Fe Springs, CA 90670
4. Generator's Phone 562 946-6427

A. State Manifest Document Number: 93739394
B. State Generator's ID: CAD051482784
C. State Transporter's ID: 3547
D. Transporter's Phone: (310) 7603336
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAT080033681
H. Facility's Phone: (323) 268-5056

5. Transporter 1 Company Name: Odyssey Transp.
6. US EPA ID Number: CAD087121019
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: DK Environmental, 5650 E 26th St., Vernon, Ca 90023
10. US EPA ID Number: CAT080033681

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	Waste Codes
a. WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PG II 8	001	TT	01000 ~~05500~~	G	
b.					
c.					
d.					

15. Special Handling Instructions and Additional Information
WEAR PROTECTIVE CLOTHING AND USE PROPER SAFETY EQUIPMENT.

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	Signature	Month	Day	Year
JOHN HOUCK		01	15	97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	01	15	97

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700---22

Yellow GENERATOR RETAINS

1997

State of California—Environmental Protection Agency
Form Approved OMB No 2[illegible]-0039 (Expires 9-30-96)
Please print or type *Form a. signed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96863127

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

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. | Manifest Document No 163127 | 2 Page 1 of | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address

4 Generator's Phone ( )

A State Manifest Document Number 96863127

B State Generator's ID

C State Transporter's ID

D Transporter's Phone (909) 421-201[illegible]

5 Transporter 1 Company Name | 6 US EPA ID Number

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 | 10 US EPA ID Number

G State Facility's ID CAD982444481

H Facility's Phone (909) 421-201[illegible]

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 Number
a. [illegible]	002	CW	02400	P	State EPA/Other NOR EC LA
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAD982444481

J Additional Descriptions for Materials Listed Above

Paint Mill

AT PROFILE # 9705[illegible]

K Handling Codes for Wastes Listed Above

a. H101 b.

c. d.

15. Special Handling Instructions and Additional Information

Use OSHA approved safety precautions chemtrec 24 hr. emergency

CHG # 108 CCC#211 7300

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	Signature	Month	Day	Year
Deborah A Johnson	[signature]	1	13	97

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Lodden	[signature]	1	13	97

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	Signature	Month	Day	Year
[illegible]	[signature]	1	04	97

DO NOT WRITE BELOW THIS LINE.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/95)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96863127

IN CASE OF 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 | 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

4 Generator's Phone ( )

A. State Manifest Document Number: 96863127

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

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

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

9 Designated Facility Name and Site Address | 10 US EPA ID Number

G. State Facility's ID

H. Facility's Phone

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 Number
a.	002	CM	02400	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

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	Signature	Month	Day	Year

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)

Yellow GENERATOR RETAINS

Filter Recycling Services, Inc.

T-Chem
9028 Dice Road
Santa Fe Sprngs, Ca

This letter is to inform you that Filter Recycling Services, Inc. has the appropriate permits and/or Interim status and has accepted your material for Recycling.

Filter Recycling Services certifies that the material indicated has been properly treated and recycled.

Date	Manifest No.	Quantity
11/05/97	96863127	02 Drums

Matrix One: Absorbent Oil
Matrix Two:
Matrix Three:

If this information does not agree with your records, please notify us within ten days so we can resolve any discrepancies. *Phone* Number (909) 873-4141

THIS NOTICE IS REQUIRED BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL.

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96863416

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-0

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. CAD051482784 Manifest Document No. 6314 116 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address: T-chem Products Inc. 9028 Dice Rd Santa Fe Springs CA 90670

4 Generator's Phone (562) 946-6427

A State Manifest Document Number: 96863416

B State Generator's ID:

C State Transporter's ID:

5 Transporter 1 Company Name: Filter Recycling SVC | 6 US EPA ID Number: CAD982444481

D Transporter's Phone: 909-421-2012

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: Filter Recycling SVC. 180 W. Monte Ave Rialto CA 92316 | 10 US EPA ID Number: CAD982444481

G State Facility's ID: CAD982444481

H Facility's Phone: 909-421-2012

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 Number
a. NON RCRA Hazardous Waste solid	001	CW	01000	P	State 352 / EPA/Other NON RCRA
b. THIS WASTE STREAM HAS BEEN QUALIFIED					State / EPA/Other
c. FOR RECYCLING/TREATMENT AT THE FILTER RECYCLING FACILITY IN RIALTO CALIFORNIA. THIS FACILITY HAS THE					State / EPA/Other
d. NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS					State / EPA/Other

J Additional Descriptions for Materials Listed Above: CAD982444481 (18) Absorbent 967

K Handling Codes for Wastes Listed Above: a. H46 b. c. d.

15. Special Handling Instructions and Additional Information: Wear OSHA Approved Safety wear chemtec 24 HR # 800-424-9300 E.R.G. # 128

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	Signature	Month	Day	Year
Deborah M. Johnson		09	23	97

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Ledden	Sean Ledden	09	23	97

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	Signature	Month	Day	Year
		09	24	97

DO NOT WRITE BELOW THIS LINE.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/95)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96863416

IN CASE OF 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. CAD051827834 Manifest Document No 6314 116
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
T-Chem Products Inc.
9028 Dice Rd
Santa Fe Springs CA 90670

4. Generator's Phone (562) 946-6427

A. State Manifest Document Number 96863416
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 909-421-2012
E. State Transporter's ID
F. Transporter 2 Phone
G. State Facility's ID
H. Facility's Phone 909-421-2012

5. Transporter 1 Company Name: Filter Recycling SVC
6. US EPA ID Number: CAD981414481
7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
Filter Recycling SVC.
180 W. Monte Ave
Rialto CA 92316

10 US EPA ID Number: CAD981414481

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 Number
a. NON RCRA Hazardous waste solid	001	CW	40,000	P	State 352 EPA/Other NON RCRA
b.					State EPA/Other
c					State EPA/Other
d. POff 76053					State EPA/Other

J. Additional Descriptions for Materials Listed Above
Oil Absorbent pad

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

15 Special Handling Instructions and Additional Information
wear OSHA Approved Safety wear chemtec 24 HR # 800-424-9300
E.R.G. # 128

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	Signature	Month	Day	Year
[illegible]	[signature]	09	12	97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Cedden	[signature]	09	23	97

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)
FPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type. Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96864938

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A D 0 5 1 4 8 2 7 8 4 — Manifest Document No 6616 BE
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
T.CHEM
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670
4. Generator's Phone (310) 946-4666

A. State Manifest Document Number: 96864938
B. State Generator's ID:

5. Transporter 1 Company Name: FILTER RECYCLING SERVICES
6. US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
C. State Transporter's ID:
D. Transporter's Phone: (909)421-2012

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
FILTER RECYCLING SERVICES
180 W. MONTE AVE
RIALTO, CA 92316
10. US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
G. State Facility's ID: CA0982444481
H. Facility's Phone: (909)421-2012

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 Number
a. NON RCRA HAZARDOUS WASTE SOLID	012	DM	03600	P	State 352 EPA/Other NON RCRA
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above
1.) A.) ABSORBENT PADS 9106 2325

K. Handling Codes for Wastes Listed Above
a. 14 01 b.
c. d.

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE CLOTHING
E.R.G. #128
CHEMTREC 24 HR. EMERGENCY
NUMBER 800-424-9300

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	Signature	Month	Day	Year
Patricia Johnson		05	27	97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Leddan		05	27	97

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	Signature	Month	Day	Year
J. White		05	29	97

DO NOT WRITE BELOW THIS LINE.

Yellow. TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/95)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96729337

IN CASE OF 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: CAD05148278429337 | Manifest Document No | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
T. Chem.
9028 Dice Road, Santa Fe Springs CA. 90670

4 Generator's Phone (310) 946-4666

A. State Manifest Document Number: 96729337
B. State Generator's ID:

5. Transporter 1 Company Name: Swift Oil & Vacuum
6 US EPA ID Number: CAD982488470
C. State Transporter's ID:
D. Transporter's Phone: 818-966-7224

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
Industrial Service Oil Co Inc.
1700 S. Soto St.
Los Angeles CA. 90023

10 US EPA ID Number: ~~CAD~~ CAD099452708 (RWR)
G. State Facility's ID: CAD099452708
H. Facility's Phone: 213-262-9747

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 Number
a. Petroleum oil Combustible Liquid, UN 1270 PG III	001	TT	00200	G	State 221 / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
Used Oil 95%
Water 5%

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

15. Special Handling Instructions and Additional Information
Chem TREC 24 Hr. Emergency Number 1-800-424-9300
Wear Appropriate protective clothing Gloves & Boots.
Emergency Response Guide Book Guide 27

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	Signature	Month	Day	Year
Darrell Johnson		05	28	97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Richard W. Rozyk		05	28	97

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	Signature	Month	Day	Year
Carlos Reyna V.		05	28	97

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/95)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96729337

IN CASE OF 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. CAD051482784 — Manifest Document No 2937 — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
T. Chem.
9028 Dice Road, Santa Fe Springs CA. 90670
4. Generator's Phone (310) 946-4666

A. State Manifest Document Number 96729337
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 818-966-7224
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID CAD099452708
H. Facility's Phone 213-262-9747

5. Transporter 1 Company Name: Swift Oil & Vacuum — 6. US EPA ID Number: CAD982488470
7. Transporter 2 Company Name — 8 US EPA ID Number

9. Designated Facility Name and Site Address
Industrial Service Oil Co. Inc.
1700 S. Soto St.
Los Angeles CA. 90023
10. US EPA ID Number: CAD099452708 (RWR)

11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste Number
a. Petroleum oil Combustible liquid, un1270 PG III	001	TT	00200	G	State 221 / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
Used oil 95%
Water 5%

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

15. Special Handling Instructions and Additional Information
Chem TREC 24 Hr. Emergency Number 1-800-424-9300
Wear Appropriate protective clothing Gloves & Boots
Emergency Response Guide Book Guide # 27

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: Bernard Tomasz — Signature — Month 05 Day 28 Year 97

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard W. Rozik — Signature — Month 05 Day 28 Year 97

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 — Signature — Month Day Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved, OMB No. 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

96864938

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A D 0 5 1 4 8 2 7 8 4 — Manifest Document No. 38 — 2. Page 1 of — Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
T.CHEM
9028 DICE ROAD, SANTA FE SPRINGS, CA 90670
4. Generator's Phone (310 946-4666

A. State Manifest Document Number: 96864938
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: (909)421-2012
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (909)421-2012

5. Transporter 1 Company Name: FILTER RECYCLING SERVICES
6. US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address:
FILTER RECYCLING SERVICES
180 W. MONTE AVE
RIALTO, CA 92316
10. US EPA ID Number: C A D 9 8 2 4 4 4 4 8 1

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 Number
a. NON RCRA HAZARDOUS WASTE SOLID	012	DM	013600	P	State 352 / EPA/Other NON RCRA
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above: #1.) ABSORBENT PADS
K. Handling Codes for Wastes Listed Above: a. b. c. d.

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE CLOTHING
E.R.G. #128
CHEMTREC 24 HR. EMERGENCY NUMBER 800-424-9300

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	Signature	Month	Day	Year
[illegible]	[signature]	05	17	97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Sean Leddy	[signature]	05	21	97

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No	Manifest Document No.	2 Page 1 of	Information in the shaded areas is not required by Federal law
C A D 0 9 8 4 8 7 8 4 7 0 5			

GENERATOR

3. Generator's Name and Mailing Address
[illegible] PRODUCTS INC.
[illegible]
SANTA FE SPRINGS, CA 90670
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number: 96031307
B. State Generator's ID:

5. Transporter 1 Company Name: ENGARD ENVIRONMENTAL SERVICES
6. US EPA ID Number: C A D 9 8 1 3 6 2 1 1
C. State Transporter's ID:
D. Transporter's Phone: (818) 855-1200

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
SOUTHWEST ENVIRONMENTAL
12615 S. MAIN ST.
LOS ANGELES, CA 90061
10. US EPA ID Number: C A D 0 0 3 0 6 8 2 5 2
G. State Facility's ID:
H. Facility's Phone: (213) 756-7896

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 Number
a. NON RCRA HAZARDOUS WASTE, SOLID (OIL & ABSORBANT)	004	D M	01200	P	State 352 / EPA/Other NONE
b. NON-RCRA HAZARDOUS WASTE, SOLID (BLEACH AND ABSORBENT)	012	D M	06000	P	State 181 / EPA/Other NONE
c. NON-RCRA HAZARDOUS WASTE, SOLID (AMMONIA AND ABSORBENT)	002	D M	00600	P	State 181 / EPA/Other NONE
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) OIL & ABSORBENT - SES #38843
11b) BLEACH & ABSORBENT SES #38851-A
11c) AMMONIA & ABSORBENT SES #38851-A

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

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE GEAR. 24 HR. PHONE 818-855-1200
a) NONE b) NONE c) NONE

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	Signature	Month	Day	Year
[illegible]	[signature]	01	16	

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Nicolas Mirabal	[signature] Mirabal	01	16	

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

96031307

DTSC 8022A (1/95)
EPA 8700—22

Yellow: GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. CAD059148278 Manifest Document No 2 Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9026 TICE RD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (310) 946-0427

A. State Manifest Document Number 96031307

B. State Generator's ID

5. Transporter 1 Company Name: ISLAND ENVIRONMENTAL SERVICES
6 US EPA ID Number: CAD981762213

C. State Transporter's ID

D. Transporter's Phone (818) 855-1200

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
STATEWIDE ENVIRONMENTAL
12618 S. MAIN ST.
LOS ANGELES, CA 90061

10 US EPA ID Number: CAD009088252

G. State Facility's ID CAD009088252

H. Facility's Phone (213) 756-7896

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 Number
a. NON-RCRA HAZARDOUS WASTE, SOLID (OIL & ABSORBANT)	004	D M	011200	P	State 352 / EPA/Other NONE
b. NON-RCRA HAZARDOUS WASTE, SOLID (BLEACH AND ABSORBENT)	012	D M	03600	P	State 181 / EPA/Other NONE
c. NON-RCRA HAZARDOUS WASTE, SOLID (AMMONIA AND ABSORBENT)	002	D M	00600	P	State 181 / EPA/Other NONE
d					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) OIL & ABSORBENT SES #38843
11b) BLEACH & ABSORBENT SES #38851-A
11c) AMMONIA & ABSORBENT SES #38851-A

K. Handling Codes for Wastes Listed Above
a. 14-03 b. 14-03 c. 14-03 d.

15 Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE GEAR. 24 HR. PHONE 818-855-1200
ERG 11 a) NONE b) NONE c) NONE

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	Signature	Month	Day	Year
Renaee Carlson		01	16	

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Theodore Meredith		01	16	

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	Signature	Month	Day	Year
Linda Nunez		01	16	

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/95)
EPA 8700—22

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

96031307

1996
178*
10,
7 5 Tons
06

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type. Form designed for use on elite (12-pitch) typewriter.

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No.	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law.
CAD051482784	61764		

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9020 DICE RD.
SANTA FE SPRINGS CA 90670
4. Generator's Phone (310) 946-0427

A State Manifest Document Number: 95157356
B. State Generator's ID:
C. State Transporter's ID: 102030
D. Transporter's Phone: (818) 855-1200
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAD000882852
H. Facility's Phone: (213) 756-7896

5 Transporter 1 Company Name: ISLAND ENVIRONMENTAL SERVICES
6 US EPA ID Number: CAD982137623

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

9. Designated Facility Name and Site Address
STATEWIDE ENVIRONMENTAL
12613 S. MAIN ST.
LOS ANGELES, CA 90061
10 US EPA ID Number: CAD000882852

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 Number
a. NON RCRA HAZARDOUS WASTE, SOLID (OIL & ABSORBANT)	024	DM	02200	P	State 223 / EPA/Other None
b. NON RCRA HAZARDOUS WASTE, SOLID (ABSORBENT AND BLEACH)	006	DM	00440	P	State 181 / EPA/Other None
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11a) ABSORBANT & OIL SES #38843-A
11b) ABSORBENT & BLEACH SES#38851-A

K. Handling Codes for Wastes Listed Above
a. 14-01 b. 14-03 c. d.

15. Special Handling Instructions and Additional Information
USE APPROPRIATE PROTECTIVE GEAR. 24 HR. PHONE 818-855-1200
ERG 11 a) NONE b) NONE

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	Signature	Month	Day	Year
JAIME CASTRO		08	22	97

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
A. A. VICE		08	22	97

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	Signature	Month	Day	Year
OMAR MONREAL		08	22	97

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/95)
EPA 8700—22

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-0

ate of California—Environmental Protection Agency
Form Approved OMB No 2050–0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No.	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 4 Generator's Phone ( )	A. State Manifest Document Number 95157326 B. State Generator's ID
5. Transporter 1 Company Name / 6 US EPA ID Number	C. State Transporter's ID D. Transporter's Phone (818) 505-1200
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 / 10 US EPA ID Number	G. State Facility's ID H. Facility's Phone (213) 756-7896

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 Number
a. [illegible] HAZARDOUS WASTE, SOLID, N.O.S. [illegible]	003	TC	01/2008		State 223 EPA/Other NONE
b. [illegible] HAZARDOUS WASTE, SOLID, N.O.S. [illegible]	1	TC	01600		State 181 EPA/Other NONE
c. [illegible] HAZARDOUS WASTE, LIQUID, N.O.S. (MLM)	001	DF	000055		State 335 EPA/Other NONE
d. [illegible] HAZARDOUS WASTE, LIQUID, N.O.S. [illegible]	001	DF	000555		State 135 EPA/Other NONE

J. Additional Descriptions for Materials Listed Above
J.A. SEE ATTACHED PROFILE SES #28875-A
J.B. SEE ATTACHED PROFILE SES #32551-A
J.C. SEE ATTACHED PROFILE SES # 35795-1
J.D. SEE ATTACHED PROFILE SES # 32120-2

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

15 Special Handling Instructions and Additional Information
[illegible] FOR PICKUP 818-505-1200 [illegible] PHONE

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	Signature	Month	Day	Year
[illegible]	[signature]	01	28	

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	01	28	

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	Signature	Month	Day	Year

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

95157326

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

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

GENERATOR

3 Generator's Name and Mailing Address	A. State Manifest Document Number: 96357326
4. Generator's Phone ( )	B. State Generator's ID
5. Transporter 1 Company Name / 6 US EPA ID Number: PLANT ENVIRONMENTAL SERVICES	C. State Transporter's ID D. Transporter's Phone: (818)855-1200
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 / 10. US EPA ID Number: STATEWIDE ENVIRONMENTAL, 1261 E. 50TH ST, LOS ANGELES, CA 90011	G. State Facility's ID: CAD000882522 H. Facility's Phone: (213)756-7896

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 Number
a. NON-RCRA HAZARDOUS WASTE, SOLID (OIL AND ABSORBENT)	12	M	01260		State 223 EPA/Other NONE
b. NON-RCRA HAZARDOUS WASTE, SOLID (ABSORBENT AND DEBRIS)	14	M	01680		State 181 EPA/Other NONE
c. NON-RCRA HAZARDOUS WASTE, LIQUID (POLYMER)	001	M	00055	G	State 135 EPA/Other NONE
d. NON-RCRA HAZARDOUS WASTE, LIQUID (DISTILLATE)	001	F	00055	G	State 135 EPA/Other NONE

J. Additional Descriptions for Materials Listed Above	K. Handling Codes for Wastes Listed Above
11A. SEE ATTACHED PROFILE SES #28875-A 11B. SEE ATTACHED PROFILE SES #32553-A 11C. SEE ATTACHED PROFILE SES # 35128-A 11D. SEE ATTACHED PROFILE SES # 35720-A	a. 1401 b. 1403 c. 1401 d. 1401

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE GEAR. 24 HR. PHONE 818-855-1200 NO 12 SHOULD BE 31
EPA ID a) NONE b) NONE c) NONE d) NONE

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	Signature	Month	Day	Year
Dragan Cvijanovich		05	21	96

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Name	Signature	Month	Day	Year
Jose Lugo		05	21	
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	Signature	Month	Day	Year
ABE OVEVARA		05	24	

DO NOT WRITE BELOW THIS LINE.

Yellow- TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who transmit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (1/95)
EPA 8700—22

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

96357326

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

7-088-06

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

960/1490

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-0

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD051482784 Manifest Document No. 77720
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address T-CHEM PRODUCTS INC.
9028 DICE RD.
SANTA FESPRINGS CA 90670
4. Generator's Phone (310 906-2219

A. State Manifest Document Number 96071490
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800 669-5740
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID CAT000613893
H. Facility's Phone 818 401-2616

5. Transporter 1 Company Name SAFETY-KLEEN CORP.
6. US EPA ID Number ILD 984908202

7. Transporter 2 Company Name
8 US EPA ID Number

9. Designated Facility Name and Site Address 000798
SAFETY-KLEEN CORP.
10625 HICKSON ST UNIT A/C
EL MONTE, CA 91731
10. US EPA ID Number CAT 000613893

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 Number
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D035, D039, D040) (ERG#27)	001	DM	00013	G	State 741 EPA/Other D001
b					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
I(A) D039 D018 (A) D006, D008, D035, D040

K. Handling Codes for Wastes Listed Above
a. 14 AND 01 b.
c. d.

15. Special Handling Instructions and Additional Information 9612 91561247 577720 7-088-06-2789 LZ
EMERGENCY RESP#800-468-1760 24HR

SKDOT# A: 501 525 B: C: D:

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	Signature	Month	Day	Year
		04	07	96

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Bob Helmer	Bob Helmer	04	07	96

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space
W/I - Changed to reflect non-RQ waste.

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

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (1/95)
EPA 8700—22

Yellow· GENERATOR RETAINS

Safety-Kleen

1000 North Randall Road
Elgin, Illinois 60123-7857

WE CARE.

FOR SERVICE CALL

TRANSPORTER
818 372-4085 RICK LEE

DUNS NO 05106-0408 FED ID NO 39-6090019

SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
96-12	LZ	277[illegible]6

CREDIT CODE	PREV BALANCE	BAL OVER 60 DAYS

BUSINESS TYPE	CHAIN	OUTER COUNTY	SVC P/C	PROD P/C
67	NC	NL	601	61[illegible]

TAX EXEMPTION NUMBER

CUSTOMER

GENERATOR
7-013-00-2758-2
FULLER PRODUCTS INC.
[illegible] 51ST AVE.
SANTA FE SPRINGS CA 90670

BILL TO

SERVICE DATE	SALES REP NO	CUSTOMER P O NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE		ASSOC CODE	SERVICE TAX	C O M S TAX	PRODUCT TAX
4-09-96	63535		310-906-2215	19-095-6001				2.25		1.02

	WM JOB NUMBER	REMARKS	QUAN	CHARGE	SALES TAX	TOTAL CHARGE	WM DISCOUNT	SOLVENT CLEAN	SOLVENT SPENT	SOLVENT # OF CONT	SOLVENT SK DOT	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH DATE (YY WW)	INV CODE	PROMO NO	RELEASE RELEASE NO
1	63535	3070052	Full Code 6	1	[illegible]	[illegible]	0.00			1	595	L	15					
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		
	TOTAL-SERVICE/PRODUCTS			[illegible]	[illegible]	[illegible]	0.00											

CHECK APPROPRIATE BOXES →

	GOOD	POOR
MACHINE CONDITION & CLEANLINESS	☐	☐
FUSIBLE LINK INSTALLED	☐	☐
LAMP ASSEMBLY CONDITION	☐	☐
EMERGENCY CLOSING OF LID UNOBSTRUCTED	☐	☐

	YES	NO
DECALS IN PLACE AND LEGIBLE	☐	☐
MACHINE PROPERLY GROUNDED	☐	☐
LOCAL PHONE NO STICKER AFFIXED TO MACHINE	☐	☐
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☒	☐

MANIFEST NO.	USEPA TRANSPORTER ID NO	GENERATOR USEPA ID NO	GENERATOR STATE ID NO
96071490	[illegible]	CAD051482784	

11 US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

		12 CONTAINERS NO	12 CONTAINERS TYPE	13 TOTAL QUANTITY	14 UNIT WT/VOL	SK DOT NUMBER			
A	[illegible] CORROSIVE LIQUID, N.O.S. (PETROLEUM NAPHTHA) (WASTE FLAMMABLE) 6100, E006, E01B, D002, D035, D040 (ERG 27)	1	DM	13		595			1
B.									
C.									
D									

I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES

0 TO 220 LBS /MONTH — INITIALS

220 LBS TO 2 200 LBS /MONTH — INITIALS

GREATER THAN 2200 LBS /MONTH — INITIALS

DESIGNATED FACILITY NAME AND ADDRESS [illegible] SAFETY-KLEEN CORP.
[illegible] HICKSON ST UNIT A/L EL PASO, CA 91731

USA EPA ID NO [illegible]
STATE ID NO. [illegible]

PAYMENT RECEIVED SECTION

CASH ☐	TOTAL RECEIVED	APPLY PAYMENT TO
CHECK NUMBER		☐ TODAY'S SERVICE/SALE ☐ PREVIOUS BALANCE AS FOLLOWS

INVOICE #	AMOUNT $	INVOICE #	AMOUNT $

PREVIOUS CREDIT CARD NO →

CREDIT CARD NO. | AMEX VISA MC | EXP. DATE

CONSUMER REFERENCE INFORMATION

LDR MESSAGE
LDR REQ'D

MANIFEST CODE	SEQ #
10	271

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hour

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION THE RECLAMATION AGREEMENT, ADDITIONAL TERMS AND CONDITIONS, AND OTHER INFORMATION APPEARING ON THE REVERSE SIDE ARE MADE A PART HEREOF

TOTAL CHARGE (FROM ABOVE)	0
WM DISCOUNT (FROM ABOVE)	
TOTAL DUE	0

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for the transportation according to the applicable regulations of the Department of Transportation.

Print Name JOHN HUNT X

GENERATOR/DESIGNATED REPRESENTATIVE SIGNATURE

SERVICE AND SALES ACKNOWLEDGMENT

(8/95)

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

7-088-06 **See Instructions on back of page 6.**

Department of Toxic Substances Control
Sacramento, California

96071490

IN CASE OF 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. CAD051482784 Manifest Document No 77720
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address T-CHEM PRODUCTS INC.
9028 DICE RD.
SANTA FESPRINGS CA 90670
4. Generator's Phone (310 906-2219

A. State Manifest Document Number 96071490
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800 669-5740
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID CAT000613893
H. Facility's Phone 818 401-2616

5. Transporter 1 Company Name SAFETY-KLEEN CORP.
6. US EPA ID Number ILD 984908202
7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address 000798 SAFETY-KLEEN CORP.
10625 HICKSON ST UNIT A/C
EL MONTE, CA 91731
10. US EPA ID Number CAT 000613893

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 Number
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D035, D039, D040) (ERG#27)	001	DM	00013	G	State 741 EPA/Other D001
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above
1(A) D039 D018 (A) D006, D008, D035, D040

K. Handling Codes for Wastes Listed Above
a. 14 AND 01 b. c. d.

15. Special Handling Instructions and Additional Information 9612 91561247 577720 7-088-06-2788 LZ
EMERGENCY RESP#800-468-1760 24HR

SKDOT# A: 501 505 B: C: D.

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	Signature	Month	Day	Year
James Alcaide		04	09	

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Bob Helmer	Bob Helmer	04	07	

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space
#11 - Changed to reflect non-RQ waste.

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

Printed/Typed Name	Signature	Month	Day	Year
Mimi Kunner		04	10	

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/95)
EPA 8700—22

State [illegible]ornia—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. | 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

4. Generator's Phone ( )

A. State Manifest Document Number: 95872244

B. State Generator's ID

C. State Transporter's ID: 620367

D. Transporter's Phone: (818)855-1200

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

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 | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone: (213)756-2896

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 Number
a. [illegible] PAINT RELATED MATERIAL, 3, UN1263, [illegible]	[illegible]	DM	[illegible]		State 461 EPA/Other D001
b. [illegible] SPARGE WASTE, POLIE (BLEACH AND [illegible]	[illegible]	DM	[illegible]	P	State 181 EPA/Other NONE
c. [illegible] HAZARDOUS WASTE, STATE ONLY, NOS [illegible]	[illegible]	DM	[illegible]	P	State [illegible] EPA/Other NONE
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above
11A. 90-10% PAINT SBS #32552-A
11B. 75-5% ABSORBENT, 1-26% BLEACH SBS #32553-A
11C. 50-25% ABSORBENT, 5-25% OIL SBS #26875-A

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

15. Special Handling Instructions and Additional Information
[illegible] 24 HR. PHONE [illegible]

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	Signature	Month	Day	Year
		5		

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Wesley Meredith	Claudio Machado	05	14	1

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

95872244

DTSC 8022A (1/95)
EPA 8700—22

Yellow. GENERATOR RETAINS

EPA No CAD981376213
STATE ID NO 1045
CA 627
DOT 465272

ISLAND ENVIRONMENTAL SERVICES, INC.

Waste Management & Transportation

TRANSPORTATION RECEIPT

WORK ORDER/INVOICE NO. 960330

Established 1982

13912 "A" VALLEY • CITY OF INDUSTRY, CA 91746 • (800) 400-4347 • (818) 855-1200 • FAX (818) 333-4141

Contact DERRELL
Job Site T-CHEM PRODUCTS, INC.
Address 9028 DICE RD.
SANTA FE SPRINGS, CA 90670
X ST

Phone (310)946-6427
Hours 8-3

Bill To T-CHEM PRODUCTS, INC.
9028 DICE RD.
SANTA FE SPRINGS, CA 90670

EPA NO CAD051482784
PO NO. 73507

Fac /Cont./Waste Codes 19-DRUMS

Customer No. TCHE
Date 2/16/96
Driver
Unit No.

Referred by 86

Appointment Day 2/19/96 Time:

Facility STATEWIDE ENVIRONMENTAL
12618 S. MAIN ST.
LOS ANGELES, CA
EPA No. CAD000088252 90061
Phone (213)756-7896
Disposal Ticket No.
Manifest No. 60330
Approval No

Special Inst. REMOVE 6 OIL/ABSORB. 5 BLEACH/ABSORB. AND 1 PAINT RELATED DRUMS
"See NOTE"

TOMER SIGNATURE

Dionne M Johnson 2/19/96
PRINT NAME DATE

DRIVER SIGNATURE SHIP DATE

PRODUCT SHIPPED

DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT

☐ Oil and Water, Non-RCRA Hazardous Waste, Liquid ☐ Lubricating ☐ Industrial
☐ Waste Combustible Liquid
☐ Waste Flammable Liquid
☐ Non-RCRA Hazardous Waste Liquid
☐ Oily Water
☐ Water Soluble Oil
☐ Non-Hazardous Waste Water & Sludge
☐ Used Oil Filters
☑ Other Non RCRA Hazardous Waste Solid 10 dms

OTHER CHARGES

☐ Service Charge ☐ Time Only
☐ Chlor Test ☐ Pos ☐ Neg
☐ Profile
☐ Analytical
☐ Disposal Fees – Solids
☐ Disposal Fees – Liquids
☐ Empty Drum Disposal
☐ Empty Drums Supplied
☐ Transportation
☐ Washout
☐ California State Manifesting Fee
☐ Other

PLEASE REMIT – *Thank you*

Tax (on supplies only)
Paid on Account Check ☐ Cash ☐
Balance

NOTE THIS IS AN INVOICE AS WELL AS A MODIFIED MANIFEST FOR THE DISPOSAL OF YOUR WASTE.
THE TERMS OF THIS INVOICE ARE NET 10 DAYS UPON RECEIPT
DELINQUENT ACCOUNTS SUBJECT TO A CHARGE OF 1½% PER MONTH (ANNUAL RATE 18%)

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2 Page 1 of	Information in the shaded areas is not required by Federal law.
CAD981482806		0	

3. Generator's Name and Mailing Address
[illegible]
[illegible], CA 90670
4 Generator's Phone ( ) [illegible]

A. State Manifest Document Number: 95872244

B. State Generator's ID:

5 Transporter 1 Company Name — **6 US EPA ID Number**
ISLAND ENVIRONMENTAL SERVICES — CAD981372121

C. State Transporter's ID: 620367

D. Transporter's Phone: (818) 855-1200

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 — **10 US EPA ID Number**
STATEWIDE ENVIRONMENTAL
12615 S. MAIN ST.
LOS ANGELES, CA 90061 — CAD008252952

G. State Facility's ID: CAD008252952

H. Facility's Phone: (213) 756-7896

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 Number
a. RQ WASTE PAINT RELATED MATERIAL, 3, UN1263, PGII (D001)	001	DM	00105	G	State 461 EPA/Other D001
b. NON-RCRA HAZARDOUS WASTE, SOLID (BLEACH AND ABSORBENT)	003	DM	01200	P	State 181 EPA/Other NONE
c. NON-RCRA HAZARDOUS WASTE, SOLID (OIL AND ABSORBENT)	001	DM	02400	P	State 223 EPA/Other NONE
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above
11A. 90-100% PAINT SBS #32552-A
11B. 75-99% ABSORBENT, 1-26% BLEACH SBS #32553-A
11C. 50-75% ABSORBENT, 5-25% OIL SBS #28875-A

K. Handling Codes for Wastes Listed Above
a. 1401 1480 b. 1405
c. d.

15 Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE GEAR. 24 HR. PHONE 818-855-1200
ERG 11 & 27 b) NONE c) NONE

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	Signature	Month	Day	Year
[illegible]	[signature]	0	2	19

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Theodore Meredith	[signature]	0	2	19

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	Signature	Month	Day	Year
JOHN BOVARA	[signature]	02	19	

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (1/95)
EPA 8700—22

95872244

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

GENERATOR

TRANSPORTER

FACILITY

SP-501-HG (S1F) REV 7 (1-96)

PO BOX 942879
SACRAMENTO, CA 94279-0057

John H.

STATE OF CALIFORNIA
BOARD OF EQUALIZATION
(916) 323-9555

HAZARDOUS WASTE GENERATOR FEE AND WASTE REPORTING SURCHARGE FEE RETURN

BOARD USE ONLY		
REG	RR	PR
TR	AUD	NR
REF	QD	PI
FILE		
EFF		

READ INSTRUCTIONS BEFORE PREPARING

Make changes if name or address is incorrect

DUE ON OR BEFORE 2/29/96 FOR JANUARY - DECEMBER, 1995

Mail To HWCA **RVHG03** 9195 Account Number HA HQ 36-045719 8

STATE BOARD OF EQUALIZATION
ENVIRONMENTAL FEES DIVISION
PO BOX 942879
SACRAMENTO CA 94279-6009

T-CHEM PRODUCTS INC.
ATTEN: GREG WIESE
9028 DICE ROAD
SANTA FE SPRINGS CA 90670

9028 DICE ROAD, SANTA FE SPRINGS
CAL000028326

EXTREMELY HAZARDOUS WASTE QUESTIONNAIRE (See instructions on reverse)		YES	NO
1a. Did you produce extremely hazardous waste in 1995?	1a.		
1b. Do you anticipate producing extremely hazardous waste in 1996?	1b.		

Please complete the remaining areas of this return once the questions above have been answered.

A CLASSIFICATION OF GENERATING SITES (Based on amounts of hazardous waste generated during the calendar year or portion thereof)		B NUMBER OF SITES (Do not list tonnage)	C AMOUNT OF FEES	D TOTAL FEES DUE (Column B x C)
2. Generators which generate less than 5 tons	2.		0.00	0.00
3 Generators which generate an amount equal to or more than 5 tons, but less than 25 tons	3.		170.00	—
4. Generators which generate an amount equal to or more than 25 tons, but less than 50 tons	4.		1368.00	—
5. Generators which generate an amount equal to or more than 50 tons, but less than 250 tons	5.		3421.00	—
6. Generators which generate an amount equal to or more than 250 tons, but less than 500 tons	6.		17102.00	—
7. Generators which generate an amount equal to or more than 500 tons, but less than 1,000 tons	7		34204.00	—
8 Generators which generate an amount equal to or more than 1,000 tons, but less than 2,000 tons	8		51305.00	—
9. Generators which generate an amount equal to or more than 2,000 tons	9.		68408.00	—
10. Total amount of fees *(add amounts in Column D, lines 2 through 9)*			10.	$ 0.00
11 See instructions for credit for local fees			11	-$ —
12 Total amount of fees due *(subtract line 11 from line 10; if line 12 is less than zero, enter zero)*			12.	$ 0.00
13. Penalty *[multiply line 12 by 10% (.10) if payment is made after the due date shown above]*		PENALTY	13.	$ —
14 INTEREST OF 12% PER ANNUM (0.010000 PER MONTH) IS DUE IF PAYMENT IS MADE AFTER THE DUE DATE.		INTEREST	14	$ —
15. TOTAL AMOUNT DUE AND PAYABLE *(add lines 12, 13 and 14)*			15.	$ 0.00

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return

PRINT/TYPE NAME AND TITLE	SIGNATURE	PHONE NUMBER	DATE
GREG WIESE EXEC V.P.	Greg J Wiese	(310) 946-6427	2/16/96

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION
Always write your account number on your check or money order Make a copy of this document for your records.

T-CHEM PRODUCTS INC. 9028 DICE RD SANTA FE SPRINGS CA. 90670

HAZARDOUS WASTE DISPOSAL LOG AND FEE WORK SHEET

Reporting Period : January To December 1995

DRUMS SHIPPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST #	OUT OF STATE	DATE	NO
2	250	O, AF	15/03	LAIDLAW	93603476	No	02/03/95	1
5	1300	B,D,O,AF	03/D81	LAIDLAW	93603573	No	03/03/95	2
2	400	B,D	03/D81	LAIDLAW	95362150	No	04/17/95	3
5	1000	O,AF, B, D	03/D81	LAIDLAW	95199339	No	06/21/95	4
1*	2500	O & H20	15/03	LAIDLAW	95130798	No	06/30/95	5
							Jan-Jun	
15<<	**5450<<<<**	<<<<<<<<	<<<<<<<<	<<<<<<<<<<<<	<<<<<<<<<	<<<<<<	**Total>>**	**5**
13	650	O & H20	14 (15)	LAIDLAW	95362125	Yes(AZ)	07/27/95	6
Tote 2	4020	Surfactants	03/D81	LAIDLAW	95130783	No	07/10/95	7
6	330	O	14/03	ISLAND ENV.	95585914	No	09/06/95	8
2	600	O	14/03	ISLAND ENV	95132663	No	09/06/95	9
								10
								11
00	0000	<<<<<<<<	<<<<<<<<	<<<<<<<<<<<<	<<<<<<<<<	<<<<<<	**Jul -Dec**	
							Total>>	**4**
23<	**5600<<<<**	<<<<<<<<	<<<<<<<<	<<<<<<<<<<<<	<<<<<<<<<	<<<<<<	**1995**	
	7030<<<<						**Total>>**	**11**
				Reporting Period.	Jan To Dec.	1996		
10	3655	Paint,O&B	14/01/&03	ISLAND ENV.	95872244	No	02/19/96	1
1*	13	Pet. Naptha	14/01	SAFETY KLEEN	96071490	No	04/09/96	2
9	2910	O,B,Ply,Di.	14/01/&03	ISLAND ENV.	96157326	No	05/24/96	3
							Jan-Jun	
20	**6578**	<<<<<<<	<<<<<<<	<<<<<<<<<<<	<<<<<<<<	<<<<<	**Total>>**	**3**
10	3600	O & B	14/01&03	ISLAND ENV.	96157556	No	08/21/96	4
							Jul-Dec	
10	**3600**	<<<<<<<<	<<<<<<<<	<<<<<<<<<<<<	<<<<<<<<<	<<<<<<	**Total>>**	**1**
							1996	
30	**10,178**	<<<<<<<<	<<<<<<<	<<<<<<<<<<<	<<<<<<<<	<<<<<	**Total>>**	**4**
				Reporting Period:	Jan To Dec. 1997			
12	4800	O,B, Am	14/03	ISLAND ENV.	96031307	No	01/10/97	1
12	3600	O/B Pads	14/01	FILTER RECYC	96864938	No	05/27/97	2
1	200	Oil & H2o	01	SWIFT OIL & VA	96729337	No	05/20/97	3
1	1000	A/B Pads	01	FILTER RECYC.	96863416	No	09/23/97	4
2	2400	O/B Pads	01	FILTER RECYC.	96863127	No	11/03/97	5
28	**2800**	<<<<<<<<	<<<<<<<<	<<<<<<<<<<<<<	<<<<<<<<<	<<<<<<	<<<<<<	**5**

al Protection Agency
2050-0039 (Expires 9-30-94)
Form designed for use on elite (12-pitch) typewriter.

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. CAD005148278 | Manifest Document No 4040435 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address T-CHEM PRODUCTS, INC.
9028 DICE Rd.
SANTA FE SPRINGS, CA. 90670

4 Generator's Phone (310) 906-2219

A State Manifest Document Number: 9360476

B State Generator's ID: HAH036045719

5 Transporter 1 Company Name: LAIDLAW ENVIRONMENTAL SERVICE OF CALIFORNIA INC.

6. US EPA ID Number: CAD000083121

C State Transporter's ID: 491850

D Transporter's Phone: (909) 608-7166

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: LAIDLAW ENVIRONMENTAL LOKERN, INC.
3500 LOKERN ROAD.
Box 787 BUTTONWILLOW, CA 93206

10. US EPA ID Number: CAD980675216

G State Facility's ID

H Facility's Phone: (805) 762-7372

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 Number
NON RCRA HAZARDOUS WASTE SOLID	002	DM	00250	P	State 352
					EPA/Other N/A
b.					State
					EPA/Other
c					State
					EPA/Other
d.					State
					EPA/Other

J Additional Descriptions for Materials Listed Above: 1(A) 2X55 GAL ANTIFREEZE CONT. ABSORBENT #3267-BDC1294

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

15 Special Handling Instructions and Additional Information
WEAR APPROPRIATE SAFETY EQUIPMENT
*EMERGENCY CONTACT # (310) 906-2219

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	Signature	Month	Day	Year
* JOHN HOWARD		05	31	95

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MARCUS VAUGHN		05	31	95

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

GENERATOR

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

9360476

DTSC 8022A (9/93)
EPA 8700—22

Yellow GENERATOR RETAINS

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES

1369 W. 9th Street
Upland, CA 91786
909-983-0342 • 800-929-3274

CUSTOMER/ACCT NO. 3807

WORK ORDER NO. HAH036645 409135

BILLING ADDRESS

T-CHEM PRODUCTS, INC.
9028 DICE RD
SANTA FE SPRINGS, CA
90670

SERVICE ADDRESS

9028 DICE RD
SANTA FE SPRINGS, CA
90670

ORDER DATE	DATE TO BE DONE	CUSTOMER'S P.O.#	ORDERED BY	TELEPHONE #	CONTACT PERSON
1/26/95		VERBAL - JOHN			JOHN HOUCK
LES REP	**LES DIV #**	**LES DEPARTMENT**	**CUSTOMER'S EPA**	**CUSTOMER'S BOE #**	**CONTACT PHONE #**
MK	01		CAD051482784		

PICK UP:

2 x 55 "OIL & ANTIFREEZE CONT. ABSORBENT (12867-BDC-1294)

TRANSPORT TO LESI / LOKERN

DELIVER:

4 x 55 O/T METAL DRUMS

PLEASE ASSIST CUSTOMER WITH MANIFEST AND/OR
PLEASE CONTACT CUSTOMER WITH PICK UP TIME AND DATE

PICK UP 2X55 # 12867-BDC-1295

SPECIAL INSTRUCTIONS _____

DRIVE COMPLETE

Manifest Number 93603476 Date Completed 1-31-95 Drivers Name MARCUS VAUGHN

Comments _____

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature _____

LAIDLAW ENVIRONMENTAL SERVICES

NON-RCRA

NON-RCRA WASTE NOTIFICATION & CERTIFICATION FORM FOR COMPLIANCE WITH THE CALIFORNIA 22 CCR CHAPTER 18 LAND DISPOSAL RESTRICTION (LDR) TREATMENT STANDARDS

INSTRUCTIONS: Complete all portions of Part I. If the waste is *non-hazardous*, then complete only the applicable portions in Part I and then sign and date the Form B at the bottom of page #2. Mark (✓) the appropriate box in Part II, the appropriate box in Part III, and then sign and date this Form B at the bottom of page #2. To complete this form correctly, only one box should be marked in Part II and *probably* only one box in Part III.

I. GENERAL INFORMATION REGARDING GENERATOR & WASTE STREAM:

As required by 22 CCR § 66268.7(a), the following information is submitted to Laidlaw Environmental Services for waste accepted at either the Lokern facility or the Imperial Valley facility to comply with the required generator notification and certification requirements associated with the Non-RCRA land disposal restriction treatment standards applicable to the waste stream referenced below:

GENERATOR'S NAME: T-CHEM PHONE: 310-906-2219

SITE LOCATION: SANTA FE SPRINGS, CA 90670

GENERATOR'S WASTE PROFILE NUMBER: 12867-BOC-1294

IS THIS WASTE *NON*-HAZARDOUS? ☒ NO, ☐ YES *(If YES, stop here and sign/date form at the bottom of page #2)*

GENERATOR'S EPA ID #: CAD051482784 MANIFEST #: 93603476

CALIFORNIA WASTE CODE(S): 352 *(for RCRA wastes, use Laidlaw FORM A)*

THIS NOTIFICATION & CERTIFICATION IS BASED ON THE FOLLOWING WASTE STREAM INFORMATION:

☐ (A) CHEMICAL/PHYSICAL ANALYSIS OF THE WASTE; ☐ (B) GENERATOR KNOWLEDGE OF THE WASTE; OR ☒ (C) BOTH

II. TYPE OF NON-RCRA LDR NOTIFICATION/CERTIFICATION:

☐ 1. ◄ **NOTIFICATION ONLY: NON-RCRA WASTES THAT CURRENTLY REQUIRE TREATMENT TO MEET THE 22 CCR ARTICLE 11 TREATMENT STANDARDS:** = 22 CCR §66268.7(a)(1)

☒ 2. ◄ **NOTIFICATION & CERTIFICATION: NON-RCRA WASTE THAT MEETS THE 22 CCR ARTICLE 11 TREATMENT STANDARDS, NO ADDITIONAL TREATMENT REQUIRED:** = 22 CCR §66268.7(a)(2)

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification, that the waste complies with the treatment standards specified in CCR Title 22, Division 4.5, Chapter 18, Articles 4 and 11 and all applicable prohibitions set forth in CCR Title 22, Section 66268.32 or RCRA Section 3004(d)(42 U.S.C. Section 6924(d)). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine or imprisonment.

☒ 3. ◄ **NOTIFICATION ONLY: NON-RCRA WASTE SUBJECT TO AN APPROVED VARIANCE, VARIANCE EXTENSION, OR EXEMPTION TO THE 22 CCR ARTICLE 11 TREATMENT STANDARDS:**

▸ **DATE WASTE IS SUBJECT TO PROHIBITION:** January 1, 1995 = 22 CCR §66268.7(a)(3)

Note from Laidlaw: Recent legislation, SB-611 (Calderon, 1992), requires pursuant to H&SC § 25179.7(e), all generators of waste subject to a treatment standard which has had the effective date of the required treatment delayed by a variance extension must provide DTSC ("the Department"), not Laidlaw, with the following information during the period of the variance extension: 1. A summary report describing the generator's efforts to prevent or reduce generation of hazardous waste; and, 2. A schedule for implementing technically feasible and economically practical source reduction measures for hazardous waste exempted under this determination. DTSC has developed a simple short reporting form for generators called the "SB-611 Report" form that can be obtained from DTSC to meet this requirement. This form can be obtained by calling the DTSC Land Disposal Restrictions Unit at (916) 322-3501.

☐ 4. ◄ **NOTIFICATION & CERTIFICATION: NON-RCRA WASTE THAT HAS BEEN TREATED AT AN OFF-SITE TREATMENT FACILITY SO AS TO MEET ALL APPLICABLE 22 CCR ARTICLE 11 TREATMENT STANDARDS:** = 22 CCR §66268.7(b)(5)

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification, that the waste complies with the treatment standards specified in CCR Title 22, Division 4.5, Chapter 18, Articles 4 and 11 and all applicable prohibitions set forth in CCR Title 22, Section 66268.32 or RCRA Section 3004(d)(42 U.S.C. Section 6924(d)). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine or imprisonment

▸ **NOTE: OFF-SITE TREATMENT FACILITIES MUST ALSO CERTIFY AS PER 22 CCR §66268.7(b)(5)(A-C)**

▸ ▸ ▸ turn over to complete next side

LAIDLAW ENVIRONMENTAL SERVICES

NON-RCRA

(continued)

III. LDR NOTIFICATION/CERTIFICATION INFORMATION REQUIRED BY 22 CCR:

✓	Subcategory of the Restricted Non-RCRA Hazardous Wastes 22 CCR §66269.19(a-m)	Treatability Group(s) of Non-RCRA Hazardous Wastes 22 CCR §66268.100(a)(1-14)	Subsection within 22 CCR Article 11 Specifying the Treatment Standards 22 CCR §66268.105 - §66268.113
☐ 1.	§66268.29(a) "Aqueous Wastes Containing Metals"	§66268.100(a)(1) "Aqueous Containing Metals"	§66268.107 "Table II CCW"
☐ 2.	§66268.29(e) "Auto Shredder Waste"	§66268.100(a)(2) "Auto Shredder Waste"	§66268.106 "Table I-A CCWE"
☐ 3.	§66268.29(d) "Non-wastewater Solvent Waste"	§66268.100(a)(4) "Non-Wastewater Solvent Waste"	§66268.107 "Table III"
☐ 4.	§66268.29(e) "Foundry Sand"	§66268.100(a)(5) "Foundry Sand"	§66268.106 "Table I-B CCWE"
5. use #10 below	§66268.29(f) "Oily/Petroleum Containing Solid Wastes": *a sub-subcategory of "Solid Hazardous Waste Containing Organics" refer to §66268.29(k)*	§66268.100(a)(6) (reserved), *considered a sub-subcategory of "Solid Hazardous Waste Containing Organics", refer to §66268.100(a)(10)*	§66268.106 (reserved) *considered a sub-subcategory of "Solid Hazardous Waste Containing Organics", refer to §66268.113*
☐ 6.	§66268.29(g) "Metal Containing Solid Wastes"	§66268.100(a)(7) "Metal Containing Solid Wastes"	§66268.106 "Table I-C CCWE"
☐ 7.	§66268.29(h) "Fly Ash, Bottom Ash, Retort Ash or Baghouse Wastes"	§66268.100(a)(8) "Fly Ash, Bottom Ash, Retort Ash or Baghouse Wastes"	§66268.106 "Table I-D CCWE"
☐ 8.	§66268.29(i) "Baghouse Wastes from Foundries"	§66268.100(a)(9) "Baghouse Wastes from Foundries"	§66268.106 "Table I-E CCWE"
☐ 9.	§66268.29(j) "Aqueous Wastes Containing Organics"	§66268.100(a)(10) "Aqueous Wastes Containing Organics"	§66268.112 "Treatment Standards for Aqueous and Liquid Waste Containing Organics"
☒ 10.	§66268.29(k) "Solid Hazardous Wastes Containing Organics"	§66268.100(a)(11) "Solid Wastes Containing Organics"	§66268.113 "Treatment Standards for Solid Hazardous Waste Containing Organics"
11. use #6 above	§66268.29(l) "Liquid Redox with Metals" *a sub-subcategory of "Metal Containing Solid Waste", refer to §66268.29(g)*	*considered a sub-subcategory of "Metal Containing Solid Waste," refer to §66268.100(a)(7)*	*considered a sub-subcategory of "Metal Containing Solid Waste", refer to §66268.106 "Table I-C CCWE"*
☐ 12.	§66268.29(m) "Hazardous Waste Containing Asbestos"	§66268.100(a)(12) "Hazardous Waste Containing Asbestos"	§66268.114 "Treatment Standard for Asbestos Containing Waste"
☐ 13.	§66268.29(____) "_____"	§66268.100(a)(____) "_____"	§66268.(____) _____

FOR TECHNOLOGY-BASED TREATMENT STANDARDS (40 CFR), LIST THE APPLICABLE FIVE-LETTER TREATMENT CODE (SEE TABLE 1 OF 22 CCR SECTION 66268.42) (E.G. INCIN, WETOX): _____

SIGNATURE: [signature] DATE: 1/31/95

"I warrant that I am an authorized representative of the generator. I believe that the information I have submitted in this document and all attachments is true, accurate and complete."

PRINT NAME: John Houck TITLE: Agent

THIS DOCUMENT, WITH AN ORIGINAL SIGNATURE, MUST ACCOMPANY EACH SHIPMENT. A COPY OF THIS CERTIFICATION, AND ALL SUPPORTING DATA, MUST BE RETAINED BY THE GENERATOR FOR AT LEAST FIVE (5) YEARS AS PER 22 CCR 66268.7.

ENVIRONMENTAL SERVICES

NON-RCRA WASTE NOTIFICATION & CERTIFICATION FORM FOR COMPLIANCE WITH THE CALIFORNIA 22 CCR CHAPTER 18 LAND DISPOSAL RESTRICTION (LDR) TREATMENT STANDARDS

INSTRUCTIONS: Complete all portions of Part I. If the waste is non-hazardous, then complete only the applicable portions in Part I and then sign and date the Form 3 at the bottom of page #2. Mark (✓) the appropriate box in Part II, the appropriate box in Part III and then sign and date this Form 3 at the bottom of page #2. To complete this form correctly, only one box should be marked in Part II and only one box in Part III.

I. GENERAL INFORMATION REGARDING GENERATOR & WASTE STREAM:

As required by 22 CCR §66268.7(a), the following information is submitted to Landfill Operations for waste accepted at either the Lockheed facility or the Imperial Valley facility to comply with the required generator notification and certification requirements associated with the Non-RCRA land disposal restriction treatment standards applicable to the waste stream referenced below:

GENERATOR'S NAME: T-Chem PHONE: 310 - 906 - 2219 cr X

SITE LOCATION: Santa Fe Springs, CA 90670

GENERATOR'S WASTE PROFILE NUMBER: 12367-1502 (2/94)

IS THIS WASTE *NON*-HAZARDOUS? ☒ NO, ☐ YES *(If YES, complete and sign/date form at the bottom of page #2)*

GENERATOR'S EPA ID #: CAD055482784 MANIFEST #: 23603476

CALIFORNIA WASTE CODE(S): 352 *(for RCRA wastes, use Landfill FORM A)*

THIS NOTIFICATION & CERTIFICATION IS BASED ON THE FOLLOWING WASTE STREAM INFORMATION:

☐ (A) CHEMICAL/PHYSICAL ANALYSIS OF THE WASTE; ☐ (B) GENERATOR KNOWLEDGE OF THE WASTE, OR ☒ (C) BOTH

per John Houck, 2-14-95 @ 0840 by Charles Tilney, T-Chem

II. TYPE OF NON-RCRA LDR NOTIFICATION/CERTIFICATION:

☐ 1. NOTIFICATION ONLY: NON-RCRA WASTES THAT CURRENTLY REQUIRE TREATMENT TO MEET THE 22 CCR ARTICLE 11 TREATMENT STANDARDS. = 22 CCR §66268.7(a)(1)

☒ 2. NOTIFICATION & CERTIFICATION: NON-RCRA WASTE THAT MEETS THE 22 CCR ARTICLE 11 TREATMENT STANDARDS. NO ADDITIONAL TREATMENT REQUIRED. = 22 CCR §66268.7(a)(2)

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing, or through knowledge of the waste to support this certification, that the waste complies with the treatment standards specified in 22 CCR Div. 4.5, Chapter 18, Articles 4 and 11 and all applicable prohibitions set forth in CCR Title 22, Section 66268.32 or RCRA Section 3004(d) 42 U.S.C. Section 6924(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine or imprisonment.

cr ☒ 3. NOTIFICATION ONLY: NON-RCRA WASTE SUBJECT TO AN APPROVED VARIANCE, VARIANCE EXTENSION, OR EXEMPTION TO THE 22 CCR ARTICLE 11 TREATMENT STANDARDS:

▸ DATE WASTE IS SUBJECT TO PROHIBITION: January 1, 1993 = 22 CCR §66268.7(a)(3)

Note from Landfill: Recent legislation, AB-611 (Calderon, 1992) requires pursuant to H&SC, § 25179.6(a) that generators of waste subject to a treatment standard which has had the effective date of the required treatment delayed by a variance extension must notify DTSC (the Department), not Landfills, with the following information during the period of the variance extension: 1. A summary report describing the generator's efforts to prevent or reduce generation of hazardous waste; and, 2. A schedule for implementing technically feasible and economically practical source reduction measures for hazardous waste exempted under this determination. DTSC has developed a reporting form for generators called the "Biennial Report" form that can be obtained from DTSC to meet this requirement. This form can be obtained by calling the DTSC Land Disposal Restriction Unit at (916) 322-3521.

☐ 4. NOTIFICATION & CERTIFICATION: NON-RCRA WASTE THAT HAS BEEN TREATED AT AN OFF-SITE TREATMENT FACILITY SO AS TO MEET ALL APPLICABLE 22 CCR ARTICLE 11 TREATMENT STANDARDS: = 22 CCR §66268.7(b)(5)

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification, that the waste complies with the treatment standards specified in 22 CCR Div. 4.5, Chapter 18, Articles 4 and 11 and all applicable prohibitions set forth in CCR Title 22, Section 66268.32 or RCRA Section 3004(d) 42 U.S.C. Section 6924(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine or imprisonment.

▸ NOTE: OFF-SITE TREATMENT FACILITIES MUST ALSO CERTIFY AS PER 22 CCR §66268.7(b)(5)(A-C)

▸ ▸ ▸ turn over to complete next side

State of California—Environmental Protection Agency
Form Approved. OMB No. 2050-0039 (Expires 9-30-94)
Please print or type (Form designed for use on elite (12-pitch) typewriter.)

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No.	Manifest Document No	2. Page 1	Information in the shaded areas is not required by Federal law.
CAD051482784	10435	1 of 1	

3 Generator's Name and Mailing Address: T-CHEM PRODUCTS, INC.
9028 DICE Rd.
SANTA FE SPRINGS, CA. 90670

4 Generator's Phone: (310) 906-2219

A State Manifest Document Number: 9360476

B State Generator's ID: CT HAHQ360457119

5 Transporter 1 Company Name: LAIDLAW ENVIRONMENTAL SERVICE OF CALIFORNIA INC.

6 US EPA ID Number: CAD000008311

C State Transporter's ID: 998150

D Transporter's Phone: (909) 603-7166

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: LAIDLAW ENVIRONMENTAL LOKERN, INC.
2500 LOKERN ROAD.
BOX 787 BUTTONWILLOW, CA 93206

10 US EPA ID Number: CAD980675276

G State Facility's ID: CPD980475276

H Facility's Phone: (805) 762-7372

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	Waste Number
a. NON RCRA HAZARDOUS WASTE SOLID	002	DM	00250	P	State: 352 EPA/Other: N/A
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

J Additional Descriptions for Materials Listed Above: NA) 2X55 GM LANDFREEZE CONT. ABSORBENT #2467-88K-1584
WO 950843

K Handling Codes for Wastes Listed Above: a. B103 b.

15 Special Handling Instructions and Additional Information
WEAR APPROPRIATE SAFETY EQUIPMENT
*EMERGENCY CONTACT # (310) 906-22A
B) Item B completed on John Hanick, 2-14-95 @0840 by Charles Terry, Laidlaw.

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	Signature	Month	Day	Year
* JOHN HOMICK		01	31	95

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MARCUS VAUGHN		01	31	95

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	Signature	Month	Day	Year
		02	03	95

DO NOT WRITE BELOW THIS LINE.

Yellow — TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS (Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (9/93)
EPA 8700—22

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7

9360476

State of California—Environmental Protection Agency
Form Approved, OMB No. 2050-0039 (Expires 9-30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93603573

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802: WITHIN CALIFORNIA, CALL 1-800-852-7

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. CAD051482784 Manifest Document No. 40616 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
T-Chem Products, Inc.
9028 Dike Rd
Santa Fe Springs, CA 90670
4. Generator's Phone 310 906-2219

A. State Manifest Document Number 93603573
B. State Generator's ID
C. State Transporter's ID 446002
D. Transporter's Phone 909 983-0342
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID CAD006331641
H. Facility's Phone 619 344-9400

5. Transporter 1 Company Name: LaidLaw ENV Svc of CA, Inc. | 6 US EPA ID Number: CAD000083121
7. Transporter 2 Company Name | 8 US EPA ID Number

9 Designated Facility Name and Site Address: LaidLaw ENV. SVC. (Imperial Valley), Inc.
5295 S. Garvey Rd
Westmorland, CA 92281 | 10 US EPA ID Number: CAD006633186

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 Number
a. NON-RCRA Hazardous Waste Solid (Bleach, Detergent, Absorbent)	00	DM	00400	P	State 352 EPA/Other NA
b. NON-RCRA Hazardous Waste Solid (Oil, Antifreeze, Absorbent)	003	DM	00900	P	State 352 EPA/Other NA
c					State EPA/Other
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above
(a) 9400 12868-IDC-1294 2455
(b) 9400 12867-SDC-1294 3455

K. Handling Codes for Wastes Listed Above
03/D81 | 03/D81

15. Special Handling Instructions and Additional Information
Wear Safety Equipment
Emergency Contact: 310) 906-2219

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	Signature	Month	Day	Year
JOHN HOUCK		03	03	95

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Antonio Chavez III		03	03	95

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19 Discrepancy Indication Space
Acc. B HA#0820457194A Box 9 US EPA ID Number CAD006633164

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

Printed/Typed Name	Signature	Month	Day	Year
Lucy Hvalls		03	30	95

DO NOT WRITE BELOW THIS LINE.

Yellow- TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS. (Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (9/93)
EPA 8700—22

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93603573

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD051482784 — Manifest Document No 4646 — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
T-Chem Products, Inc.
9028 Dice Rd
Santa Fe Springs, CA 90670
4. Generator's Phone 310 906-2219

A. State Manifest Document Number: 93603573
B. State Generator's ID:

5. Transporter 1 Company Name: LaidLaw Env. Svc. of CA, Inc. — 6. US EPA ID Number: CAD000083112
C. State Transporter's ID: 416002
D. Transporter's Phone: 909) 983-0342

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
LaidLaw Env. Svc. (Imperial Valley), Inc.
5295 S. Garvey Rd
Westmorland, CA 92281
10. US EPA ID Number: CAD000633186
G. State Facility's ID:
H. Facility's Phone: 619) 344-9400

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 Number
a. NON-RCRA Hazardous Waste Solid (Bleach, Detergent, Absorbent)	00	DM	0040	P	State 352 / EPA/Other NA
b. NON-RCRA Hazardous Waste Solid (Oil, Antifreeze, Absorbent)	003	DM	0090	P	State 352 / EPA/Other NA
c.					State / EPA/Other
d					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
1) AAD# 12868-1 DC-1294 — 2XSS
2) AAD# 12867-1 DC-1294 — 3XSS

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

15. Special Handling Instructions and Additional Information
Emergency Wear Safety Equipment
Contact: 310) 906-2219

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	Signature	Month	Day	Year
John Houck		03	03	95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Antonio Chivez III		03	03	95

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Yellow GENERATOR RETAINS

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES
1369 W. 9th Street
Upland, CA 91786
909-983-0342 • 800-929-3274

CUSTOMER/ACCT. NO.

3807

WORK ORDER NO.

40648

BILLING ADDRESS

T-CHEM PRODUCTS, INC.
9028 DICE RD
SANTA FE SPRINGS, CA 90670

SERVICE ADDRESS

9028 DICE RD
SANTA FE SPRINGS, CA 90670

ORDER DATE	DATE TO BE DONE	CUSTOMER'S P.O. #	ORDERED BY	TELEPHONE #	CONTACT PERSON
03/01/95	**/**/**			- -	JOHN HOUCK
LES REP	**LES DIV #**	**LES DEPARTMENT**	**CUSTOMER'S EPA**	**CUSTOMER'S BOE #**	**CONTACT PHONE #**
LR	01	3	CAD051482784		- -

PICK UP:
3X55 OIL/ANTIFREEZE APR#12867-BDC-1294

DELIVER TO ~~KERN~~
Imperial Valley

SPECIAL INSTRUCTIONS _____

DRIVE COMPLETE

Manifest Number _____ Date Completed _____ Drivers Name _____

Comments _____

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature _____

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES

1369 W. 9th Street
Upland, CA 91786
909-983-0342 • 800-929-3274

C OMER/ACCT. NO. 3807

WORK ORDER NO. 40646

BILLING ADDRESS

T-CHEM PRODUCTS, INC.
9028 DICE RD
SANTA FE SPRINGS,CA 90670

SERVICE ADDRESS

9028 DICE RD
SANTA FE SPRINGS,CA 90670

ORDER DATE	DATE TO BE DONE	CUSTOMER'S P.O. #	ORDERED BY	TELEPHONE #	CONTACT PERSON
03/01/95	**/**/**			- -	JOHN HOUCK
LES REP	**LES DIV #**	**LES DEPARTMENT**	**CUSTOMER'S EPA**	**CUSTOMER'S BOE #**	**CONTACT PHONE #**
LR	01	3	CAD051482784		310-906-2219

PICK UP:
2X55 BLEACH/DETERGENT APR# 12868-IDC-1294
DELIVER TO IMPERIAL VALLEY

3X55 OIL, ANTIFREEZE APR#12867-BDC-1294
DELIVER TO LOKERN

*********DELIVER 4X55 O/T METAL*********

DISPATCH TO CONTACT CLIENT W/P/U DATE
DRIVER TO ASSIST CLIENT WITH LDR AND MANIFEST

PICK UP MUST BE BEFORE 2:30 PM

SPECIAL INSTRUCTIONS _____

DRIVE COMPLETE

Manifest Number _____ Date Completed _____ Drivers Name _____

Comments _____

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature _____

FEB-28-1995 12:36 2135890695 P.01

LADLAW ENVIRONMENTAL SERVICES

TRANSPORTER
USA EPA ID NO
CAD981973446

MASTERWASH PRODUCTS INC.
PARTS WASHER SERVICES
Automotive & Industrial Parts Washing Equipment
8122 S. ALAMEDA STREET, HUNTINGTON PARK, CA 90255
TELEPHONE: (213) 589-6111 / FAX: (213) 589-0695

IN EVENT OF EMERGENCY CALL
CHEMTREC 1-800-424-9300 (24 Hours)

INVOICE

CUSTOMER GENERATOR: T-Chem Product Inc.
9028 Dice Rd.
Santa Fe. Springs CA
90670

GENERATOR USA EPA ID NO.

GENERATOR STATE ID NO.

BILL TO

PAGE

CUST NO	TERR	SALES TAX EXEMPTION No.	INVOICE No	DATE
7379	310-906-2219		164103	12/8/94

WK	PURCHASE ORDER No	MANIFEST NUMBER	CREDIT CODE
50			716

ITEM NUMBER / DESCRIPTION	UNITS	CHARGEABLE UNITS	UNIT PRICE	AMOUNT DUE
PLACENTIA				
182. D.D. 8WK	1	1	77.43	77.43
185-4WK CYCLE	1	1	86.56	86.56
MANAIFEST FEE	1	1	2.00	2.00
			SUB	165.99
			TAX	13.69
			TOTAL	179.68

Post-it® Fax Note 7671 | Date | # of pages ▶ 1
To Linda Wade | From [illegible]
Co./Dept. T-Chem | Co. Ladlaw
Phone # (310) 986-2251 | Phone # (213) 589-6111
Fax # (310) 941-9780 | Fax # (213) 589-0695

PLEASE CHECK APPROPRIATE BOXES

	GOOD	POOR
MACHINE CONDITION & CLEANLINESS	☑	☐
LAMP ASSEMBLY CONDITION	☑	☐

	YES	NO
DECALS IN PLACE AND LEGIBLE	☑	☐
LIQUID LINE INSTALLED	☑	☐

	YES	NO
EMERGENCY CLOSING OF LID UNOBSTRUCTED	☑	☐
MACHINE PROPERLY GROUNDED	☑	☐

	YES	NO
LOCAL PHONE NO SINCE# ATTACHED TO MACHINE	☑	☐
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☑	☐

PAYMENT RECEIVED SECTION

CASH ☐	TOTAL RECEIVED	APPLY PAYMENT TO:
		☐ TODAY'S SERVICE/SALE ☐ PREVIOUS BALANCE AS FOLLOWS

INV # _____ AMOUNT $_____
INV # _____ AMOUNT $_____
INV # _____ AMOUNT $_____

30 DAYS		60 DAYS		90 DAYS		120 DAYS AND OVER	

CHARGE ACCOUNTS ARE NET 30 DAYS FROM DATE OF INVOICE
OVERDUE ACCOUNTS ARE SUBJECT TO A MONTHLY SERVICE CHARGE
NSF-CHECK CHARGE $25.00

TOTAL PRODUCT AMOUNTS
TOTAL SERVICE AMOUNT (FROM ABOVE)
TOTAL DUE

X [signature] Print Name John Houck
GENERATOR/DESIGNATED REPRESENTATIVE SIGNATURE

UNIFORM HAZARDOUS WASTE MANIFEST INFORMATION

PAILS No DM	16 GAL No DM	30 GAL No DM
X	X	X

US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
Waste, Compound Naptha, 3, UN 1255 II Total Gals. _____
Waste Compound Cleaning Liquid, 3, NA 1993 III Total Gals. _____

DESIGNATED FACILITY NAME AND ADDRESS

N/A

TOTAL QUANTITY = NUMBER OF DRUMS X AVG GALS PER DRUM
PAILS -4 16 GAL -7 30 GAL -12

SPENT SOLVENT MEETS ACCEPTANCE CRITERIA YES ☐ NO ☐

USA EPA ID No
STATE ID No

OFFICE COPY

TOTAL P.01

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES
1369 W. 9th Street
Upland, CA 91786
909-983-0342 • 800-929-3274

CUSTOMER/ACCT. NO.

WORK ORDER NO.

BILLING ADDRESS

SERVICE ADDRESS

ORDER DATE	DATE TO BE DONE	CUSTOMER'S P.O. #	ORDERED BY	TELEPHONE #	CONTACT PERSON
LES REP	LES DIV #	LES DEPARTMENT	CUSTOMER'S EPA	CUSTOMER'S BOE #	CONTACT PHONE #

Del. 3-7-95 AW

SPECIAL INSTRUCTIONS

DRIVE COMPLETE

Manifest Number _____ Date Completed 3-7-95 Drivers Name T. Chavez III

nments _____

the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature _____

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES

1369 W. 9th Street
Upland, CA 91786
909-983-0342 • 800-929-3274

CUSTOMER/ACCT. NO.

WORK ORDER NO.

BILLING ADDRESS

SERVICE ADDRESS

ORDER DATE	DATE TO BE DONE	CUSTOMER'S P.O. #	ORDERED BY	TELEPHONE #	CONTACT PERSON
LES REP.	LES DIV. #	LES DEPARTMENT	CUSTOMER'S EPA ID #	CUSTOMER'S BOE #	CONTACT PHONE #

SPECIAL INSTRUCTIONS _____

DRIVE COMPLETE

Manifest Number _____ Date Completed _____ Drivers Name _____

Comments _____

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature Bill Tamm

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please type. *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051481784	4109110		

3. Generator's Name and Mailing Address	A. State Manifest Document Number
T-Chem Products, Inc. 9028 Dice Rd Santa Fe Springs, CA 90670 4. Generator's Phone (310) 906-2219	95362150
	B. State Generator's ID HAH03604571 9
5. Transporter 1 Company Name / 6 US EPA ID Number Laidlaw ENV. Svc. of CA, INC. CAD000083121	C. State Transporter's ID 448107 D. Transporter's Phone (909) 983-0342
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 / 10 US EPA ID Number Laidlaw ENV. Svc. (Imperial Valley), INC. 5295 S. Garvey Rd Westmorland, CA 92281 CAD006331164	G State Facility's ID H. Facility's Phone (619) 344-9400

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 Number
a NON-RCRA Hazardous Waste Solid (Absorbent w/Bleach & Detergent)	002	DM	00400	P	State 352 EPA/Other NA
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
11A) App # 12868-IDC-1294 2x55	a. b. c. d.

15 Special Handling Instructions and Additional Information
Wear Safety Gear
Emergency Contact (310) 906-2219

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	Signature	Month	Day	Year
JOHN HOUCK	John Houck	04	17	95

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Antonio Chavez III	Antonio Chavez III	04	17	95

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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

GENERATOR

TRANSPORTER

FACILITY

DTSC 8022A (9/94)
EPA 8700—22

Yellow GENERATOR RETAINS

of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD051482784 | Manifest Document No 410910 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
T-Chem Products, Inc.
9028 Dice Rd
Santa Fe Springs, CA 90670
4 Generator's Phone (310) 906-2219

A. State Manifest Document Number 95362150

B. State Generator's ID HAH036041571 9

5 Transporter 1 Company Name: Laidlaw Env. Svc. of CA Inc. | 6. US EPA ID Number: CAD000083121

C. State Transporter's ID 448107

D Transporter's Phone (909) 983-0342

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
Laidlaw Env. Svc. (Imperial Valley), Inc.
5295 S. Garvey Rd
Westmorland, CA 92281
10. US EPA ID Number: CAD000633164

G. State Facility's ID CAD000633164

H. Facility's Phone (619) 344-9400

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 Number
a. NON-RCRA Hazardous Waste Solid (Absorbent w/Bleach & Detergent)	002	DM	00400	P	State 352 / EPA/Other NA
b.					State / EPA/Other
c.					State / EPA/Other
d					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
IIA) App # 12868-IDC-1294 2x55

K. Handling Codes for Wastes Listed Above
a. 03 (D81) b. c. d.

15. Special Handling Instructions and Additional Information
Emergency Wear Safety Gear
Contact: (310) 906-2219

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	Signature	Month	Day	Year
JOHN HOUCK		04	17	95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Antonio Chavez III		04	17	95

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	Signature	Month	Day	Year
Matthew Hughes		04	15	95

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (9/94)
EPA 8700—22

GENERATOR

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

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

95199339

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051982784 Manifest Document No: 15645

2 Page 1 of 1

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

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS
9028 DICE RD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (310) 906-2219

A State Manifest Document Number: 95199339

B State Generator's ID: HAHQ360451719

5 Transporter 1 Company Name: KAIDLAW ENVIRONMENTAL SERVICE OF CALIF
6 US EPA ID Number: CAD000082111

C State Transporter's ID: 69X676

D Transporter's Phone: 909 608 7191

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: KAIDLAW ENVIRONMENTAL SERVICE
2857 E GRAVEY RD
WILMINGTON CA 9
10 US EPA ID Number: CAD006313164

G State Facility's ID

H Facility's Phone: 619 834 9300

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 Number
a. NON RCRA HAZARDOUS WASTE, SOLID (OIL & ENTRAINED COMP'D AGGREGATE)	001	DM	06000	P	State T22 EPA/Other N/A
b. NON RCRA HAZARDOUS WASTE, SOLID (CHEMICAL & DETERGENT CONT'D AGGREGATE)	002	DM	00400	P	State T22 EPA/Other N/A
c.					State EPA/Other
d.					State EPA/Other

J Additional Descriptions for Materials Listed Above
(1) 3 x 55 - NON RCRA HAZ SOLID 2.3 DOT 1993
(2) 3 x 55 - NON RCRA HAZ SOLID 2.3 DOT 1993

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

15 Special Handling Instructions and Additional Information
WEAR PROPER SITE SAFE
STRAIGHT
* EMERGENCY CONTACT 310-906-2211

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	Signature	Month	Day	Year
JOHN HAHN		06	21	95

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Yellow GENERATOR RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type — Form designed for use on élite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

95199339

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD 0 5 1 4 8 2 7 8 4 | Manifest Document No: 1 5 6 4 5 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS
9028 DICE RD
SANTA FE SPRINGS, CA 90670

4 Generator's Phone (310) 906-2211

A State Manifest Document Number: 95199339

B State Generator's ID: HAHQ360457191

5 Transporter 1 Company Name: LAIDLAW ENVIRONMENTAL SERVICE OF CALIF. INC.

6 US EPA ID Number: C A D 0 0 0 0 8 3 1 2 1

C State Transporter's ID: 608826

D Transporter's Phone: 909 608 7191

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: LAIDLAW ENVIRONMENTAL SERVICES (I.V.) INC.
5.9 S GARVEY RD
WESTMORELAND, CA 92281

10 US EPA ID Number: C A D 0 0 6 3 3 1 6 4

G State Facility's ID: CAD006633164

H Facility's Phone: 619 344 9400

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 Number
a. NON-RCRA HAZARDOUS WASTE, SOLID (OIL + ANTIFREEZE CONT'D ABSORBENT)	001	DM	00600	P	State 352 EPA/Other N/A
b. NON-RCRA HAZARDOUS WASTE, SOLID (CLEANER + DETERGENT CONT'D ABSORBENT)	002	DM	00400	P	State 352 EPA/Other N/A
c.					State EPA/Other
d.					State EPA/Other

J Additional Descriptions for Materials Listed Above
a. RQ, NOS - ARPC 12867 EDC - 129 4
b. RQ, NOS - ARPC 12868 EDC - 129 4

K Handling Codes for Wastes Listed Above
a. 02581 b. 03581
c. d.

15 Special Handling Instructions and Additional Information
WEAR PROPER SAFE GEAR
SWA#15645
* EMERGENCY CONTACT 310-906-2211

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	Signature	Month	Day	Year
JOHN HAUCK		06	21	95

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JACK M CAIN		06	21	95

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19 Discrepancy Indication Space: Box 5 and Box 9 corrected at TSDF. M.G. 6-23-95

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

Printed/Typed Name	Signature	Month	Day	Year
Macario Galvan		06	23	95

DO NOT WRITE BELOW THIS LINE.

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7

95199339

DTSC 8022A (9/93)
EPA 8700—22

Yellow — TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS (Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

KAT PI CO/SWO#: 581-15645

LAIDLAW ENVIRONMENTAL SERVICES

CUSTOMER NO UPTCH	BILLING ID 943299	SALESPERSON PH MATTA	DATE 06/19/95
PICKUP DATE 06/21/95	CLIENT P.O. 72443	DISP SITE SWO	COUNTY CA-LOS ANGELES-3

BILLING CUSTOMER
T-CHEM PRODUCTS
9028 DICE ROAD
SANTA FE SPRINGS CA 90670-
JOHN HOUCK (310) 906-2219

PICK-UP CUSTOMER AND ADDRESS
T-CHEM PRODUCTS
9028 DICE RD
SANTA FE SPRINGS CA 90670-
JOHN HOUCK (310) 906-2219

CHEMIST/DRIVER Jack R CASTRO

TRANSPORTATION (04000)	UNIT/PRICE 30/55/3-5	UNIT/PRICE 85	EXTENSION
0-50 MILES			
51-100 MILES			
101-200 MILES			
200-500 MILES			
► 500 MILES			
TOTAL			

LABOR (04045)	HOURS	PRICE
Chemist	1/2	
OTHER		
Project Manager		

PROFESSIONAL SERVICES (04035)	QUANTITY	PRICE
SAMPLE ANALYSIS		
WASTE STREAM EVALUATION		

EQUIPMENT (04065)	QUANTITY	PRICE
16020		

DISPOSAL (04060)

MATERIALS (04040)	QUANTITY	PRICE
85-G Salvage Drum-New		
55-G 17C, 17H, 17E Recon,	4	
55-G 37M - New		
30-G 17H - New		
30-G, 20-G Fiber New		
5-G Pail - 37E, 37A-New, 34-5, 35-50		
Dot Spec Wooden Box		
Drum Thief		
Disposal Coliwassa		
Absorbant, Clay, Vermiculite, CornCob - Bag		
Drum Pump-Use & Decon		
4 Mil Liners		
Reactive Bags		
Dot Labels		
EPA Labels		
Sample Bottles		
Protective Gear - Level I		
Protective Gear - Level II		
Packing Materials 5G		
Packing Materials 20G		
Packing Materials 30G, 55G		
OTHER (04055)	QUANTITY	PRICE
Minimum Charge		

PROFILE/LABPACK	DESCRIPTION	QTY.	UM	UNIT PRICE
JPTCH-0001	OIL & ANTIFREEZE CONT'D ABSORBENT	3.00	55	
JPTCH-0002	BLEACH & DETERGENT CONT'D ABSORBENT	2.00	55	

TOTAL 5 drums

MNPST 95199339

John Hurst

ARRIVE ON SITE 0630 AM DATE 6-21-95

LEAVE SITE 0700 AM

ACCTG-1	2 Customer Service Rep	3 Customer Service Supv	4 Operations

5-7546 (3-94)

GENR COPY

REMIT PAYMENT TO:

LAIDLAW ENVIRONMENTAL SERVICES INC.
TRANSPORTER
USA EPA ID NO
CAD981979448

PARTS WASHER SERVICES
Automotive & Industrial Parts Washing Equipment
8122 S. ALAMEDA STREET, HUNTINGTON PARK, CA 90255
TELEPHONE: (213) 589-6111 / FAX: (213) 589-0695

IN EVENT OF EMERGENCY CALL CHEMTREC 1-800-424-9300 (24 Hours)

INVOICE

CUSTOMER GENERATOR
T-CHEM PRODUCTS INC.
9028 DICE RD.
SANTA FESPRINGS CA
90670

GENERATOR USA EPA ID NO.
GENERATOR STATE ID NO.

BILL TO
T-CHEM PRODUCTS INC.
9028 DICE RD.
SANTA FESPRINGS CA
90670

02 PAGE 1

CUST No	TERR		SALES TAX EXEMPTION No	INVOICE No	DATE
7379	2	310-906-2219		135733-00	5-1-95

WK		PURCHASE ORDER No	MANIFEST NUMBER	CREDIT CODE
18	4	7379	93023806	716

ITEM NUMBER / DESCRIPTION	UNITS	CHARGEABLE UNITS	UNIT PRICE	AMOUNT DUE
18S-4 LARGE PARTS WASHER 4 WK SVC	1	1	86.56	86.56
MF MANIFEST FEE	1	1	2.00	2.00
			SUB-TOTAL	88.56
			STATE TAX	7.14
			TOTAL	95.70

PO# 72311

MACHINE INSPECTION SECTION PLEASE CHECK APPROPRIATE BOXES

	GOOD	POOR		YES	NO		YES	NO		YES	NO
MACHINE CONDITION & CLEANLINESS	☐	☐	DECALS IN PLACE AND LEGIBLE	☐	☐	EMERGENCY CLOSING OF LID UNOBSTRUCTED	☐	☐	LOCAL PHONE NO STICKER AFFIXED TO MACHINE	☐	☐
LID ASSEMBLY CONDITION	☐	☐	FUSIBLE LINK INSTALLED	☐	☐	** MACHINE PROPERLY GROUNDED	☐	☐	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☐	☐

* PAYS CASH OR CHECK

PAYMENT RECEIVED SECTION

CASH ☐	TOTAL RECEIVED	APPLY PAYMENT TO:
		☐ TODAY'S SERVICE / SALE ☐ PREVIOUS BALANCE AS FOLLOWS

INV #_____ AMOUNT $_____
INV.#_____ AMOUNT $_____
INV #_____ AMOUNT $_____

30 DAYS	.00	60 DAYS	.00	90 DAYS	.00	120 DAYS AND OVER	.00

CHARGE ACCOUNTS ARE NET 30 DAYS FROM DATE OF INVOICE
OVERDUE ACCOUNTS ARE SUBJECT TO A MONTHLY SERVICE CHARGE
NSF-CHECK CHARGE $25.00

TOTAL PRODUCT AMOUNTS		
TOTAL SERVICE AMOUNT (FROM ABOVE)		
TOTAL DUE		

X _____ Print Name _____
GENERATOR / DESIGNATED REPRESENTATIVE SIGNATURE

UNIFORM HAZARDOUS WASTE MANIFEST INFORMATION

PAILS No. DM	16 GAL No. DM	30 GAL. No DM	US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
			> Waste, Compound Naptha, 3, UN 1255 II Total Gals. 10
			> Waste Compound Cleaning Liquid, 3, NA 1993 III Total Gals.

DESIGNATED FACILITY NAME AND ADDRESS

OTL & SOLVENT PROCESS CO.
1704 W FIRST STREET
AZUSA, CA 91702

TOTAL QUANTITY = NUMBER OF DRUMS X AVG GALS. PER DRUM
PAILS -4 16 GAL -7 30 GAL -12

SPENT SOLVENT MEETS ACCEPTANCE CRITERIA YES ☐ NO ☐

USA EPA ID No	CAD008302903
STATE ID No	CAD008302903

LAIDLAW
ENVIRONMENTAL
SERVICES INC.

John
FYI

William E. Stilwell
President

January 6, 1995

RECEIVED
JAN 23 1995

Dear Valued Client:

As you may know, Laidlaw has recently acquired USPCI. I would like to take a moment of your time to briefly describe what this means to you, and how we believe it will further enhance the value that we provide to you, our customer.

To begin with, this acquisition reaffirms our commitment to the environmental services industry. While other companies are exiting the business because of a strict regulatory climate and a highly competitive marketplace, we are strengthening and broadening our capabilities. The message is clear: As a customer, you can be absolutely confident that we will be there for you today...and tomorrow. As the demands of environmental protection grow more and more stringent, we will remain your partner.

Additionally, the USPCI acquisition will make us more responsive than ever. The "new" Laidlaw combines geographic and technological capabilities that enable us to provide greater choices at more locations. With the widest array of services, and the strongest Service Center network in North America, we are well-positioned to manage your waste from cradle to grave -- whether you have a few tons or a few thousand tons of material. This provides economies of scale, and savings that we can pass along to you.

Complementing this is a reorganization designed to improve the way to fulfill your requirements. In the near future, all of our clients will have the convenience of dealing with a single contact to place their orders. This change, which was developed after we asked customers what *they* wanted in an environmental services company, will make it easier than ever to work with Laidlaw.

The combined companies also strengthen our financial assurance ability, and reinforce our commitment to providing you full indemnification. We understand that managing your waste does not end with the issuance of an invoice. We are caretakers of your byproducts and your trust. Reducing your risk is a continuing objective at Laidlaw.

As we enter into this new era, I want to assure you that our commitment to you will only get stronger. Your satisfaction is the one true measure of our performance. You can be confident that we will never lose sight of who we serve, and that we have the abilities and expertise to perform to your highest expectations.

Thank you for your time. I wish you all the success in the future, and look forward to continuing and strengthening our partnership.

Sincerely,

William E. Stilwell

William E. Stilwell

Laidlaw Environmental Services, Inc
220 Outlet Pointe Boulevard (29210) Post Office Box 210799 (29221) Columbia, South Carolina
Phone 803 798.2993

KAT PO CO/SWO#: 581-16368

LAIDLAW ENVIRONMENTAL SERVICES

CUSTOMER NO. TPTCH	BILLING ID 943299	SALESPERSON PH MATTA	DATE 07/25/95
PICKUP DATE 07/27/95	CLIENT P.O. verbal	DISP SITE SWO CA	COUNTY LOS ANGELES - 3

BILLING CUSTOMER
T-CHEM PRODUCTS
9028 DICE ROAD
SANTA FE SPRINGS CA 90670-
JOHN HOUCK (310) 906-2219

PICK-UP CUSTOMER AND ADDRESS
T-CHEM PRODUCTS
9028 DICE RD
SANTA FE SPRINGS CA 90670-
JOHN HOUCK (310) 906-2219

CHEMIST/DRIVER Jack R Castro

TRANSPORTATION (04000)	UNIT/PRICE 30/55/3-5	UNIT/PRICE 85	EXTENSION
0-50 MILES			
51-100 MILES			
101-200 MILES			
200-500 MILES			
► 500 MILES			
TOTAL			

LABOR (04045)	HOURS	PRICE
Chemist	1½	
OTHER		
Project Manager		

PROFESSIONAL SERVICES (04035)	QUANTITY	PRICE
SAMPLE ANALYSIS		
WASTE STREAM EVALUATION		

EQUIPMENT (04065)	QUANTITY	PRICE
35-48		

DISPOSAL (04060)

MATERIALS (04040)	QUANTITY	PRICE
85-G Salvage Drum-New		
55-G 17C, 17H, 17E Recon,		
55-G 37M - New		
30-G 17H - New		
30-G, 20-G Fiber New		
5-G Pail - 37E, 37A-New, 34-5, 35-50		
Dot Spec Wooden Box		
Drum Thief		
Disposal Coliwassa		
Absorbant, Clay, Vermiculite, CornCob - Bag		
Drum Pump-Use & Decon		
4 Mil Liners		
Reactive Bags		
Dot Labels	•	
EPA Labels		
Sample Bottles		
Protective Gear - Level I		
Protective Gear - Level II		
Packing Materials 5G		
Packing Materials 20G		
Packing Materials 30G, 55G		
OTHER (04055)	QUANTITY	PRICE
Minimum Charge		

PROFILE/LABPACK	DESCRIPTION	QTY.	UM	UNIT PRICE
PTCH-0003	GEAR OIL AND WATER	2.00	55	

P.O. 72669

Tax Incl. 31.25.00

Service site 1:30 Date 7-27-95

Left site 3:00

ACCTG-1	2 Customer Service Rep.	3 Customer Service Supv	4 Operations

5-7546 (3-94)

GENR COPY

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type. *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD041482784	16136		

3 Generator's Name and Mailing Address
T-Chem Products
9029 Dice Rd
Santa Fe Springs, CA 90670
4 Generator's Phone (310) 906-2219

A. State Manifest Document Number 95362125
B. State Generator's ID HAHK136041571191

5 Transporter 1 Company Name Laidlaw Environmental Services of Calif
6. US EPA ID Number CAD000087121
C. State Transporter's ID 218107
D. Transporter's Phone 909 608 7171

7. Transporter 2 Company Name JB Hunt Specialized Comm.
8. US EPA ID Number AZR000190855
E. State Transporter's ID 449288
F. Transporter's Phone 800-369-5539

9. Designated Facility Name and Site Address Laidlaw Environmental Service, Southwest
1340 W Lincoln St
Phoenix, AZ 85007
10. US EPA ID Number AZD041931805
G. State Facility's ID
H. Facility's Phone 602 258 6155

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 Number
a. Non-RCRA Hazardous Waste, Liquid (Gear oil and water)	009	DF	00455	G	State 213 / EPA/Other N/A
b. Non-RCRA Hazardous Waste, Liquid (Gear oil and water)	001	DM	00200	G	State 213 / EPA/Other N/A
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
(11A) 9 X 55 NPP UPTCH-0003
(11B) 9 X 55 NPP UPTCH-0003

K. Handling Codes for Wastes Listed Above
a. 14 (15) b. 14 (15)
c. d.

15 Special Handling Instructions and Additional Information
WEAR PROPER SAFE GEAR
EMERGENCY CONTACT 310 906 2019
5000 # 16368 PO 72009

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	Signature	Month	Day	Year
JOHN HAUCK	John Hauck	07	27	95

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jack A Castro	Jack A Castro	07	27	95

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
KEN WILLIAMS	Ken Williams	08	01	95

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
Daniel Czechalinski		08	07	95

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (9/94)
EPA 8700—22

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

95362125

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Co
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD981482789 — Manifest Document No: 16316 18
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
T-Chem Products
9028 Dice Rd.
Santa Fe Springs, CA 90670
4. Generator's Phone (310) 906-2219

A. State Manifest Document Number: 95362125
B. State Generator's ID: HAHQ360457691
C. State Transporter's ID: 448107
D. Transporter's Phone: 909 608 7121
E. State Transporter's ID: 449288
F. Transporter's Phone: 800-368-8539
G. State Facility's ID:
H. Facility's Phone: 602 258 6155

5. Transporter 1 Company Name: Laidlaw Environmental Services of Calif
6. US EPA ID Number: CAD000083121
7. Transporter 2 Company Name: JB Hunt Special Comm.
8. US EPA ID Number: ARD981910855
9. Designated Facility Name and Site Address: Laidlaw Environmental Service, Southwest, 1340 W. Lincoln St, Phoenix, AZ 85007
10. US EPA ID Number: AZD049318089

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 Number
a. NON-RCRA HAZARDOUS WASTE, LIQUID (GEAR OIL AND WATER)	009	DF	00450	G	State 213 EPA/Other N/A
b. NON-RCRA HAZARDOUS WASTE, LIQUID (GEAR OIL AND WATER)	004	DM	00200	G	State 213 EPA/Other N/A
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
(11A) 9X55 APP UPTCH-0003
(11B) 4X55 APP UPTCH-0003

K. Handling Codes for Wastes Listed Above
a. 14 (15) b. 14 (15)
c. d.

15. Special Handling Instructions and Additional Information
SWO # 16368 P.O 72669
Wear Proper Safe Gear
Emergency Contact 310 906-2219

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	Signature	Month	Day	Year
JOHN HOUCK	John Houck	07	27	95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JACK R CASTRO	Jack R Cas	07	27	95

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
KEN WILLIAMS	Ken Williams	08	01	95

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
Daniel Czocholinski		08	02	95

DO NOT WRITE BELOW THIS LINE.

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

DTSC 8022A (9/94)
EPA 8700—22

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

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9 30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No	2 Page 1	Information in the shaded areas is not required by Federal law.
CAD051418278	43017 9 8	1 of 1	

3 Generator's Name and Mailing Address: T-CHEM PRODUCTS INC, 9028 DICE ROAD SANTA FE SPRINGS, CA 90760	A. State Manifest Document Number: 95130798
4 Generator's Phone (310) 906-2219	B. State Generator's ID: HAH036045719
5 Transporter 1 Company Name: LAIDLAW ENVIRONMENTAL SERVICES OF CALIFORNIA INC.	6 US EPA ID Number: CAD000083121
	C. State Transporter's ID: 44827
	D. Transporter's Phone: 310-588-4700
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: LAIDLAW ENVIRONMENTAL Services (I.V.) Inc. 5295 S. EARLY ROAD WESTMORLAND, CA 92281	10 US EPA ID Number: CAD000063164
	G. State Facility's ID: CAD0096331164
	H. Facility's Phone: 344-9400 619-931-4438

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 Numbers
a. NON-RCRA HAZARDOUS WASTE LIQUID (WATER AND SURFACTANTS)	001	TT	02510	L	State: CA / EPA/Other: N/A
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
11A) PROFILE # 14415-TRC-0695 WO# 9504173	a. 16-03 b.
	c. d.

15 Special Handling Instructions and Additional Information
WEAR PROPER SAFETY EQUIPMENT

24 HOUR EMERGENCY PHONE # 1-800-929-3274

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	Signature	Month	Day	Year
JOHN HOUCK		06	30	95

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JESSE KILPATRICK		06	30	95

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19 Discrepancy Indication Space: Box 9 completed at TSDF. Box H corrected at TSDF. MG. 7-5-95

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

Printed/Typed Name	Signature	Month	Day	Year
Macario Galvan		07	05	95

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out of state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (9/93)
PA 8700—22

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-0

95130798

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES

1369 W. 9th Street
Upland, CA 91786
909-983-0342 • 800-929-3274

CUSTOMER/ACCT. NO.

WORK ORDER NO.

BILLING ADDRESS

SERVICE ADDRESS

ORDER DATE	DATE TO BE DONE	CUSTOMER'S P.O.#	ORDERED BY	TELEPHONE #	CONTACT PERSON
04/17/95	**/**/**	VERBAL-JOHN			JOHN HOUCK
LES REP	**LES DIV #**	**LES DEPARTMENT**	**CUSTOMER'S EPA**	**CUSTOMER'S BOE #**	**CONTACT PHONE #**
TB	01	Ind	CAD051A02764	HH236045719	310-705-****

Pick Up

Del.

P/U = 2x55

Used 1-Manifest
2-Waste Labels

SPECIAL INSTRUCTIONS _____

DRIVE COMPLETE

Manifest Number 95362150 Date Completed Apr. 17-95 Drivers Name Tony Chavez Jr.

ments _____

the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature _____

See instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

Form designed for use on elite (12-pitch) typewriter

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD015148276 | Manifest Document No. 30783 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address: T-CHEM PRODUCTS INC, 9028 DICE ROAD, SANTA FE SPRINGS, CA 90760

A. State Manifest Document Number: 95130783

B. State Generator's ID: CAA4936045719

4. Generator's Phone: (310) 906-2219

C. State Transporter's ID: 4415372

5. Transporter 1 Company Name: LAIDLAW ENVIRONMENTAL SERVICES OF CALIFORNIA, INC

6. US EPA ID Number: CAD000083121

D. Transporter's Phone: 800 592-9700

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: LAIDLAW ENVIRONMENTAL, 5295 S. GARLEY ROAD, NEWMORELAND, CA 92281

10. US EPA ID Number: CAD000633164

G. State Facility's ID: CAD000633164

H. Facility's Phone: 629-931-4838

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 Numbers
a. NON-RCRA HAZARDOUS WASTE SOLID	001	CM	00014	YDS	State: 5.1 EPA/Other: N/P
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

J. Additional Descriptions for Materials Listed Above: (A) 2 TOTE BINS CONTAINING SOLIDS 1439 LBS TO 03 ~~CONTAINING 1440 LBS~~ ~~TO 03~~ MANIFEST REF. NO. ~~IPC 0695~~ 950225

K. Handling Codes for Wastes Listed Above: 05B01

15. Special Handling Instructions and Additional Information
WEAR PROPER SAFETY EQUIPMENT

24 HOUR EMERGENCY PHONE #1-800-929-3274

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	Signature	Month	Day	Year
JOHN HOUCK		07	10	95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
FRED MINICUCCI		07	10	95

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space: Section 9 Facility Name is "LAIDLAW Environmental Services (LWD) Inc" ORA 7/16/95
Section 14 Should be "Y11"
Section 4 Facility phone is (619) 929-9400

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

Printed/Typed Name	Signature	Month	Day	Year
Matthew Hughes		07	12	95

DO NOT WRITE BELOW THIS LINE.

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

95130783

DTSC 8022A (9/93)
EPA 8700-22

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

To : Darrel Johnson /Amos FAX# : @ 562 941 9780

Company : T-Chem

Dept : _____

From : Dave

Page 1 of 2 Time : _____ Date . 8/6/97

Comments :

per request

IF YOU DO NOT RECEIVE THE PAGES AS SPECIFIED, PLEASE CALL :

(760) 344-9400 EXT : _____

FAX REPLY TO . (760) 351-4023

LAIDLAW ENVIRONMENTAL SEVICES (I.V.), INC.
5295 SOUTH GARVEY ROAD
P.O. BOX 158
WESTMORLAND, CA 92281

State of California—Environmental Protection Agency
Form Approved OMB No. 2050–0039 (Expires 9-30-96)
Please print or type. \ *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

95585914

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
CAD059142934			

GENERATOR

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number: 95585914
B. State Generator's ID:

5. Transporter 1 Company Name: ISLAND ENVIRONMENTAL SERVICES
6. US EPA ID Number: CAD981[illegible]
C. State Transporter's ID: 1161-105
D. Transporter's Phone: (818) 655-1200

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
STATEWIDE ENVIRONMENTAL
11618 S. MAIN ST.
LOS MOLINAS, CA 90061
10. US EPA ID Number: CAD982382524
G. State Facility's ID: CAD000628242
H. Facility's Phone: (213) 776-7140

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 Number
a. NON-RCRA HAZARDOUS WASTE, SOLID (OIL & ABSORBANT)	006	DM	003130	G	State: EPA/Other: NONE
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

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT WHEN HANDLING.
ERG 11 at NOME
24 HOUR EMERGENCY #(800)608-2761

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	Signature	Month	Day	Year
[illegible]	[illegible]	09	06	95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
ALBERT MARIO	[illegible]	09	06	95

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	Signature	Month	Day	Year
Claudia Perez	[illegible]	09	06	95

DO NOT WRITE BELOW THIS LINE

DTSC 8022A (7/95)
EPA 8700—22

Green: TRANSPORTER RETAINS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type. *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051482784	95132663		

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS CA 90670

4. Generator's Phone (310 946-6427

5. Transporter 1 Company Name	6. US EPA ID Number
ISLAND ENVIRONMENTAL SERVICES	CAD981376213

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

9. Designated Facility Name and Site Address	10. US EPA ID Number
STATEWIDE ENVIRONMENTAL 12612 SO. MAIN ST. LOS ANGELES CA 90061	CAD000388252

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
a. NON-RCRA HAZARDOUS WASTE, SOLID (OIL AND ABSORBENT)	002	DM	20000	P
b.				
c.				
d				

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE GEAR ERG 11A. HOTLINE
24 HR. PHONE (618) 855-1200

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	Signature	Month	Day	Year
		3	30	95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
RICHARD L VICK		3	30	95

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	Signature	Month	Day	Year
Claudia Perez		04	12	95

DO NOT WRITE BELOW THIS LINE.

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

DTSC 8022A (9/93)
EPA 8700—22

Green TRANSPORTER RETAINS

EPA No CAD981376213
STATE ID NO 1045
CA 627
DOT 465272

ISLAND ENVIRONMENTAL SERVICES, INC.

Waste Management & Transportation

TRANSPORTATION RECEIPT

WORK ORDER/INVOICE NO. 952496

Established 1982

13912 "A" VALLEY • CITY OF INDUSTRY, CA 91746 • (800) 400-4347 • (818) 855-1200 • FAX (818) 333-4141

Contact JOHN HOUCK
Job Site T-CHEM PRODUCTS, INC.
Address 9028 DICE RD. SANTA FE SPRINGS CA 90670

310 946-6427

Phone
Hours

Bill To

CAD051482784

EPA NO
PO NO. IN DM

Fac /Cont./Waste Codes

Customer No C52432
Date 09/06/95
Driver Vick
Unit No. #04 86

Referred by

Appointment Day 9/7

16445

Facility STATEWIDE ENVIRONMENTAL
12618 SO. MAIN ST.
LOS ANGELES CA 90061
CAD000088252
213-756-7896

EPA No.
Phone
Disposal Ticket No. 95132663
Manifest No
Approval No.
Special Inst. REMOVE 2 DRUMS OIL AND ABSORBENT

ISTOMER SIGNATURE

PRINT NAME DATE

DRIVER SIGNATURE 6 SEPT 95 SHIP DATE

PRODUCT SHIPPED

DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT

☐ Oil and Water, Non-RCRA Hazardous Waste, Liquid ☐ Lubricating ☐ Industrial
☐ Waste Combustible Liquid
☐ Waste Flammable Liquid
☐ Non-RCRA Hazardous Waste Liquid
☐ Oily Water
☐ Water Soluble Oil
☐ Non-Hazardous Waste Water & Sludge
☐ Used Oil Filters
☑ Other OIL AND ABSORBENT 2 x 55 GAL DRUMS

OTHER CHARGES

☐ Service Charge ☐ Time Only
☐ Chlor Test ☐ Pos ☐ Neg
☐ Profile
☐ Analytical
☐ Disposal Fees – Solids
☐ Disposal Fees – Liquids
☐ Empty Drum Disposal
☐ Empty Drums Supplied
☐ Transportation
☐ Washout
☐ California State Manifesting Fee
☐ Other

PLEASE REMIT – *Thank you*

Tax (on supplies only)
Paid on Account Check ☐ Cash ☐
Balance

NOTE: THIS IS AN INVOICE AS WELL AS A MODIFIED MANIFEST FOR THE DISPOSAL OF YOUR WASTE
THE TERMS OF THIS INVOICE ARE NET 10 DAYS UPON RECEIPT
DELINQUENT ACCOUNTS SUBJECT TO A CHARGE OF 1½% PER MONTH (ANNUAL RATE 18%)

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

95132663

IN CASE OF 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: CAD051482784524 96 — Manifest Document No — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS CA 90670
4 Generator's Phone (310 946-6427

A State Manifest Document Number: 95132663
B State Generator's ID:

5. Transporter 1 Company Name — 6. US EPA ID Number
ISLAND ENVIRONMENTAL SERVICES CAD981376211 3

C State Transporter's ID: 44845
D Transporter's Phone: (818) 855-1200

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 — 10. US EPA ID Number
STATEWIDE ENVIRONMENTAL
12618 SO. MAIN ST.
LOS ANGELES CA 90061 CAD000882852

G State Facility's ID: CAD000882852
H Facility's Phone: 213-756-7896

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 Number
a. NON-RCRA HAZARDOUS WASTE, SOLID (OIL AND ABSORBENT)	002	DM	20000	P	State 223 / EPA/Other NONE
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above: 11A. OIL AND ABSORBENT SES #28875-A

K. Handling Codes for Wastes Listed Above: a. 14103 b. c. d.

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE GEAR ERG 11A. NONE

24 HR. PHONE (818) 855-1200

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	Signature	Month	Day	Year
JOHN WATTSON		05	06	95

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
ARNOLD L VICK		05	06	95

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	Signature	Month	Day	Year
Claudia Perez		05	12	95

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (9/93)
EPA 8700—22

7-088-06

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

safety-kleen

PHASE II - GENERATOR IS NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER LDR NOTICE: WILL MONITOR FOR ALL 216 REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. CAT000613893 (DESIGNATED FACILITY)

7-088-06-2788 L2 577120 9012

ADDRESS: 10625 RICKSON ST UNIT A/C EL MONTE, CA 91731

Under manifest/sales service number 96071490 the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD OR METHOD
☒ Waste Petroleum Naphtha 105	D001	Ignitable Liquid (High TOC Subcategory)	COMBUSTION (CMBST)
		Halogenated Organic Compounds (HOC's)≥1000 mg/l	or recovery (RORGS)(40 CFR 268 42)(non-waste water)
	D006	Cadmium	1 0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D035	Methyl Ethyl Ketone	36 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6 0 (non-waste water) MG/KG
	D040	Trichloroethylene	6 0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha 140	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268 42)(non-waste water)
	D006	Cadmium	1 0 (non-waste water) MG/L
	D008	Lead	5 0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
☐ Actrel Solvent (If customer specific TCLP is not available)	D006	Cadmium	1 0 (non-waste water) MG/L
	D008	Lead	5 0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6 0 (non-waste water) MG/KG
	D040	Trichloroethylene	6 0 (non-waste water) MG/KG
☐ Aqueous Parts Washer	D006	Cadmium	1 0 (non-waste water) MG/L
	D008	Lead	5 0 (non-waste water) MG/L
☐ 150 Premium Solvent	D008	Lead	5 0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ AQUEOUS BRAKE CLEANER	D006	Cadmium	1.0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6 0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268 42)(non-waste water)
	D006	Cadmium	1 0 (non-waste water) MG/L
	D008	Lead	5 0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6 0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Photo Imaging	D011	Silver	5 0 (non-waste water) MG/KG
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5 0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D027	1, 4-Dichlorobenzene	6.0 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Gasoline Filters	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268 42)(non-waste water)
	D018	Benzene	10 (non-waste water) MG/KG

OPTIONAL STATE INFO.

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(C>1/3)(Y/N)	OFF-COLOR? (Y/N)	MORE THAN 30% SOLIDS? (Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)
30700383						

SPECIFIC GRAVITY ACCEPTANCE GUIDELINES

SALES REPRESENTATIVE SIGNATURE (FOR OPTIONAL STATE INFORMATION) ** NO SIGNATURE REQUIRED **

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste)

***These treatment standards do not preclude reclamation prior to final disposition.**

Generator Company T-CHEM PRODUCTS INC. EPA ID NO. CAD059487784

GENERATOR

FORM 1339 (1/96)

KIK Corporation Inc.

Hazardous Waste
Management Training

Training Records

KIK CUSTOM PRODUCTS - SOCAL, INC.

9028 Dice Road Santa Fe Springs, CA. 90670

Training Sign-in Sheet

Date: 10-12-06

Subject: D.O.T. / HAZMAT TRAINING

Trainer: ~~BOB BROWN~~ / RAY WETTER

Employee Name:	Employee Signature:
PHIL GLOCK	Phil Glock
MANUEL Rodriguez	Manuel Rodriguez
Juan C. Villalta	Juan C. Villalta
JOSE Manzano Torres	Jose Manzano Torres
Steve Aguirre	Steve Aguirre
~~Charles Hemphill~~	Charles Hemphill
RAYMOND WETTER	Raymond Wetter
~~BOB BROWN~~	Bob Brown
Denise Sabre	Denise Sabre
Ignacio Sanchez	Ignacio Sanchez
Juan Cardenas	Juan Cardenas
VERGIL [illegible]	[illegible]
Mario Resendiz	Mario Resendiz
ALFredo GOMEZ	Alfredo Gomez
FRANCISCO CALVO	Francisco Calvo
PAT RYAN	[illegible]
MANUEL BAJA	[illegible]
Brandon Lopez	Brandon Lopez
Jose DUARTE	Jose Duarte
Santiago Hernandez Vaz	Santiago Hernandez

KIK CUSTOM PRODUCTS - SOCAL, INC.

9028 Dice Road Santa Fe Springs, CA. 90670

Training Sign-in Sheet

Date: 10/12/06

Subject: DOT / HAZMAT TRAINING

Trainer: Bob BROWN / ~~RA~~ WEBER

Employee Name:	Employee Signature:
JUAN RIVAS	Juan Rivas
ARNULFO CORTEZ	Arnulfo Cortez

United States Compliance

Employee Safety Training Record

Company: K|K SoCal **Subject:** HAZARDOUS MATERIALS & WASTE MANAGEMENT

Description of Subject Material: HAZARDOUS MATERIALS & WASTE MANAGEMENT

TRAINING FOR ALL EMPLOYEES ACCORDING TO California regulations.

Trainer's Signature: Carlos Galindo, USCC **Date:** 6/22/04

Employee Print Name: (Nombre y Apellido *porfavor con letra de molde*)	**Signature:** (Firma)
ROBERT D. BROWN	Robert D. Brown
CHARLES HEMPHILL	Charles Hemphill
ERNESTO ROMO	Ernesto Romo
MONICA VILLA	Monica Villa
FRANCISCO CALVO	FRANCISCO CALVO.

United States Compliance Corporation
301 Carlson Parkway • Suite 200 • Minnetonka, MN 55305 • Phone 952.252.3000 • Fax 952.252.3001
www uscompliance.com

KIK INTERNATIONAL SOCAL INC.

9028 Dice Rd, Santa Fe Springs, Ca. 90670

SAFETY MEETING SIGN IN SHEET

Date : 3-07-03 Subject: HAZARDOUS MATERIALS & WASTE MGM

Trainer John Dingmann

Employee Name	No.	Employee Name	No.
Bobby Brown	1	ROBERT D BROWN	
Chad Taylor		Charles Hemphill	
Russell Johnson		Darrell Johnson	
FRANK CALVO			

KIKINTERNATIONALSOCAL,INC. MEMORANDUM

To: Designated Employees

From: Derrell Johnson

Date: March 25,2003

Subject: Hazardous Materials and Waste Management Training

Due to the requirement that we have annual Hazardous Material and Waste Management Training for designated personnel, the following training will be held on Thursday March 27, 2003,at 1:00 PM in the Plant Lunch room. This training will last Approximently one hour, with the training to be conducted by John Dingman from USCC. The following personnel are **required** to attend:

Robert D. Brown

Frank Calvo

Charles Hemphill

Philip Moheng

Monico Villa

Thank you for your cooperation. Any questions, please feel free to contact me at 2240.

Cc: Greg Wiese
Bob Brown
Designated Personnel
Dave Going
Manuel Herrera
Bulletin Board
Training Records

City of Santa Fe Springs
Fire Department and
Santa Fe Springs Chamber of Commerce & Industrial League, Inc.

This certificate confirms that

Derrell Johnson

of

KIK International So-Cal, Inc.

Completed the four-hour Hazardous Waste Generator Workshop on

May 2, 2002

Neal Welland, Fire Chief ***Dave Klunk, Director of Environmental Protection***

KIK Corporation Inc.

Hazardous Waste
Management Training

Agency Documentation

City of Santa Fe Springs Fire Department

Environmental Protection Division ■ Certified Unified Program Agency

11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

INSPECTION REPORT & NOTICE OF VIOLATION

Page 1 of ___

KIK
9028 Dice
SFS, CA 90670

HMBP UFC
HWG CalARP
IW SW
SIC 2841

The following items, if applicable, have been inspected. This document constitutes a Summary of Violations and Notice to Comply if the violation (V) column is checked

Reference Titles 19 and 22 of the California Code of Regulations (CCR), Chapters 6 5, 6 67, and 6 95 of the Health and Safety Code (HSC), and Chapter 97 of the City Code

Inspector(s) Richard Kallman **Inspection date** 10 / 19 / 05

Inspection consent given by Darrell Johnson **Contact phone number** (562) 946-6427

	V	HAZARDOUS WASTE GENERATOR SUBJECT	REFERENCE
1		Hazardous waste generator permit	City Ordinance 97 400
2		EPA ID number (call DTSC 800-618-6942)	CCR 66262 12(a)
3		Hazardous waste determination	CCR 66262.11
4		Proper disposal of hazardous waste	HSC 25189.5(a)
5		Reckless management of hazardous waste	HSC 25189 6
6		Hazardous waste labeling	CCR 66262 34(f)
7		Hazardous waste accumulation time	CCR 66262 34(a-d)
8		Retrograde/speculative accumulation	CCR 66262 10
9		Satellite accumulation	CCR 66262.34(e)
10		Containers leaking or not in good condition	CCR 66265 171
11		Hazardous waste container closed	CCR 66265.173(a)
12		Separation of incompatibles	CCR 66265 177
13		Management of empty containers	CCR 66261 7
14		Used oil management	CHSC 25250 4
15		Used oil filter management	CCR 66266 130
17		Contaminated textile management	HSC 25144.6
18		Container storage inspection – weekly	CCR 66265 174
19		Tank inspection – daily	CCR 66265 195
20		Tank operating requirements	CCR 66265 194
21		Hazardous waste transported w/o manifest	CCR 66262 20-23
		Hazardous waste manifest complete	CCR 66262 23(a)
		Manifest copies to DTSC	CCR 66262 23(a)(4)
24		Manifest copies retained for 3 years	CCR 66262 40(a)
25		Consolidated manifest requirements	HSC 25160 2
26		LDR documents retained onsite	CCR 66268 7(a)(6)

	V	HAZARDOUS WASTE GENERATOR SUBJECT	REFERENCE
27		Hazardous waste analysis retained for 3 yrs	CCR 66262.40(c)
28		Personnel training for LQG	CCR 66265.16
29		Personnel training for generators of waste	CCR 66262.34(d), CFR
30		Contingency plan for LQG	CCR 66265 51
31		Emergency preparedness/prevention	CCR 66265 30
32		SB14 requirements for LQGs	CCR 67100 3
33		Biennial report for RCRA LQGs	CCR 66262.40
34		Excluded recyclable material management	HSC 25143.2- 9
35		Recyclable material report	HSC 25143.10
36		Proper management of Universal Waste	CCR 66273
37		Other hazardous waste violation(s)	
		HAZARDOUS MATERIALS BUSINESS PLAN	
38		HMBP established and filed	HSC 25503 5
39	O	Inventory and plot plan accurate	HSC 25509
40		Owner/operator information accurate	Ch 6 95, HSC
		INDUSTRIAL WASTE	
42		Discharging industrial waste w/o a permit	City Ordinance, Ch. 97
43		Other violation(s)	
		STORM WATER	
44		Storm water permit required (GIASP)	City Ordinance, Ch 52
45		Failure to implement BMPs	City Ordinance, Ch 52
		ABOVE GROUND PETROLEUM STORAGE	
46		SPCC plan complete per requirements	CHSC 25270 5(c)
		UNIFORM FIRE CODE	
47		Uniform Fire Code	Uniform Fire Code

☒ **No hazardous waste violation(s) observed on date of inspection**

☒ **Notice to Comply: The violation(s) must be corrected by** 11-19-05 .

☒ **Return "Certificate of Compliance"** **$** **Fee after this date**

Attention The item(s) checked are in violation A re-inspection may occur at any time to verify compliance Non-compliance could result in re-inspection fees, permit revocation, and/or administrative/civil/criminal penalties Any time granted for correction of the violation(s) does not preclude any enforcement action by this Department or other agencies The giving of this notice and recent inspection of your facility is not a representation by the City of Santa Fe Springs that no other violations exist on your premises

Program(s) inspected: ☒ HMBP ☒ HWG ☐ TP ☐ PBR ☐ RECYCLER ☐ UST ☒ CAL ARP ☐ SPCC ☒ SW ☒ IW ☒ UFC

Inspection type: ☒ Routine ☐ Other | HWG Status ☐ RCRA LQG ☐ RCRA SQG ☒ CA ONLY ☐ RECYCLER ☐ CESQG Silver ☐ SPG

Inspection Category ☐ Single Program ☒ Combined ☐ Joint ☒ Integrated/Multi-Media | Number of Employees: 78

Notes Kik was inspected on 10-19-05. Facility manufactures bleach from Chlorine + Caustic. Hazardous Waste Records were not reviewed.

39. Kik violated H+SC 25509 by not having an accurate inventory on File. Calfoam ES-603, Glycol Ether, + Stepanate-SXS were not on their inventory. Kik must update their inventory.

A. Kik violated Title 19 by not having the CalARP related SOPs certified annually. Kik must have their CalARP related SOPs certified annually.

3. Kik violated UFC 79 by pumping flammable liquid with a non-rated pump. Kik must only transfer the flammable liquid through a listed pump. Violations must be corrected by 11-19-05

I have read and understand the above stated violations After these violations have been corrected, I will sign and return the "Certification of Compliance" form and submit any other required or requested information

Signature of responsible party	Print name	Date
	Darrell Johnson	10/19/05

City of Santa Fe Springs Fire Department

Environmental Protection Division ■ Certified Unified Program Agency

11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

INSPECTION REPORT & NOTICE OF VIOLATION

KIK
9028 Dee
SFS, CA 90670

HMBP CalARP
HWG SW
IW
UFC

The following items, if applicable, have been inspected. This document constitutes a Summary of Violations and Notice to Comply if the violation (V) column is checked
Reference Titles 19 and 22 of the California Code of Regulations (CCR), Chapters 6 5, 6 67, and 6 95 of the Health and Safety Code (HSC), and Chapter 97 of the City Code

Inspector(s) Richard Kallman **Inspection date** 9/28/06

Inspection consent given by Bob Brown **Contact phone number** (562) 946-6427

	V	HAZARDOUS WASTE GENERATOR SUBJECT	REFERENCE
1		Hazardous waste generator permit	City Ordinance 97 400
2		EPA ID number (call DTSC 800-618-6942)	CCR 66262 12(a)
3	?	Hazardous waste determination	CCR 66262 11
4		Proper disposal of hazardous waste	HSC 25189 5(a)
5		Reckless management of hazardous waste	HSC 25189 6
6	W	Hazardous waste labeling	CCR 66262 34(f)
7		Hazardous waste accumulation time	CCR 66262 34(a-d)
8		Retrograde/speculative-accumulation	CCR 66262 10
9		Satellite accumulation	CCR 66262 34(e)
10		Containers leaking or not in good condition	CCR 66265 171
11		Hazardous waste container closed	CCR 66265 173(a)
12		Separation of incompatibles	CCR 66265 177
13		Management of empty containers	CCR 66261 7
14		Used oil management	CHSC 25250 4
15		Used oil filter management	CCR 66266 130
17		Contaminated textile management	HSC 25144 6
18	W	Container storage inspection – weekly	CCR 66265 174
19		Tank inspection – daily	CCR 66265 195
20		Tank operating requirements	CCR 66265 194
21		Hazardous waste transported w/o manifest	CCR 66262 20-23
22		Hazardous waste manifest complete	CCR 66262 23(a)
		Manifest copies to DTSC	CCR 66262 23(a)(4)
24		Manifest copies retained for 3 years	CCR 66262 40(a)
25		Consolidated manifest requirements	HSC 25160 2
26		LDR documents retained onsite	CCR 66268 7(a)(6)

	V	HAZARDOUS WASTE GENERATOR SUBJECT	REFERENCE
27		Hazardous waste analysis retained for 3 yrs	CCR 66262 40(c)
28		Personnel training for LQG	CCR 66265 16
29		Personnel training for generators of waste	CCR 66262 34(d), CFR
30		Contingency plan for LQG	CCR 66265 51
31		Emergency preparedness/prevention	CCR 66265 30
32		SB14 requirements for LQGs	CCR 67100 3
33		Biennial report for RCRA LQGs	CCR 66262 40
34		Excluded recyclable material management	HSC 25143 2- 9
35		Recyclable material report	HSC 25143 10
36		Proper management of Universal Waste	CCR 66273
37		Other hazardous waste violation(s)	
		HAZARDOUS MATERIALS BUSINESS PLAN	
38	B	HMBP established and filed	HSC 25503 5
39	O	Inventory and plot plan accurate	HSC 25509
40		Owner/operator information accurate	Ch 6.95, HSC
		INDUSTRIAL WASTE	
42		Discharging industrial waste w/o a permit	City Ordinance, Ch 97
43		Other violation(s)	
		STORM WATER	
44		Storm water permit required (GIASP)	City Ordinance, Ch 52
45		Failure to implement BMPs	City Ordinance, Ch 52
		ABOVE GROUND PETROLEUM STORAGE	
46		SPCC plan complete per requirements	CHSC 25270 5(c)
		UNIFORM FIRE CODE	
47		Uniform Fire Code	Uniform Fire Code

☐ **No hazardous waste violation(s) observed on date of inspection.**

☒ **Notice to Comply: The violation(s) must be corrected by** 10-28-06.

☒ **Return "Certificate of Compliance"** **$** **Fee after this date**

Attention The item(s) checked are in violation A re-inspection may occur at any time to verify compliance Non-compliance could result in re-inspection fees, permit revocation, and/or administrative/civil/criminal penalties Any time granted for correction of the violation(s) does not preclude any enforcement action by this Department or other agencies The giving of this notice and recent inspection of your facility is not a representation by the City of Santa Fe Springs that no other violations exist on your premises

Program(s) inspected ☒ HMBP ☒ HWG ☐ TP ☐ PBR ☐ RECYCLER ☐ UST ☒ CAL ARP ☐ SPCC ☒ SW ☒ IW ☒ UFC

Inspection type ☒ Routine ☐ Other | HWG Status ☐ RCRA LQG ☐ RCRA SQG ☒ CA ONLY ☐ RECYCLER ☐ CESQG Silver ☐ SPG

Inspection Category ☐ Single Program ☒ Combined ☐ Joint ☒ Integrated/Multi-Media | Number of Employees 75

Notes On 9-28-06 KIK was inspected. Facility is a bleach manufacturer.
3. KIK must make a waste determination on their filter cake and wastewater # in accordance with 22CCR66262.11. A Cam 17 should be run on these materials.
6. KIK violated 22CCR66262.34(f) by not having all hazardous waste containers labelled. The container in the blow mold area & containers in the waste drum storage area were not labelled or labels were incomplete. Ensure all waste containers are completely labelled.
18. KIK must inspect waste containers weekly in accordance with 22CCR66265.174. Inspections were conducted but did not accurately reflect conditions on the site. Weekly inspections must be conducted to ensure compliance with waste requirements.
39. K.I.K must update their business plan in accordance with HSC 25509. Ensure Isopropyl Alcohol is added to inventory and any other non-disclosed materials are added.
Correct violations by 10-28-06

I have read and understand the above stated violations After these violations have been corrected, I will sign and return the "Certification of Compliance" form and submit any other required or requested information

Signature of responsible party	Print name	Date
	ROBERT R BROWN	9-28-06

City of Santa Fe Springs Fire Department
Environmental Protection Division ■ Certified Unified Program Agency
11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

CERTIFICATION OF COMPLIANCE

BUSINESS	SITE ADDRESS
INSPECTOR	DATE OF INSPECTION

This form must be completed and returned to the issuing inspector within 30 days of your facility's inspection unless otherwise noted. Send this form and any supporting documentation to the address listed above. Failure to return this certification may result in a re-inspection of your facility and may require re-inspection fees pursuant to City of Santa Fe Springs Municipal Code Section 97.104.

The violation(s) cited have been corrected by the following actions:

#3 WASTE DETERMINATION ON WASTE WATER HAS BEEN ANALYZED BY WEST COAST ANALYTICAL SERVICE. A COPY IS ATTACHED. A FILTER CAKE SAMPLE WILL BE TESTED WITHIN 30 DAYS AS EQUIPMENT INSTALLATION IS EXPECTED TO BE COMPLETE WITHIN THAT TIME.

Classes of violations: I = Class I violation, II = class II violation, M = Minor, and O – other violation

- I certify that the violations cited on the Notice of Violation & Inspection Report have been corrected.
- I have personally examined any attached documentation submitted as proof of compliance and I believe the information to be true and accurate.
- Based on my examination of any attached documentation and inquiry of the individual(s) who prepared or obtained them, I believe the information to be true, accurate, and complete.
- I am authorized to file this certification on behalf of the responsible party.
- I am aware that there are significant penalties for submitting false information and/or for non-compliance and declare that the foregoing certification is true and correct.

Executed at: SANTA FE SPRINGS , *California* 90670 *Date:* 10-27-06

Signature: [signature] *Printed Name:* ROBERT R BROWN

Position/Title: GENERAL MANAGER

Client: KIK CUSTOM PRODUCTS
Job Number: 90446

Selected Metals by SOP 7040, Rev 8
Quantitative Analysis Report
Inductively Coupled Plasma - Mass Spectrometry

Parts Per Million (mg/L)

Element	Wastewater	Detection Limit
Antimony	ND	0.001
Arsenic	ND	0.007
Barium	ND	0.2
Beryllium	ND	0.001
Cadmium	ND	0.001
Chromium	0.13	0.04
Cobalt	ND	0.002
Copper	ND	0.01
Lead	ND	0.02
Mercury	ND	0.01
Molybdenum	ND	0.009
Nickel	ND	0.01
Selenium	ND	0.03
Silver	ND	0.001
Thallium	ND	0.001
Vanadium	ND	0.03
Zinc	ND	2

Date Analyzed: 10-12-06

Client: KIK CUSTOM PRODUCTS
Job Number: 90446

Quality Control Summary

Sample: Wastewater

Parts Per Million (mg/L)

Analyte	Sample Result	Duplicate Result	Average Result	Sample RPD	Spike Conc	Spike Result	Spike % Rec
Antimony	ND	ND	ND	NA	0.1	0.0903	90
Arsenic	ND	ND	ND	NA	0.1	0.0881	88
Beryllium	ND	ND	ND	NA	0.1	0.0698	70
Cadmium	ND	ND	ND	NA	0.1	0.0799	80
Chromium	0.127	0.122	0.1245	NA	0.1	0.206	82
Cobalt	ND	ND	ND	NA	0.1	0.0861	86
Copper	ND	ND	ND	NA	0.1	0.0808	81
Lead	ND	ND	ND	NA	0.1	0.0827	83
Molybdenum	ND	ND	ND	NA	0.1	0.102	102
Nickel	ND	ND	ND	NA	0.1	0.0719	72
Selenium	ND	ND	ND	NA	1	0.76	76
Silver	ND	ND	ND	NA	0.1	0.087	87
Thallium	ND	ND	ND	NA	0.1	0.0812	81
Vanadium	ND	ND	ND	NA	0.1	0.0934	93

Date Analyzed: 10-12-06

City of Santa Fe Springs Fire Department
Environmental Protection Division ■ Certified Unified Program Agency
11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

CERTIFICATION OF COMPLIANCE

BUSINESS	SITE ADDRESS
INSPECTOR	DATE OF INSPECTION

This form must be completed and returned to the issuing inspector within 30 days of your facility's inspection unless otherwise noted. Send this form and any supporting documentation to the address listed above. Failure to return this certification may result in a re-inspection of your facility and may require re-inspection fees pursuant to City of Santa Fe Springs Municipal Code Section 97.104.

The violation(s) cited have been corrected by the following actions:

#6 WASTE CONTAINERS LABELED. - ALL WASTE CONTAINERS IN BLOW MOLD, WAREHOUSE, AND PROCESSING AREA HAVE BEEN IDENTIFIED AND LABELED COMPLETELY.

Classes of violations: I = Class I violation, II = class II violation, M = Minor, and O – other violation

- **I certify that the violations cited on the Notice of Violation & Inspection Report have been corrected.**
- **I have personally examined any attached documentation submitted as proof of compliance and I believe the information to be true and accurate.**
- **Based on my examination of any attached documentation and inquiry of the individual(s) who prepared or obtained them, I believe the information to be true, accurate, and complete.**
- **I am authorized to file this certification on behalf of the responsible party.**
- **I am aware that there are significant penalties for submitting false information and/or for non-compliance and declare that the foregoing certification is true and correct.**

Executed at: SANTA FE SPRINGS, *California* 90670 *Date:* 10-27-06

Signature: [signature] *Printed Name:* ROBERT R BROWN

Position/Title: GENERAL MANAGER

City of Santa Fe Springs Fire Department
Environmental Protection Division ■ Certified Unified Program Agency
11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

CERTIFICATION OF COMPLIANCE

BUSINESS	SITE ADDRESS
INSPECTOR	DATE OF INSPECTION

This form must be completed and returned to the issuing inspector within 30 days of your facility's inspection unless otherwise noted. Send this form and any supporting documentation to the address listed above. Failure to return this certification may result in a re-inspection of your facility and may require re-inspection fees pursuant to City of Santa Fe Springs Municipal Code Section 97.104.

The violation(s) cited have been corrected by the following actions:

#1B WEEKLY HAZARDOUS INSPECTIONS. THE WEEKLY INSPECTION FORM HAS BEEN MODIFIED AS TO REQUIRE NOTES / COMMENTS TO ALL HAZARDOUS MATERIALS AND CONTAINERS. TRAINING HAS BEEN CONDUCTED AND ALL PROCESSING PERSONNEL AND MANAGEMENT SUPERVISION ARE AWARE OF REGULATORY DETAILS. INSPECTION FORM IS REVIEW BY PROCESSING MANAGER ON A MONTHLY BASIS.

Classes of violations: I = Class I violation, II = class II violation, M = Minor, and O – other violation

- **I certify that the violations cited on the Notice of Violation & Inspection Report have been corrected.**
- **I have personally examined any attached documentation submitted as proof of compliance and I believe the information to be true and accurate.**
- **Based on my examination of any attached documentation and inquiry of the individual(s) who prepared or obtained them, I believe the information to be true, accurate, and complete.**
- **I am authorized to file this certification on behalf of the responsible party.**
- **I am aware that there are significant penalties for submitting false information and/or for non-compliance and declare that the foregoing certification is true and correct.**

Executed at: SANTA FE SPRINGS *California* 90670 *Date:* 10-27-06

Signature: Robert R Brown *Printed Name:* ROBERT R BROWN

Position/Title: GENERAL MANAGER

City of Santa Fe Springs Fire Department
Environmental Protection Division ■ Certified Unified Program Agency
11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

CERTIFICATION OF COMPLIANCE

BUSINESS	SITE ADDRESS
INSPECTOR	DATE OF INSPECTION

This form must be completed and returned to the issuing inspector within 30 days of your facility's inspection unless otherwise noted. Send this form and any supporting documentation to the address listed above. Failure to return this certification may result in a re-inspection of your facility and may require re-inspection fees pursuant to City of Santa Fe Springs Municipal Code Section 97.104.

The violation(s) cited have been corrected by the following actions:

#39 UPDATE BUSINESS PLAN. COMPLETED.
NEW INVENTORY LIST ATTACHED

Classes of violations: I = Class I violation, II = class II violation, M = Minor, and O – other violation

- **I certify that the violations cited on the Notice of Violation & Inspection Report have been corrected.**
- **I have personally examined any attached documentation submitted as proof of compliance and I believe the information to be true and accurate.**
- **Based on my examination of any attached documentation and inquiry of the individual(s) who prepared or obtained them, I believe the information to be true, accurate, and complete.**
- **I am authorized to file this certification on behalf of the responsible party.**
- **I am aware that there are significant penalties for submitting false information and/or for non-compliance and declare that the foregoing certification is true and correct.**

Executed at: SANTA FE SPRINGS *California* 90670 *Date:* 10-27-06

Signature: Robert R Brown *Printed Name:* ROBERT R BROWN

Position/Title: GENERAL MANAGER

Hazardous Materials Business Plan - List of Chemicals

Permit No #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	230000	GAL	Liquid	200000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
DIESEL FUEL NO. 2	DIESEL FUEL NO. 2	220	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
VERSENE 100	CHELATING LIQUID 100	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	
DMDM HYDANTION	DANTOGARD DMDMHYDANTION	110	GAL	Liquid	55 Ga	
ACTIVES	FMB 1210-8	110	GAL	Liquid	55	
ANIONIC SURFACTANT	CALFOAM ES-603	660	GAL	Liquid	55	
HYDROTROPE	STEPANATE SXS	440	GAL	Liquid	55	
GLYCOL ETHER	GLYCOL ETHER DB	440	GAL	Liquid	55	

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
ANIONIC SURFACTANT	CALFOAM ES-603	440		Liquid	55	
ISOPROPYL ALCOHOL	ISOPROPANOL ANHYDROUS	220		Liquid	55	

Hazardous Materials Business Plan - List of Chemicals

Permit No 60-0091 **Facility:** KIK INTERNATIONAL SO-CA

Address: 9028 DICE, SANTA FE SPRINGS

Chemical	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
ACETYLENE	390	CU FT	Gas	130	
AMMONIA AQUEOUS	6000	GAL	Liquid	6000	
ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
ARGON	250	CU FT	Gas	250	
BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CALFOAM ES-603	440		Liquid	55	
CALFOAM ES-603	660	GAL	Liquid	55	
CAUSTIC SODA 50%	230000	GAL	Liquid	200000	
CHELATING LIQUID 100	220	GAL	Liquid	55	
CHLORINE	900000	LBS	Gas	180000	
DANTOGARD DMDMHYDANTION	110	GAL	Liquid	55 Ga	
DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
DGC WinSurf	440	GAL	Liquid	55	
DIESEL FUEL NO 2	220	GAL	Liquid	110	
FMB 1210-8	110	GAL	Liquid	55	
GLYCOL ETHER DB	440	GAL	Liquid	55	
HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
NITROGEN	3648	CU FT	Gas	304	
OPACIFIER 305	55	LBS	Liquid	55	
OXYGEN	747	CU FT	Gas	249	
PHOSPHORIC ACID	55	GAL	Liquid	55	
POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
PROPANE	18231	CU FT	Gas	18231	
SODA ASH	2000	LBS	Solid	55	
SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
STEPANATE SXS	440	GAL	Liquid	55	
SURFONIC N-102	12000	GAL	Liquid	12000	
T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
WASTE OIL	300	GAL	Liquid	300	

City of Santa Fe Springs Fire Department

Environmental Protection Division ■ Certified Unified Program Agency

11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

INSPECTION REPORT & NOTICE OF VIOLATION

The following items, if applicable, have been inspected. This document constitutes a Summary of Violations and Notice to Comply if the violation (V) column is checked

Reference Titles 19 and 22 of the California Code of Regulations (CCR), Chapters 6.5, 6.67, and 6.95 of the Health and Safety Code (HSC) and Chapter 97 of the City Code

Inspector(s) **Inspection date** / /

Inspection consent given by **Contact phone number ( )**

HAZARDOUS WASTE GENERATOR				HAZARDOUS WASTE GENERATOR			
	V	*SUBJECT*	*REFERENCE*		V	*SUBJECT*	*REFERENCE*
1		Hazardous waste generator permit	City Ordinance 97.400	27		Hazardous waste analysis retained for 3 yrs	CCR 66262.40(c)
2		EPA ID number (call DTSC 800-618-6942)	CCR 66262.12(a)	28		Personnel training for LQG	CCR 66265.16
3		Hazardous waste determination	CCR 66262.11	29		Personnel training for generators of waste	CCR 66262.34(d), CFR
4		Proper disposal of hazardous waste	HSC 25189.5(a)	30		Contingency plan for LQG	CCR 66265.51
5		Reckless management of hazardous waste	HSC 25189.6	31		Emergency preparedness/prevention	CCR 66265.30
6		Hazardous waste labeling	CCR 66262.34(f)	32		SB14 requirements for LQGs	CCR 67100.3
7		Hazardous waste accumulation time	CCR 66262.34(a-d)	33		Biennial report for RCRA LQGs	CCR 66262.40
8		Retrograde/speculative accumulation	CCR 66262.10	34		Excluded recyclable material management	HSC 25143.2-9
9		Satellite accumulation	CCR 66262.34(e)	35		Recyclable material report	HSC 25143.10
10		Containers leaking or not in good condition	CCR 66265.171	36		Proper management of Universal Waste	CCR 66273
11		Hazardous waste container closed	CCR 66265.173(a)	37		Other hazardous waste violation(s)	
12		Separation of incompatibles	CCR 66265.177			**HAZARDOUS MATERIALS BUSINESS PLAN**	
13		Management of empty containers	CCR 66261.7	38		HMBP established and filed	HSC 25503.5
14		Used oil management	CHSC 25250.4	39		Inventory and plot plan accurate	HSC 25509
15		Used oil filter management	CCR 66266.130	40		Owner/operator information accurate	Ch. 6.95, HSC
17		Contaminated textile management	HSC 25144.6			**INDUSTRIAL WASTE**	
18		Container storage inspection – weekly	CCR 66265.174	42		Discharging industrial waste w/o a permit	City Ordinance, Ch. 97
19		Tank inspection – daily	CCR 66265.195	43		Other violation(s)	
20		Tank operating requirements	CCR 66265.194			**STORM WATER**	
21		Hazardous waste transported w/o manifest	CCR 66262.20-23	44		Storm water permit required (GIASP)	City Ordinance, Ch. 52
22		Hazardous waste manifest complete	CCR 66262.23(a)	45		Failure to implement BMPs	City Ordinance, Ch. 52
23		Manifest copies to DTSC	CCR 66262.23(a)(4)			**ABOVE GROUND PETROLEUM STORAGE**	
24		Manifest copies retained for 3 years	CCR 66262.40(a)	46		SPCC plan complete per requirements	CHSC 25270.5(c)
25		Consolidated manifest requirements	HSC 25160.2			**UNIFORM FIRE CODE**	
26		LDR documents retained onsite	CCR 66268.7(a)(6)	47		Uniform Fire Code	Uniform Fire Code

☐ **No hazardous waste violation(s) observed on date of inspection**

☐ **Notice to Comply: The violation(s) must be corrected by _____.**

☐ **Return "Certificate of Compliance"** **$** **Fee after this date**

Attention: The item(s) checked are in violation. A re-inspection may occur at any time to verify compliance. Non-compliance could result in re-inspection fees, permit revocation, and/or administrative/civil/criminal penalties. Any time granted for correction of the violation(s) does not preclude any enforcement action by this Department or other agencies. The giving of this notice and recent inspection of your facility is not a representation by the City of Santa Fe Springs that no other violations exist on your premises.

Program(s) inspected ☐ HMBP ☐ HWG ☐ TP ☐ PBR ☐ RECYCLER ☐ UST ☐ CAL ARP ☐ SPCC ☐ SW ☐ IW ☐ UFC

Inspection type ☐ Routine ☐ Other | HWG Status ☐ RCRA LQG ☐ RCRA SQG ☐ CA ONLY ☐ RECYCLER ☐ CESQG Silver ☐ SPG

Inspection Category ☐ Single Program ☐ Combined ☐ Joint ☐ Integrated/Multi-Media | Number of Employees

Notes

I have read and understand the above stated violations. After these violations have been corrected, I will sign and return the "Certification of Compliance" form and submit any other required or requested information.

Signature of responsible party	Print name	Date

City of Santa Fe Springs Fire Department
Environmental Protection Division ■ Certified Unified Program Agency
11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

CERTIFICATION OF COMPLIANCE

BUSINESS	SITE ADDRESS
INSPECTOR	DATE OF INSPECTION

This form must be completed and returned to the issuing inspector within 30 days of your facility's inspection unless otherwise noted. Send this form and any supporting documentation to the address listed above. Failure to return this certification may result in a re-inspection of your facility and may require re-inspection fees pursuant to City of Santa Fe Springs Municipal Code Section 97.104.

The violation(s) cited have been corrected by the following actions:

Classes of violations: I = Class I violation, II = class II violation, M = Minor, and O – other violation

- **I certify that the violations cited on the Notice of Violation & Inspection Report have been corrected.**
- **I have personally examined any attached documentation submitted as proof of compliance and I believe the information to be true and accurate.**
- **Based on my examination of any attached documentation and inquiry of the individual(s) who prepared or obtained them, I believe the information to be true, accurate, and complete.**
- **I am authorized to file this certification on behalf of the responsible party.**
- **I am aware that there are significant penalties for submitting false information and/or for non-compliance and declare that the foregoing certification is true and correct.**

Executed at: , *California* *Date:*

Signature: *Printed Name:*

Position/Title:

City of Santa Fe Springs Fire Department
Environmental Protection Division ■ Certified Unified Program Agency
11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

CERTIFICATION OF COMPLIANCE

BUSINESS	SITE ADDRESS
INSPECTOR	DATE OF INSPECTION

This form must be completed and returned to the issuing inspector within 30 days of your facility's inspection unless otherwise noted. Send this form and any supporting documentation to the address listed above. Failure to return this certification may result in a re-inspection of your facility and may require re-inspection fees pursuant to City of Santa Fe Springs Municipal Code Section 97.104.

The violation(s) cited have been corrected by the following actions:

Classes of violations: I = Class I violation, II = class II violation, M = Minor, and O – other violation

- **I certify that the violations cited on the Notice of Violation & Inspection Report have been corrected.**
- **I have personally examined any attached documentation submitted as proof of compliance and I believe the information to be true and accurate.**
- **Based on my examination of any attached documentation and inquiry of the individual(s) who prepared or obtained them, I believe the information to be true, accurate, and complete.**
- **I am authorized to file this certification on behalf of the responsible party.**
- **I am aware that there are significant penalties for submitting false information and/or for non-compliance and declare that the foregoing certification is true and correct.**

Executed at: *, California* *Date:*

Signature: *Printed Name:*

Position/Title:

U.S. Compliance Corporation

Superfund Amendments and Reauthorization Act (SARA)

Exhibit E

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

COPY

PAGE 1 of ____

(IMPORTANT Type only, read instructions before completing form)

EPA

FORM U 2006

U.S. Environmental Protection Agency
Washington, DC 20460
Partial Updating of TSCA Inventory Data Base
Site Report
(Section 8(a) Toxic Substances Control Act, 15 U.S.C. 2607(a))

FOR EPA USE ONLY	
Report Number	
Mark "X" here if this is a revision to the previous report	

Company Report No KIKS2005

CERTIFICATION

Certification Statement: I hereby certify to the best of my knowledge and belief that Parts I and II have been completed in compliance with the requirements of 40 CFR 710.52(c)(1), (2), and (3); Part III of this form has been completed in compliance with the requirements of 40 CFR 710.52(c)(4); and any confidentiality claims are true and correct as to that information for which they have been asserted.

Signature		Date signed	
Name (printed)	Bob Brown	Official Title	General Manager

PART I. SITE IDENTIFICATION INFORMATION

SECTION A. COMPANY INFORMATION*

1.A.1	Company Name	KIK Custom Products
1.A.2	Company Dun & Bradstreet Number	249112814

SECTION B. SITE INFORMATION*

1.B.1	Site Name	KIK SoCal			
1.B.2	Site Dun & Bradstreet Number	051482784	EPA Facility Identification Number		For EPA Use Only Leave Blank
1.B.3	Street Address (Line 1)	9028 Dice Road			
1.B.4	Street Address (Line 2)				
1.B.5	City	Santa Fe Springs	1.B.6	County / Parish	Los Angeles
1.B.7	State	CA	1.B.8	Zip code	90670

SECTION C. TECHNICAL CONTACT INFORMATION*

1.C.1	Name	Bob Brown	1.C.2	Telephone	(562) 946-6427
1.C.3	Email Address	bbrown@kikcorp com			
1.C.4	Mailing Address (Line 1)	9028 Dice Road			
1.C.5	Mailing Address (Line 2)				

1.C.6	City	Santa Fe Springs	1.C.7	State	CA	1.C.8	Zip Code	90670

* Confidentiality claims for information in Part I, Sections A, B, and C, are made, as necessary, for each chemical substance on subsequent pages

EPA Form Number <7740-8> (Rev 06/07/06) - Previous editions are obsolete
Form Approved OMB Number 2070-0162 (expiration May 2009)

Page ___ of ___
FOR EPA USE ONLY

PART II. MANUFACTURING INFORMATION

SECTION A. CHEMICAL IDENTIFICATION					CBI[1]	
2.A.1	Chemical Identifying Number	7681-52-9	2.A.2	ID Code		C
2.A.3	Chemical Name	Sodium Hypochlorite				

SECTION B. MANUFACTURING INFORMATION										
			CBI			a Physical Form		b Percent of Production Volume in Each Physical Form	
2.B.1	Company Information								
2.B.2	Site Information[1]								
2.B.3	Technical Contact Information					Check All That Apply	CBI	Percent	CBI
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder				
2.B.5	Activity (Check all that apply)	[X] Manufacture [ ] Import	X	2.B.11	Pellets or Large Crystals				
2.B.6	Manufactured Production Volume (LB)	19,100,936	X	2.B.12	Water or Solvent Wet Solid				
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid				
2.B.8	Number of Workers (code)	W4	X	2.B.14	Gas or Vapor				
2.B.9	Maximum Concentration (code)	M2	X	2.B.15	Liquid	X	X	100	X

PART III. PROCESSING AND USE INFORMATION

Complete Part III, Sections A and B if the sum of the production volumes noted in Blocks 2 B 6 and 2 B 7 is 300,000 pounds or more

SECTION A. INDUSTRIAL PROCESSING AND USE DATA							N/A		X			
	a Type of Process or Use		b (5-digit) NAICS Code		c Industrial Function Category		d Percent Production Volume		e Number of Sites		f Number of Workers	
	Code	CBI	Code	CBI	Code	CBI	Percent	CBI	Code	CBI	Code	CBI
3.A.1												
3.A.2												
3.A.3												
3.A.4												
3.A.5												
3.A.6												
3.A.7												
3.A.8												
3.A.9												
3.A.10												

SECTION B. COMMERCIAL AND CONSUMER USE DATA							N/A	X
	a Commercial and Consumer Product Category		b Used in Products Intended for Children		c Percent Production Volume associated with each category		d Maximum Concentration associated with each category	
	Code	CBI	Y/N/NRO	CBI	Percent	CBI	Code	CBI
3.B.1								
3.B.2								
3.B.3								
3.B.4								
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								
3.B.10								

[1]Substantiation required for CBI claims on chemical identity and site information

Concerning EPA Disclosure Information

If you submit information to EPA and claim any of it as confidential, EPA will publicly disclose that information only as allowed by the procedures set forth in 40 CFR Part 2. If no such claim accompanies the information when it is received, EPA may make that information public without further notice to you.

Confidentiality Statements

Information reported to EPA on the above form may be claimed as confidential by checking the appropriate CBI boxes. The person signing the certification statement attests to the truth of the following four statements concerning all information claimed as confidential:

1. My company has taken measures to protect the confidentiality of the information and intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtainable by other persons without our consent (other than through discovery based on a showing of special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to our competitive position.

Paperwork Reduction Act Notice

The annual public burden for this collection of information, which is approved under OMB Control Number 2070-0162, is estimated to be approximately 265 hours per response for manufacturers of inorganic chemical substances and 560 hours per response for manufacturers of organic chemical substances. According to the Paperwork Reduction Act, "burden" means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. For this collection it includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information; processing and maintaining information; and disclosing or providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources, complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number. The OMB control number for this collection appears above. In addition, the OMB control numbers for EPA's regulations, after initial display in the final rule, are listed in 40 CFR part 9.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden (including the use of automated collection techniques) to: Director, Collection Strategies Division, U.S. Environmental Protection Agency (Mail Code 2822), 1200 Pennsylvania Ave, N W., Washington, D.C. 20460. Include the OMB control number in any correspondence, but do not submit the completed form to this address. The requested information should be submitted in accordance with the instructions accompanying the form, or as specified in the corresponding regulation.

Submitting Form U

Submissions sent via the U S. Postal Service·

IUR Submissions Coordinator (7407M)
U. S Environmental Protection Agency
Office of Pollution Prevention and Toxics
Ariel Rios Building
1200 Pennsylvania Avenue, N.W.
Washington, DC 20460

Submissions sent by Courier or Hand Delivery

IUR Submissions Coordinator
U S. EPA - OPPT
EPA East Building
Room 6428
1201 Constitution Ave , N.W.
Washington, DC

DID NOT Receive

KIK INTERNATIONAL SOCAL,INC

9028 Dice Rd. Santa Fe Springs, CA 90670

BUISINESS PLAN REVISIONS

TITLE	DATE REVISION	BY
HAZMTL INVENTORY	10/24/01	Derrell
BUSINESS OWNER/OPERATOR IDENDIFICATION	5/15/02	Derrell
Emergency Response Section:		
Consolidated Contingency Plan Cover Page	5/15/02	Derrell
Plot Plan For Tank Farm	5/15/02	Derrell
Tank Farm Legend	5/15/02	Derrell
Key Personnel Phone List	5/15/02	Derrell
HazMtl Training:		
Background Information Emergency Response Plan	5/15/02	Derrell
Company Organizational Chart	5/15/02	Derrell
Key Personnel Phone List	5/15/02	Derrell
Emergency Response Plan:		
Key Personnel Phone List	5/15/02	Derrell

Unified Program Consolidated Form

CONSOLIDATED CONTINGENCY PLAN
COVER PAGE

FACILITY IDENTIFICATION

BUSINESS NAME (Facility Name or DBA) KIK International SoCal

ADDRESS 9028 Dice Road, Santa Fe Springs, CA 90670

EMERGENCY RESPONSE PLANS AND PROCEDURES

A. Your business is required by State Law to provide an immediate verbal report of any release or threatened release of a hazardous material to local fire emergency response personnel, this Administering Agency and the Office of Emergency Services. If you have a release or threatened release of hazardous materials, immediately call:

FIRE/PARAMEDICS/POLICE
PHONE: 911

INDIVIDUAL RESPONSIBLE FOR CALLING 911
Plant Supervisor &/or Bob Brown

AFTER the local emergency response personnel are notified, you shall then notify this Administering Agency and the Office of Emergency Services.

Santa Fe Springs Fire Department: (562) 944-9713
State Office of Emergency Service: (800) 852-7550 or (916) 262-1621

INDIVIDUAL RESPONSIBLE FOR CALLING THIS ADMINISTERING AGENCY AND THE STATE OFFICE OF EMERGENCY SERVICES. Plant Supervisor &/or Bob Brown

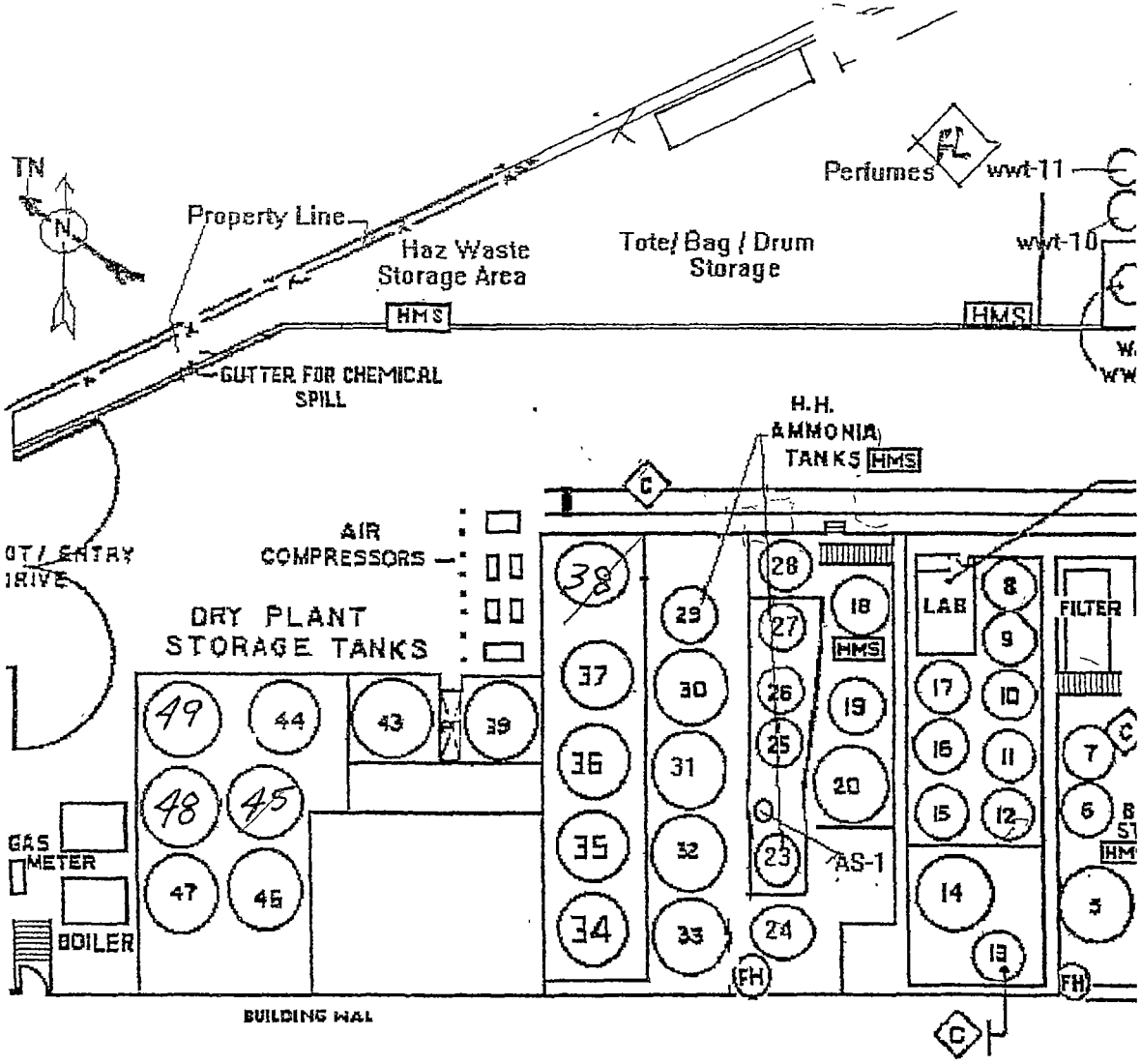
List the local emergency medical facility that will be used by your business in the event of an accident or injury caused by a release or threatened release of hazardous material

HOSPITAL/CLINIC: Presbyterian Hospital		PHONE NO: 562/698-0811
ADDRESS: 12401 Washington Blvd., Whittier	STATE: CA	ZIP CODE: 90602

C. DOES YOUR BUSINESS HAVE A PRIVATE ON-SITE EMERGENCY RESPONSE TEAM? ☒ Yes ☐ No

If yes, describe what policies and procedures your business will follow to notify your on-site emergency response team in the event of a release or threatened release of hazardous materials.

In House Response Team. Have 23 personnel trained at or above Technician level in Incident Command System.



PLOT PLAN (TANK FARM)

SCALE : 30'-0'

6/08/00 PROPOSED LAYOUT/dj

FIRE DEPT. ACCESS SYMSOL

MSDS MATL. SAFETY DATA SHEET

SAFETY SYMBOLS

- FH FIRE HOSE
- F FIRE EXTINGUISHER
- C PROTECTIVE CLOTHIN
- M PROTECTIVE MASK
- FIRST AID

TANK FARM LEGEND Rev5/14/02dj

LEGEND
Blue = Health
Red = Flammability
Yellow = Reactivity

At KIK So CAl, all product is stored in tanks that are located in the Tank Farm area on the site map. The Tank Farm is located on the north side of the building. On the following legend, the tank numbers, correspond to the attached map.

Number	Capacity	Substance Ident.	Blue	Red	Yellow	Health Hazards
Scrubber	545 ga.	18% Caustic Soda	3	0	2	Eyes / Skin & Resp. Tract
ES-1	23,000 ga.	18% Caustic Soda	3	0	2	Eyes / Skin
ES-2	1,200 ga	18% Caustic Soda	3	0	2	Eyes / Skin
1	24,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
2	24,000 ga	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
3	23,000 ga.	Sodium Hypochlorite	3	0	2	Eyes/Skin & Resp. Tract
4	23,000 ga.	Soft Water Storage	0	0	0	
5	24,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
6	9,000 ga.	50% Caustic Soda	3	0	2	Eyes / Skin
7	9,000 ga.	50% Caustic Soda	3	0	2	Eyes/ Skin
WW	500 ga.	50%Hydrogen Perox	2	0	2	Eyes / Skin & Resp. Tract
WW-3	9,500 ga.	Waste Water	2	0	2	Eyes / Skin
8	6,000 ga.	Soft Water	0	0	0	Eyes
9	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
10	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
11	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
12	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
13	10,000 ga.	50% Hydrogen Perox	2	0	2	Eyes / Skin & Resp. Tract
14	12,000 ga.	5%Peroxide Blending	2	0	2	Eyes / Skin & Resp. Tract
15	10,000 ga.	NP-9 Surfactant	1	1	0	Eyes / Skin & Resp. Tract
16	12,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
17	12,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
18	10,000 ga.	Fabric Softner Base	1	3	2	Eyes / Skin & Resp. Tract
19	5,500 ga	Rinse Mix Tank	1	0	2	Eyes / Skin & Resp. Tract
20	13,500 ga.	Fabric Softner	0	0	0	Eyes / Skin & Resp. Tract
23	2,300 ga.	Lemon Ammonia	2	1	0	Eyes / Skin & Resp. Tract
AS-1	300 ga.	Ammonia Scrubber	2	1	0	Eyes / Skin & Resp. Tract
24	12,000 ga.	Sudsy Ammonia	2	1	0	Eyes/Skin& Resp. Trac
25	6,000 ga.	Lemon Ammonia	2	1	0	Eyes / Skin & Resp. Tract
26	6,000 ga.	Pure Ammonia	2	1	0	Eyes / Skin & Resp. Tract
27	6,000 ga.	29% Ammonia	2	1	0	Eyes / Skin & Resp. Tract
28	3,000 ga.	Bio Soft	0	0	0	
29	8,700 ga.	Dilute Ammonia	2	1	0	Eyes / Skin & Resp. Tract
30	12,000 ga.	Windshield Wash	1	0	0	Eyes / Skin
31	9,500 ga.	Windshield Wash	0	0	0	Eyes
32	12,000 ga.	Blend Tank	0	0	0	Empty
33	9,400 ga.	Sudsy Ammonia	2	1	0	Eyes/Skin & Resp Trac
34	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
35	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
36	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
37	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
38		VACANT	0	0	0	

Number	Capacity	Substance Ident	Blue	Red	Yellow	Health Hazards		
39	113,300 lb	HDPE Polyethylene	0	1	0			
43	88,500 lb	Polyethylene	0	1	0			
44	12,000 SS	Blending Tank	1	0	0	Eyes		
45		VACANT	1	0	0	Eyes		
46	10,000	Steel Storage Tank	1	0	0	Eyes		
47	12,000	Steel Storage Tank	1	0	0	Eyes		
48	11,000	Steel Storage Tank	1	0	0	Eyes		
49	5,000	Steel Blending Tank	1	0	0	Eyes		
		WATER TREATMENT PLANT						
WWT-1	24,000 ga.	Processed Water Storage	0	0	0	Eyes		
WWT-2	16,000 ga.	Processed Water Storage	0	0	0	Eyes		
WWT-4	6,200 ga	Waste Water Influent Tank	1	0	1	Eyes / Skin		
WWT-5	2,300ga.	Mixing Tank	2	0	0	Eyes / Skin		
WWT-6	3,200ga.	50% Alum Tank	1	0	0	Eyes / Skin		
WWT-7	1,580ga.	Floc Tank	1	0	0	Eyes / Skin		
WWT-8	2,400ga.	Thickner Tank	1	0	0	Eyes / Skin		
WWT-9	500ga.	Filter Tank	0	0	0	Eyes		
WWT-10	6,200ga.	Processed Water Storage	0	0	0	Eyes		
WWT-11	6,000ga.	Processed Water Storage	0	0	0	Eyes		

KIK INTERNATIONAL SOCAL

PHONE LIST OF OTHER'S TO NOTIFY IN CASE OF AN EMERGENCY

Plant Personnel		Home Number	Car/Pager Number
Logistics Manager (Day)	Dave Going	FOIA ex 6, Personal Privacy	
Plant Supv. (Swing)	Manuel Herrera	FOIA ex 6, Personal Privacy	310/875-2376
Plant Supv. (Grave)	Ray Wetter	FOIA ex 6, Personal Privacy	310/875-0633
Plant Safety/Env. Supv.	Derrell Johnson	FOIA ex 6, Personal Privacy	
Maintenance Supv.	Jim Rissman	FOIA ex 6, Personal Privacy	310/702-7333
Warehouse Supv.	Richard Lehman	FOIA ex 6,	
Human Resources Mgr.	Priscilla Prentiss	FOIA ex 6, Personal Privacy	
Day Shift Personnel:			
Procurement Manager	John Houck	FOIA ex 6,	310/702-7555
Tank Farm Senior Leadman	Charles Hemphill	FOIA ex 6, Personal Privacy	310/875-2375
Fill Line Foreman	Walter Avalos		310/875-0637
Maintenance	Bill Lamey	FOIA ex 6,	310/875-0632
Waste Water Treatment	Bobby Brown	FOIA ex 6, Personal Privacy	
Swing Shift Personnel:			
Maintenance	Manuel Ortiz	FOIA ex 6, Personal Privacy	310/875-1937
Fill Line Leadman	Raul Alvarez		310/875-0639
Graveyard Shift Personnel:			
Fill Line Leadman	Roberto Rodriguez	FOIA ex 6, Personal Privacy	
KIK Management			
Dir. of Manufacturing	Greg Wiese	FOIA ex 6,	FOIA ex 6, Personal Privacy
Controller	Bill Tidmore	FOIA ex 6, Personal Privacy	310/702-1120
General Manager	Bob Brown	FOIA ex 6,	310/612-2001

UNIFIED PROGRAM CONSOLIDATED FORM

BUSINESS OWNER/OPERATOR IDENTIFICATION

☐ NEW BUSINESS ☐ OUT OF BUSINESS ☒ REVISE/UPDATE (EFFECTIVE 5/15/02) PAGE 1 OF 20

I. IDENTIFICATION

FACILITY ID# 1 9 - 0 4 9	BEGINNING DATE 100: 2002	ENDING DATE 101:	
BUSINESS NAME 3: KIK International SoCal		BUSINESS PHONE 102: 562/946-6427	
BUSINESS SITE ADDRESS 103: 9028 Dice Road			
CITY 104: Santa Fe Springs	CA	ZIP CODE 105: 90670	
DUN & BRADSTREET 106: 051482784		SIC CODE (4 digit #) 107: 2841	
COUNTY 108: LOS ANGELES		UNINCORPORATED ☐ Yes ☒ No 133a.	
BUSINESS OPERATOR NAME 109: Greg Wiese		BUSINESS OPERATOR PHONE 110: x 216	

II. BUSINESS OWNER

OWNER NAME 111: KIK International	OWNER PHONE 112: 905/660-0444	
OWNER MAILING ADDRESS 113: 33 Macintosh Blvd.		
CITY 114: Concord	STATE 115: Ontario	ZIP CODE 116: L4K 4L5

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117:	CONTACT PHONE 118:	
CONTACT MAILING ADDRESS 119:		
CITY 120:	STATE 121:	ZIP CODE 122:

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: Bob Brown	NAME 128: Jim Rissman
TITLE 124: General Manager	TITLE 129: Plant Maintenance Supervisor
BUSINESS PHONE 125: 562/906-2244	BUSINESS PHONE 130: 562/906-2218
24-HOUR PHONE 126: 310/612-2001	24-HOUR PHONE 131: 310/702-7333
PAGER # 127: 310/875-0638	PAGER # 132: 310/875-0640

V. ADDITIONAL LOCALLY COLLECTED INFORMATION

DESCRIPTION OF BUSINESS 133b:

MAILING/ BILLING INFORMATION

ADDRESS 133d: 9028 Dice Rd.	CITY 133e: Santa Fe Springs	STATE 133f: CA	ZIP CODE 133g: 90670

Certification Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE: Greg O'Wiese	DATE 134: 5/16/02	NAME OF DOCUMENT PREPARER 135: Derrell Johnson
NAME OF SIGNER (print) 136: Greg Wiese	TITLE OF SIGNER 137: Dir. of Mfg. Western Region	

OFFICIAL USE ONLY	UP Form	HW	HM	ARP	AST	UST	TP	CUPA	PA
INSPECTOR	DISTRICT	DATE OF INSP	DIVISION	BATTALION	STATION				

APPENDIX A - Emergency Response Plan

A.1 Background information

KIK International So Cal processes and repackages chlorine and sodium hydroxide in to bleach along with repackaging aqua ammonia and is located in Santa Fe Springs, CA.

This repackager buys chlorine in 90 ton railroad tank cars, sodium hydroxide in 4000 gal.tanker trucks and aqua ammonia in 4500 gal. tanker trucks and repackages the materials into half gallon and one gallon containers of household product. Relevant facts pertaining to the KIK So Cal facility are as follows:

a. Staffing (Organization Chart Attached)

1. General Manager
2. Four Managers
3. Four Supervisors
4. Six Foreman/ Leadman
5. Sixty One Payroll employees;

b. Operations

1. Repackages household products during three eight hour shifts: Sunday - Friday (11:30am - 11:30pm)
2. Has eight combination safety shower and eyewash stations.
3. Has five eyewash stations.
4. Has first aid cabinets located throughout the plant.
5. Has Ten employees certified to provide CPR/first aid (at least two on each shift).
6. When not operating, the facility is protected by an industrial type chain link fence with gates closed and security guard on property.
7. Has back-up electrical supply for Safety items plus process area.
8. Is located in an industrial/commercial zone with several neighbors of which two are chemical company's located on the east, north and west of the facility. One industrial park located west across street with one resident across street to the south.
9. Has ten(10)self-contained breathing apparatus with four (4) replacement bottles at designated areas per attached map.
10. Has twenty two (22)employees certified in hazard response at the technician level and above in incident command system.
11. Have eighteen two channel two way radios.
12. Have four Level " A " emergency response suits.
13. The following emergency/protective equipment is available:
    a. Two Emergency " C " Kits
    b Miscellaneous equipment (inventory attached)

KIK INTERNATIONAL SOCAL

PHONE LIST OF OTHER'S TO NOTIFY IN CASE OF AN EMERGENCY

Plant Personnel		Home Number	Car/Pager Number
Logistics Manager (Day)	Dave Going	FOIA ex 6,	
Plant Supv. (Swing)	Manuel Herrera	FOIA ex 6,	310/875-2376
Plant Supv. (Grave)	Ray Wetter	FOIA ex 6,	310/875-0633
Plant Safety/Env. Supv.	Derrell Johnson	FOIA ex 6,	
Maintenance Supv.	Jim Rissman	FOIA ex 6,	310/702-7333
Warehouse Supv.	Richard Lehman	FOIA ex 6,	
Human Resources Mgr.	Priscilla Prentiss	FOIA ex 6,	
Day Shift Personnel:			
Procurement Manager	John Houck	FOIA ex 6,	310/702-7555
Tank Farm Senior Leadman	Charles Hemphill	FOIA ex 6,	310/875-2375
Fill Line Foreman	Walter Avalos		310/875-0637
Maintenance	Bill Lamey	FOIA ex 6,	310/875-0632
Waste Water Treatment	Bobby Brown	FOIA ex 6,	
Swing Shift Personnel:			
Maintenance	Manuel Ortiz	FOIA ex 6,	310/875-1937
Fill Line Leadman	Raul Alvarez		310/875-0639
Graveyard Shift Personnel:			
Fill Line Leadman	Roberto Rodriguez	FOIA ex 6, Personal Privacy	
KIK Management			
Dir. of Manufacturing	Greg Wiese	FOIA ex 6, Personal Privacy	FOIA ex 6, Personal Privacy
Controller	Bill Tidmore	FOIA ex 6,	310/702-1120
General Manager	Bob Brown	FOIA ex 6,	310/612-2001

KIK INTERNATIONAL SOCAL

PHONE LIST OF OTHER'S TO NOTIFY IN CASE OF AN EMERGENCY

Plant Personnel		Home Number	Car/Pager Number
Logistics Manager (Day)	Dave Going	FOIA ex 6, Personal Privacy	
Plant Supv. (Swing)	Manuel Herrera	FOIA ex 6, Personal Privacy	310/875-2376
Plant Supv. (Grave)	Ray Wetter	FOIA ex 6, Personal Privacy	310/875-0633
Plant Safety/Env. Supv.	Derrell Johnson	FOIA ex 6, Personal Privacy	
Maintenance Supv.	Jim Rissman	FOIA ex 6, Personal Privacy	310/702-7333
Warehouse Supv.	Richard Lehman	FOIA ex 6, Personal Privacy	
Human Resources Mgr.	Priscilla Prentiss	FOIA ex 6, Personal Privacy	
Day Shift Personnel:			
Procurement Manager	John Houck	FOIA ex 6, Personal Privacy	310/702-7555
Tank Farm Senior Leadman	Charles Hemphill	FOIA ex 6, Personal Privacy	310/875-2375
Fill Line Foreman	Walter Avalos		310/875-0637
Maintenance	Bill Lamey	FOIA ex 6, Personal Privacy	310/875-0632
Waste Water Treatment	Bobby Brown	FOIA ex 6, Personal Privacy	
Swing Shift Personnel:			
Maintenance	Manuel Ortiz	FOIA ex 6, Personal Privacy	310/875-1937
Fill Line Leadman	Raul Alvarez		310/875-0639
Graveyard Shift Personnel:			
Fill Line Leadman	Roberto Rodriguez	FOIA ex 6, Personal Privacy	
KIK Management			
Dir. of Manufacturing	Greg Wiese	FOIA ex 6, Personal Privacy	FOIA ex 6, Personal Privacy
Controller	Bill Tidmore	FOIA ex 6, Personal Privacy	310/702-1120
General Manager	Bob Brown	FOIA ex 6, Personal Privacy	310/612-2001

KIK INTERNATIONAL SOCAL

PAGERS AND CELL PHONES

GROUP	NAME	PAGER #	CELL PHONE #
*	**Bill Lamey**	310/875-0632	
	Bill Tidmore		FOIA ex 6, Personal Privacy
*	**Bob Brown**	310/875-0638	FOIA ex 6, Personal Privacy
*	**Charles Hemphill**	310/875-2375	
	Craig McCauslan		FOIA ex 6, Personal Privacy
	Emil Aldea	310/875-0634	
*	**Frank Calvo**	310/875-0414	
	Greg Wiese		FOIA ex 6, Personal Privacy
*	**Jaime Blas**	310/875-0636	
*	**Jim Rissman**	310/875-0640	FOIA ex 6, Personal Privacy
	John Houck		FOIA ex 6, Personal Privacy
	Juan Villalta	310/875-4642	
	Manuel Herrera	310/875-2376	
*	**Manuel Ortiz**	310/875-1937	
	Nita Labrador		FOIA ex 6, Personal Privacy
	Raul Alvarez	310/875-0639	
*	**Ray Wetter**	310/875-0633	
	Richard Lehman		FOIA ex 6, Personal Privacy
	Walter Avalos	310/875-0637	

* Group Page for Emergency Response Personnel 310/875-3695

When Paging;

1. Dial pager number & wait for beep
2. Dial your number (area code first)
3. Press the pound sign (#) until you hear beep & hang up

KIK INTERNATIONAL SOCAL,INC

9028 Dice Rd. Santa Fe Springs, CA 90670

BUISINESS PLAN REVISIONS

TITLE	DATE REVISION	BY
HAZMTL INVENTORY	10/24/01	Derrell
BUSINESS OWNER/OPERATOR IDENDIFICATION	5/15/02	Derrell
Emergency Response Section:		
Consolidated Contingency Plan Cover Page	5/15/02	Derrell
Plot Plan For Tank Farm	5/15/02	Derrell
Tank Farm Legend	5/15/02	Derrell
Key Personnel Phone List	5/15/02	Derrell
HazMtl Training:		
Background Information Emergency Response Plan	5/15/02	Derrell
Company Organizational Chart	5/15/02	Derrell
Key Personnel Phone List	5/15/02	Derrell
Emergency Response Plan:		
Key Personnel Phone List	5/15/02	Derrell

UNIFIED PROGRAM CONSOLIDATED FORM

BUSINESS OWNER/OPERATOR IDENTIFICATION

☐ NEW BUSINESS ☐ OUT OF BUSINESS ☒ REVISE/UPDATE (EFFECTIVE 5/15/02) PAGE 1 OF 20

I. IDENTIFICATION

FACILITY ID# 1 9 0 4 9	BEGINNING DATE 100: 2002	ENDING DATE 101:	
BUSINESS NAME 3: KIK International SoCal	BUSINESS PHONE 102: 562/946-6427		
BUSINESS SITE ADDRESS 103: 9028 Dice Road			
CITY 104: Santa Fe Springs	CA	ZIP CODE 105: 90670	
DUN & BRADSTREET 106: 051482784	SIC CODE (4 digit #) 107: 2841		
COUNTY 108: LOS ANGELES	UNINCORPORATED ☐ Yes ☒ No 133a		
BUSINESS OPERATOR NAME 109: Greg Wiese	BUSINESS OPERATOR PHONE 110: x 216		

II. BUSINESS OWNER

OWNER NAME 111: KIK International	OWNER PHONE 112: 905/660-0444	
OWNER MAILING ADDRESS 113: 33 Macintosh Blvd.		
CITY 114: Concord	STATE 115: Ontario	ZIP CODE 116: L4K 4L5

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117:	CONTACT PHONE 118:	
CONTACT MAILING ADDRESS 119:		
CITY 120:	STATE 121:	ZIP CODE 122:

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: Bob Brown	NAME 128: Jim Rissman
TITLE 124: General Manager	TITLE 129: Plant Maintenance Supervisor
BUSINESS PHONE 125: 562/906-2244	BUSINESS PHONE 130: 562/906-2218
24-HOUR PHONE 126: 310/612-2001	24-HOUR PHONE 131: 310/702-7333
PAGER # 127: 310/875-0638	PAGER # 132: 310/875-0640

V. ADDITIONAL LOCALLY COLLECTED INFORMATION

DESCRIPTION OF BUSINESS 133b:

MAILING/ BILLING INFORMATION

ADDRESS 133d: 9028 Dice Rd.	CITY 133e: Santa Fe Springs	STATE 133f: CA	ZIP CODE 133g: 90670

Certification Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134	NAME OF DOCUMENT PREPARER 135
Greg Wiese	5/16/02	Derrell Johnson
NAME OF SIGNER (print) 136: Greg Wiese	TITLE OF SIGNER 137: Dir. of Mfg. Western Region	

OFFICIAL USE ONLY	UP Form	HW	HM	ARP	AST	UST	TP	CUPA	PA
INSPECTOR	DISTRICT	DATE OF INSP	DIVISION	BATTALION	STATION				

Unified Program Consolidated Form

CONSOLIDATED CONTINGENCY PLAN
COVER PAGE

FACILITY IDENTIFICATION

BUSINESS NAME (Facility Name or DBA) KIK International SoCal

ADDRESS 9028 Dice Road, Santa Fe Springs, CA 90670

EMERGENCY RESPONSE PLANS AND PROCEDURES

A. Your business is required by State Law to provide an immediate verbal report of any release or threatened release of a hazardous material to local fire emergency response personnel, this Administering Agency and the Office of Emergency Services. If you have a release or threatened release of hazardous materials, immediately call:

FIRE/PARAMEDICS/POLICE
PHONE: 911

INDIVIDUAL RESPONSIBLE FOR CALLING 911
Plant Supervisor &/or Bob Brown

AFTER the local emergency response personnel are notified, you shall then notify this Administering Agency and the Office of Emergency Services.

Santa Fe Springs Fire Department: (562) 944-9713
State Office of Emergency Service: (800) 852-7550 or (916) 262-1621

INDIVIDUAL RESPONSIBLE FOR CALLING THIS ADMINISTERING AGENCY AND THE STATE OFFICE OF EMERGENCY SERVICES. Plant Supervisor &/or Bob Brown

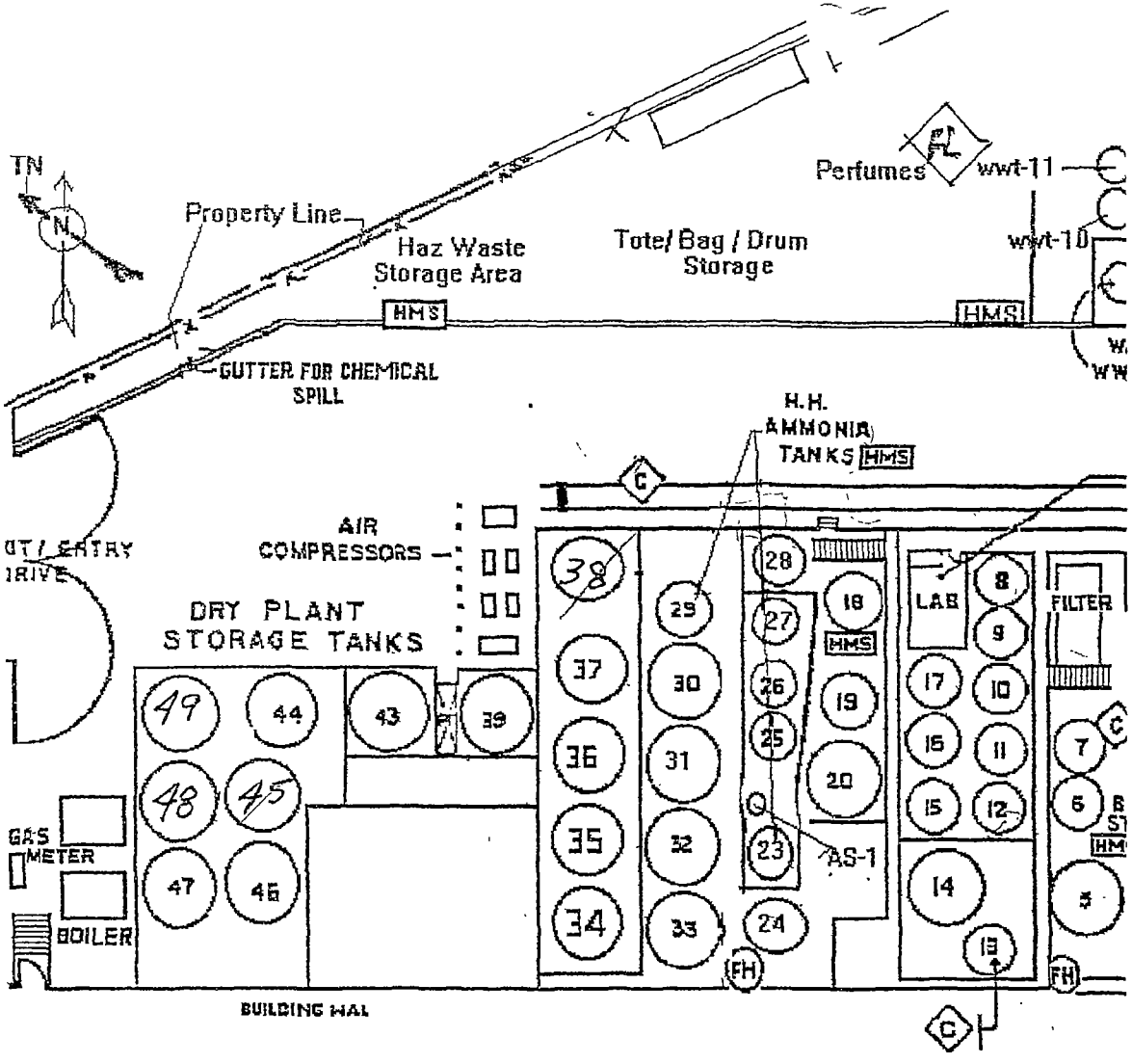
List the local emergency medical facility that will be used by your business in the event of an accident or injury caused by a release or threatened release of hazardous material

HOSPITAL/CLINIC: Presbyterian Hospital		PHONE NO: 562/698-0811
ADDRESS: 12401 Washington Blvd., Whittier	STATE: CA	ZIP CODE: 90602

C. DOES YOUR BUSINESS HAVE A PRIVATE ON-SITE EMERGENCY RESPONSE TEAM? ☒ Yes ☐ No

If yes, describe what policies and procedures your business will follow to notify your on-site emergency response team in the event of a release or threatened release of hazardous materials.

In House Response Team. Have 23 personnel trained at or above Technician level in Incident Command System.



PLOT PLAN (TANK FARM)

SCALE : 30'-0'

6/08/00 PROPOSED LAYOUT/dj

FIRE DEPT. ACCESS SYMSOL

MSDS MATL. SAFETY DATA SHEET

SAFETY SYMBOLS

- (FH) FIRE HOSE
- (F) FIRE EXTINGUISHER
- (C) PROTECTIVE CLOTHIN
- (M) PROTECTIVE MASK
- FIRST AID

TANK FARM LEGEND

Rev5/14/02dj

LEGEND

Blue = Health
Red = Flammability
Yellow = Reactivity

At KIK So CAI, all product is stored in tanks that are located in the Tank Farm area on the site map. The Tank Farm is located on the north side of the building. On the following legend, the tank numbers, correspond to the attached map.

Number	Capacity	Substance Ident.	Blue	Red	Yellow	Health Hazards
Scrubber	545 ga.	18% Caustic Soda	3	0	2	Eyes / Skin & Resp. Tract
ES-1	23,000 ga.	18% Caustic Soda	3	0	2	Eyes / Skin
ES-2	1,200 ga	18% Caustic Soda	3	0	2	Eyes / Skin
1	24,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
2	24,000 ga	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
3	23,000 ga,	Sodium Hypochlorite	3	0	2	Eyes/Skin & Resp. Tract
4	23,000 ga.	Soft Water Storage	0	0	0	
5	24,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
6	9,000 ga.	50% Caustic Soda	3	0	2	Eyes / Skin
7	9,000 ga.	50% Caustic Soda	3	0	2	Eyes/ Skin
WW	500 ga.	50%Hydrogen Perox	2	0	2	Eyes / Skin & Resp. Tract
WW-3	9,500 ga.	Waste Water	2	0	2	Eyes / Skin
8	6,000 ga.	Soft Water	0	0	0	Eyes
9	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
10	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
11	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
12	6,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
13	10,000 ga.	50% Hydrogen Perox	2	0	2	Eyes / Skin & Resp. Tract
14	12,000 ga.	5%Peroxide Blendng	2	0	2	Eyes / Skin & Resp. Tract
15	10,000 ga.	NP-9 Surfactant	1	1	0	Eyes / Skin & Resp. Tract
16	12,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
17	12,000 ga.	Sodium Hypochlorite	3	0	2	Eyes / Skin & Resp. Tract
18	10,000 ga.	Fabric Softner Base	1	3	2	Eyes / Skin & Resp. Tract
19	5,500 ga	Rinse Mix Tank	1	0	2	Eyes / Skin & Resp. Tract
20	13,500 ga.	Fabric Softner	0	0	0	Eyes / Skin & Resp. Tract
23	2,300 ga.	Lemon Ammonia	2	1	0	Eyes / Skin & Resp. Tract
AS-1	300 ga.	Ammonia Scrubber	2	1	0	Eyes / Skin & Resp. Tract
24	12,000 ga.	Sudsy Ammonia	2	1	0	Eyes/Skin& Resp. Trac
25	6,000 ga.	Lemon Ammonia	2	1	0	Eyes / Skin & Resp. Tract
26	6,000 ga.	Pure Ammonia	2	1	0	Eyes / Skin & Resp. Tract
27	6,000 ga.	29% Ammonia	2	1	0	Eyes / Skin & Resp. Tract
28	3,000 ga.	Bio Soft	0	0	0	
29	8,700 ga	Dilute Ammonia	2	1	0	Eyes / Skin & Resp. Tract
30	12,000 ga.	Windshield Wash	1	0	0	Eyes / Skin
31	9,500 ga	Windshield Wash	0	0	0	Eyes
32	12,000 ga	Blend Tank	0	0	0	Empty
33	9,400 ga.	Sudsy Ammonia	2	1	0	Eyes/Skin & Resp.Trac
34	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
35	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
36	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
37	11/12,000	Waste Water Storage	1	0	1	Eyes / Skin
38		VACANT	0	0	0	

Number	Capacity	Substance Ident	Blue	Red	Yellow	Health Hazards
39	113,300 lb	HDPE Polyethylene	0	1	0	
43	88,500 lb	Polyethylene	0	1	0	
44	12,000 SS	Blending Tank	1	0	0	Eyes
45		VACANT	1	0	0	Eyes
46	10,000	Steel Storage Tank	1	0	0	Eyes
47	12,000	Steel Storage Tank	1	0	0	Eyes
48	11,000	Steel Storage Tank	1	0	0	Eyes
49	5,000	Steel Blending Tank	1	0	0	Eyes
		WATER TREATMENT PLANT				
WWT-1	24,000 ga.	Processed Water Storage	0	0	0	Eyes
WWT-2	16,000 ga.	Processed Water Storage	0	0	0	Eyes
WWT-4	6,200 ga	Waste Water Influent Tank	1	0	1	Eyes / Skin
WWT-5	2,300ga.	Mixing Tank	2	0	0	Eyes / Skin
WWT-6	3,200ga.	50% Alum Tank	1	0	0	Eyes / Skin
WWT-7	1,580ga.	Floc Tank	1	0	0	Eyes / Skin
WWT-8	2,400ga.	Thickner Tank	1	0	0	Eyes / Skin
WWT-9	500ga.	Filter Tank	0	0	0	Eyes
WWT-10	6,200ga.	Processed Water Storage	0	0	0	Eyes
WWT-11	6,000ga.	Processed Water Storage	0	0	0	Eyes

KIK INTERNATIONAL SOCAL

PHONE LIST OF OTHER'S TO NOTIFY IN CASE OF AN EMERGENCY

Plant Personnel		Home Number	Car/Pager Number
Logistics Manager (Day)	Dave Going	FOIA ex 6, Personal Privacy	
Plant Supv. (Swing)	Manuel Herrera	FOIA ex 6, Personal Privacy	310/875-2376
Plant Supv. (Grave)	Ray Wetter	FOIA ex 6, Personal Privacy	310/875-0633
Plant Safety/Env. Supv.	Derrell Johnson	FOIA ex 6, Personal Privacy	
Maintenance Supv.	Jim Rissman	FOIA ex 6, Personal Privacy	310/702-7333
Warehouse Supv.	Richard Lehman	FOIA ex 6, Personal Privacy	
Human Resources Mgr.	Priscilla Prentiss	FOIA ex 6, Personal Privacy	
Day Shift Personnel:			
Procurement Manager	John Houck	FOIA ex 6, Personal Privacy	310/702-7555
Tank Farm Senior Leadman	Charles Hemphill	FOIA ex 6, Personal Privacy	310/875-2375
Fill Line Foreman	Walter Avalos		310/875-0637
Maintenance	Bill Lamey	FOIA ex 6, Personal Privacy	310/875-0632
Waste Water Treatment	Bobby Brown	FOIA ex 6, Personal Privacy	
Swing Shift Personnel:			
Maintenance	Manuel Ortiz	FOIA ex 6, Personal Privacy	310/875-1937
Fill Line Leadman	Raul Alvarez		310/875-0639
Graveyard Shift Personnel:			
Fill Line Leadman	Roberto Rodriguez	FOIA ex 6, Personal Privacy	
KIK Management			
Dir. of Manufacturing	Greg Wiese	FOIA ex 6, Personal Privacy	FOIA ex 6, Personal Privacy
Controller	Bill Tidmore	FOIA ex 6, Personal Privacy	310/702-1120
General Manager	Bob Brown	FOIA ex 6, Personal Privacy	310/612-2001

APPENDIX A - Emergency Response Plan

A .1 Background information

KIK International So Cal processes and repackages chlorine and sodium hydroxide in to bleach along with repackaging aqua ammonia and is located in Santa Fe Springs, CA.

This repackager buys chlorine in 90 ton railroad tank cars, sodium hydroxide in 4000 gal.tanker trucks and aqua ammonia in 4500 gal. tanker trucks and repackages the materials into half gallon and one gallon containers of household product. Relevant facts pertaining to the KIK So Cal facility are as follows:

a. Staffing (Organization Chart Attached)

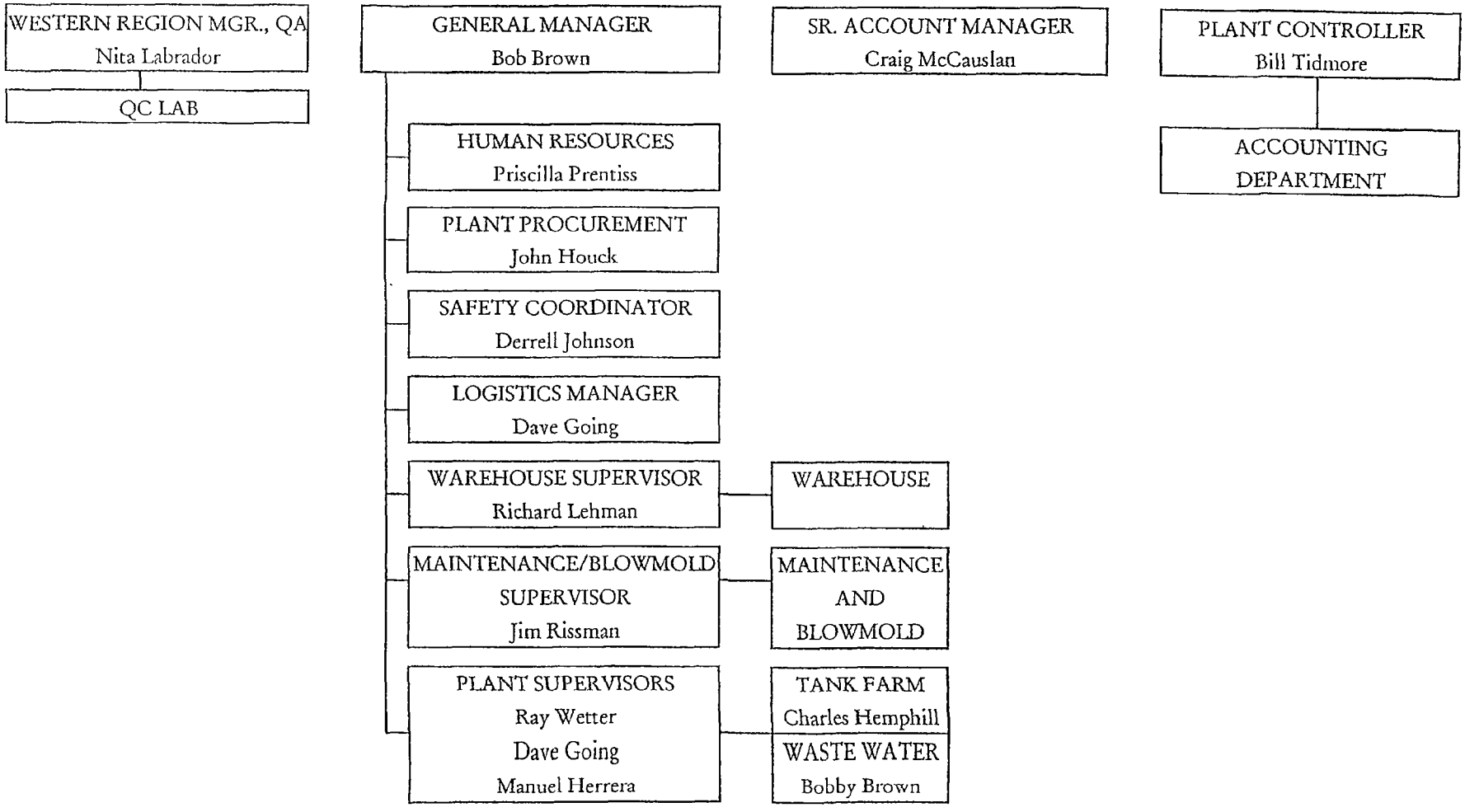
1. General Manager
2. Four Managers
3. Four Supervisors
4. Six Foreman/ Leadman
5. Sixty One Payroll employees;

b. Operations

1. Repackages household products during three eight hour shifts: Sunday - Friday (11:30am - 11:30pm)
2. Has eight combination safety shower and eyewash stations.
3. Has five eyewash stations.
4. Has first aid cabinets located throughout the plant.
5. Has Ten employees certified to provide CPR/first aid (at least two on each shift).
6. When not operating, the facility is protected by an industrial type chain link fence with gates closed and security guard on property.
7. Has back-up electrical supply for Safety items plus process area.
8. Is located in an industrial/commercial zone with several neighbors of which two are chemical company's located on the east, north and west of the facility. One industrial park located west across street with one resident across street to the south.
9. Has ten(10)self-contained breathing apparatus with four (4) replacement bottles at designated areas per attached map.
10. Has twenty two (22)employees certified in hazard response at the technician level and above in incident command system.
11. Have eighteen two channel two way radios.
12. Have four Level " A " emergency response suits.
13. The following emergency/protective equipment is available:
    a. Two Emergency " C " Kits
    b. Miscellaneous equipment (inventory attached)

KIK INTERNATIONAL SOCAL ORGANIZATIONAL CHART

9028 Dice Road, Santa Fe Springs, CA 90670



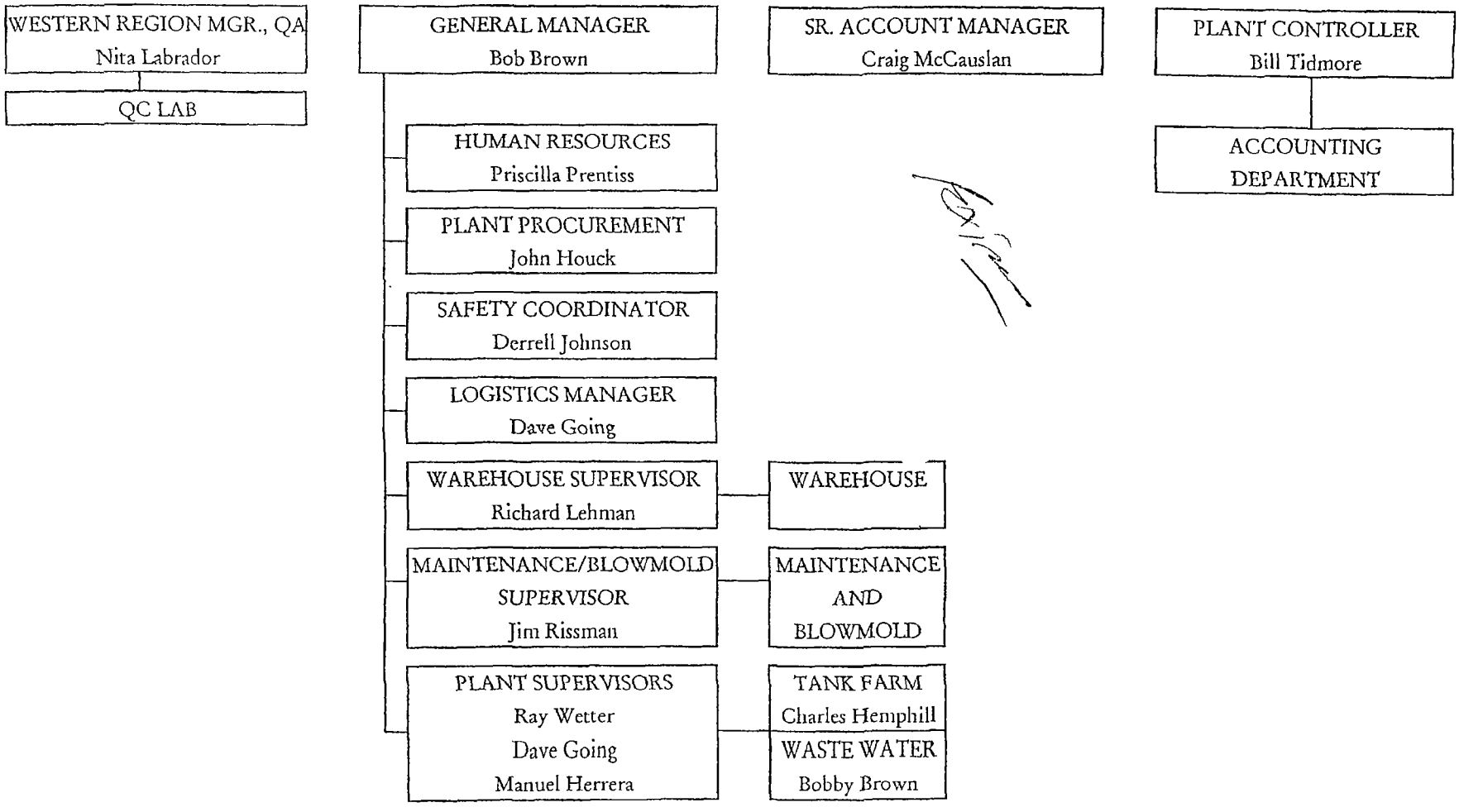
KIK INTERNATIONAL SOCAL

PHONE LIST OF OTHER'S TO NOTIFY IN CASE OF AN EMERGENCY

Plant Personnel		Home Number	Car/Pager Number
Logistics Manager (Day)	Dave Going	FOIA ex 6, Personal Privacy	
Plant Supv. (Swing)	Manuel Herrera	FOIA ex 6, Personal Privacy	310/875-2376
Plant Supv. (Grave)	Ray Wetter	FOIA ex 6, Personal Privacy	310/875-0633
Plant Safety/Env. Supv.	Derrell Johnson	FOIA ex 6, Personal Privacy	
Maintenance Supv.	Jim Rissman	FOIA ex 6, Personal Privacy	310/702-7333
Warehouse Supv.	Richard Lehman	FOIA ex 6, Personal Privacy	
Human Resources Mgr.	Priscilla Prentiss	FOIA ex 6, Personal Privacy	
Day Shift Personnel:			
Procurement Manager	John Houck	FOIA ex 6, Personal Privacy	310/702-7555
Tank Farm Senior Leadman	Charles Hemphill	FOIA ex 6, Personal Privacy	310/875-2375
Fill Line Foreman	Walter Avalos		310/875-0637
Maintenance	Bill Lamey	FOIA ex 6, Personal Privacy	310/875-0632
Waste Water Treatment	Bobby Brown	FOIA ex 6, Personal Privacy	
Swing Shift Personnel:			
Maintenance	Manuel Ortiz	FOIA ex 6, Personal Privacy	310/875-1937
Fill Line Leadman	Raul Alvarez		310/875-0639
Graveyard Shift Personnel:			
Fill Line Leadman	Roberto Rodriguez	FOIA ex 6, Personal Privacy	
KIK Management			
Dir. of Manufacturing	Greg Wiese	FOIA ex 6, Personal Privacy	FOIA ex 6, Personal Privacy
Controller	Bill Tidmore	FOIA ex 6, Personal Privacy	310/702-1120
General Manager	Bob Brown	FOIA ex 6, Personal Privacy	310/612-2001

KIK INTERNATIONAL SOCAL ORGANIZATIONAL CHART

9028 Dice Road, Santa Fe Springs, CA 90670



UNIFIED PROGRAM CONSOLIDATED FORM

BUSINESS OWNER/OPERATOR IDENTIFICATION

☐ NEW BUSINESS ☐ OUT OF BUSINESS ☒ REVISE/UPDATE (EFFECTIVE 5/15/02) PAGE 1 OF 20

I. IDENTIFICATION

FACILITY ID# 19-0049	BEGINNING DATE 100: 2002	ENDING DATE 101	
BUSINESS NAME 3: KIK International SoCal		BUSINESS PHONE 102: 562/946-6427	
BUSINESS SITE ADDRESS 103: 9028 Dice Road			
CITY 104: Santa Fe Springs	CA	ZIP CODE 105: 90670	
DUN & BRADSTREET 106: 051482784		SIC CODE (4 digit #) 107: 2841	
COUNTY 108: LOS ANGELES		UNINCORPORATED ☐ Yes ☒ No 133a	
BUSINESS OPERATOR NAME 109: Greg Wiese		BUSINESS OPERATOR PHONE 110: x 216	

II. BUSINESS OWNER

OWNER NAME 111: KIK International	OWNER PHONE 112: 905/660-0444	
OWNER MAILING ADDRESS 113: 33 Macintosh Blvd.		
CITY 114: Concord	STATE 115: Ontario	ZIP CODE 116: L4K 4L5

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117	CONTACT PHONE 118	
CONTACT MAILING ADDRESS 119		
CITY 120	STATE 121	ZIP CODE 122

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: Bob Brown	NAME 128: Jim Rissman
TITLE 124: General Manager	TITLE 129: Plant Maintenance Supervisor
BUSINESS PHONE 125: 562/906-2244	BUSINESS PHONE 130: 562/906-2218
24-HOUR PHONE 126: 310/612-2001	24-HOUR PHONE 131: 310/702-7333
PAGER # 127: 310/875-0638	PAGER # 132: 310/875-0640

V. ADDITIONAL LOCALLY COLLECTED INFORMATION

DESCRIPTION OF BUSINESS 133b

MAILING/ BILLING INFORMATION

ADDRESS 133d: 9028 Dice Rd.	CITY 133e: Santa Fe Springs	STATE 133f: CA	ZIP CODE 133g: 90670

Certification Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE: Greg Wiese	DATE 134: 5/16/02	NAME OF DOCUMENT PREPARER 135: Derrell Johnson
NAME OF SIGNER (print) 136: Greg Wiese	TITLE OF SIGNER 137: Dir. of Mfg. Western Region	

OFFICIAL USE ONLY	UP Form	HW	HM	ARP	AST	UST	TP	CUPA	PA

INSPECTOR	DISTRICT	DATE OF INSP	DIVISION	BATTALION	STATION

APPENDIX A - Emergency Response Plan

A .1 Background information

KIK International So Cal processes and repackages chlorine and sodium hydroxide in to bleach along with repackaging aqua ammonia and is located in Santa Fe Springs, CA.

This repackager buys chlorine in 90 ton railroad tank cars, sodium hydroxide in 4000 gal.tanker trucks and aqua ammonia in 4500 gal. tanker trucks and repackages the materials into half gallon and one gallon containers of household product. Relevant facts pertaining to the KIK So Cal facility are as follows:

a. Staffing (Organization Chart Attached)

1. General Manager
2. Four Managers
3. Four Supervisors
4. Six Foreman/ Leadman
5. Sixty One Payroll employees;

b. Operations

1. Repackages household products during three eight hour shifts: Sunday - Friday (11:30am - 11:30pm)
2. Has eight combination safety shower and eyewash stations.
3. Has five eyewash stations.
4. Has first aid cabinets located throughout the plant.
5. Has Ten employees certified to provide CPR/first aid (at least two on each shift).
6. When not operating, the facility is protected by an industrial type chain link fence with gates closed and security guard on property.
7. Has back-up electrical supply for Safety items plus process area.
8. Is located in an industrial/commercial zone with several neighbors of which two are chemical company's located on the east, north and west of the facility. One industrial park located west across street with one resident across street to the south.
9. Has ten(10)self-contained breathing apparatus with four (4) replacement bottles at designated areas per attached map.
10. Has twenty two (22)employees certified in hazard response at the technician level and above in incident command system.
11. Have eighteen two channel two way radios.
12. Have four Level " A " emergency response suits.
13. The following emergency/protective equipment is available
    a. Two Emergency " C " Kits
    b Miscellaneous equipment (inventory attached)

APPENDIX A - Emergency Response Plan

A.1 Background information

KIK International So Cal processes and repackages chlorine and sodium hydroxide in to bleach along with repackaging aqua ammonia and is located in Santa Fe Springs, CA.

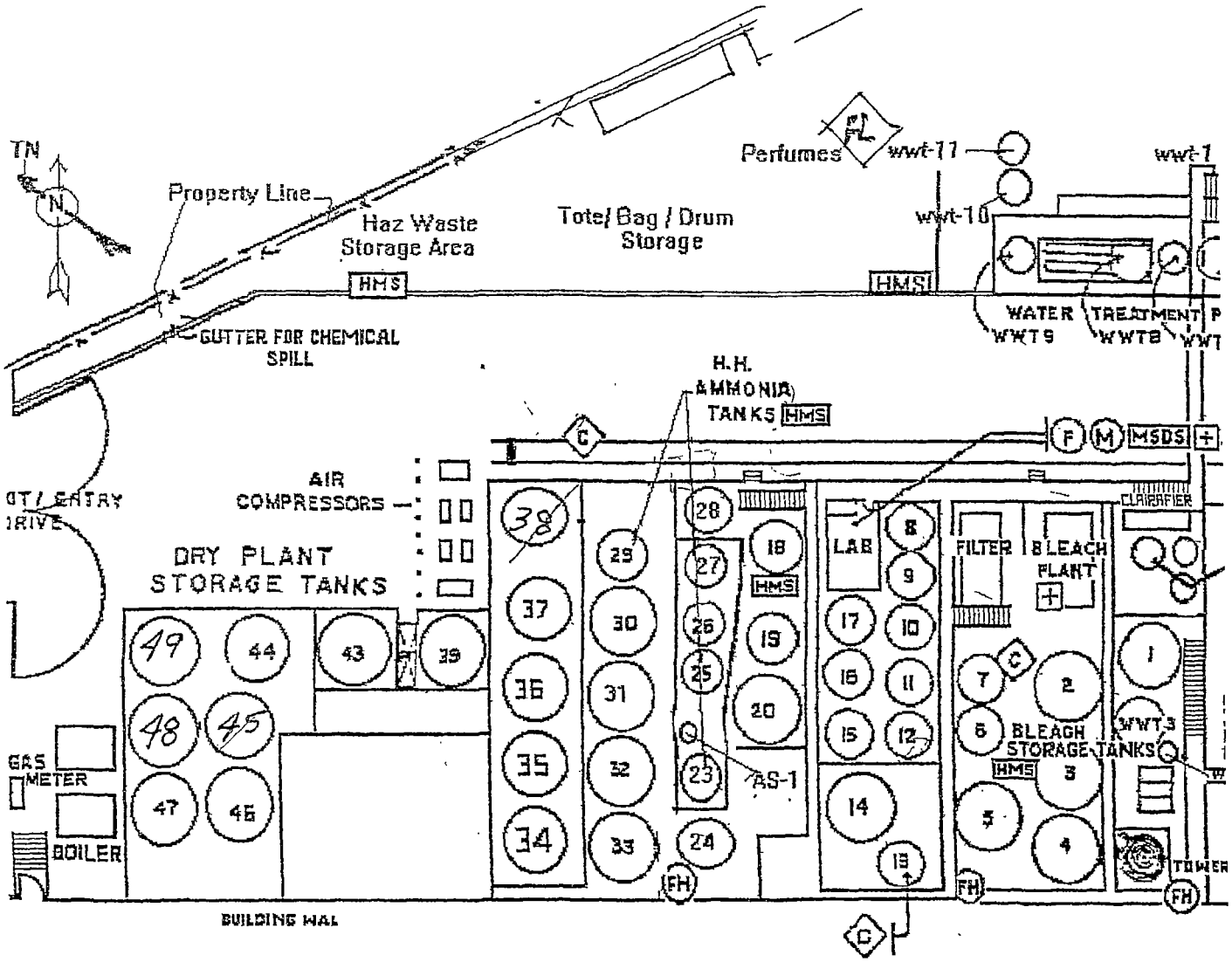
This repackager buys chlorine in 90 ton railroad tank cars, sodium hydroxide in 4000 gal.tanker trucks and aqua ammonia in 4500 gal. tanker trucks and repackages the materials into half gallon and one gallon containers of household product. Relevant facts pertaining to the KIK So Cal facility are as follows:

a. Staffing (Organization Chart Attached)

1. General Manager
2. Four Managers
3. Four Supervisors
4. Six Foreman/ Leadman
5. Sixty One Payroll employees;

b. Operations

1. Repackages household products during three eight hour shifts: Sunday - Friday (11:30am - 11:30pm)
2. Has eight combination safety shower and eyewash stations.
3. Has five eyewash stations.
4. Has first aid cabinets located throughout the plant.
5. Has Ten employees certified to provide CPR/first aid (at least two on each shift).
6. When not operating, the facility is protected by an industrial type chain link fence with gates closed and security guard on property.
7. Has back-up electrical supply for Safety items plus process area.
8. Is located in an industrial/commercial zone with several neighbors of which two are chemical company's located on the east, north and west of the facility. One industrial park located west across street with one resident across street to the south.
9. Has ten(10)self-contained breathing apparatus with four (4) replacement bottles at designated areas per attached map.
10. Has twenty two (22)employees certified in hazard response at the technician level and above in incident command system.
11. Have eighteen two channel two way radios
12. Have four Level " A " emergency response suits
13. The following emergency/protective equipment is available.
    a. Two Emergency " C " Kits
    b Miscellaneous equipment (inventory attached)



PLOT PLAN (TANK FARM)

SCALE : 30'-0'

6/06/00 PROPOSED LAYOUT/dj

FIRE DEPT. ACCESS SYMSOL

MSDS MATL. SAFETY DATA SHEET

SAFETY SYMBOLS

- FH FIRE HOSE
- F FIRE EXTINGUISHER
- C PROTECTIVE CLOTHING
- M PROTECTIVE MASK
- + FIRST AID

HAZARDOUS MATL

- ABOVEGROU
- FL FLAMAIBLE
- FG FLAMAIBLE
- C CORROSIV
- HMS HAZARDO

KIK INTERNATIONAL SOCAL

PAGERS AND CELL PHONES

GROUP	NAME	PAGER #	CELL PHONE #
*	**Bill Lamey**	310/875-0632	
	Bill Tidmore		FOIA ex 6, Personal Privacy
*	**Bob Brown**	310/875-0638	FOIA ex 6, Personal Privacy
*	**Charles Hemphill**	310/875-2375	
	Craig McCauslan		FOIA ex 6, Personal Privacy
	Emil Aldea	310/875-0634	
*	**Frank Calvo**	310/875-0414	
	Greg Wiese		FOIA ex 6, Personal Privacy
*	**Jaime Blas**	310/875-0636	
*	**Jim Rissman**	310/875-0640	FOIA ex 6, Personal Privacy
	John Houck		FOIA ex 6, Personal Privacy
	Juan Villalta	310/875-4642	
	Manuel Herrera	310/875-2376	
*	**Manuel Ortiz**	310/875-1937	
	Nita Labrador		FOIA ex 6, Personal Privacy
	Raul Alvarez	310/875-0639	
*	**Ray Wetter**	310/875-0633	
	Richard Lehman		FOIA ex 6, Personal Privacy
	Walter Avalos	310/875-0637	

* Group Page for Emergency Response Personnel 310/875-3695

When Paging;

1. Dial pager number & wait for beep
2. Dial your number (area code first)
3. Press the pound sign (#) until you hear beep & hang up

KIK INTERNATIONAL SOCAL

PHONE LIST OF OTHER'S TO NOTIFY IN CASE OF AN EMERGENCY

Plant Personnel		Home Number	Car/Pager Number
Logistics Manager (Day)	Dave Going	FOIA ex 6, Personal Privacy	
Plant Supv. (Swing)	Manuel Herrera	FOIA ex 6, Personal Privacy	310/875-2376
Plant Supv. (Grave)	Ray Wetter	FOIA ex 6, Personal Privacy	310/875-0633
Plant Safety/Env. Supv.	Derrell Johnson	FOIA ex 6, Personal Privacy	
Maintenance Supv.	Jim Rissman	FOIA ex 6, Personal Privacy	310/702-7333
Warehouse Supv.	Richard Lehman	FOIA ex 6, Personal Privacy	
Human Resources Mgr.	Priscilla Prentiss	FOIA ex 6, Personal Privacy	
Day Shift Personnel:			
Procurement Manager	John Houck	FOIA ex 6, Personal Privacy	310/702-7555
Tank Farm Senior Leadman	Charles Hemphill	FOIA ex 6, Personal Privacy	310/875-2375
Fill Line Foreman	Walter Avalos		310/875-0637
Maintenance	Bill Lamey	FOIA ex 6, Personal Privacy	310/875-0632
Waste Water Treatment	Bobby Brown	FOIA ex 6, Personal Privacy	
Swing Shift Personnel:			
Maintenance	Manuel Ortiz	FOIA ex 6, Personal Privacy	310/875-1937
Fill Line Leadman	Raul Alvarez		310/875-0639
Graveyard Shift Personnel:			
Fill Line Leadman	Roberto Rodriguez	FOIA ex 6, Personal Privacy	
KIK Management			
Dir. of Manufacturing	Greg Wiese	FOIA ex 6, Personal Privacy	FOIA ex 6, Personal Privacy
Controller	Bill Tidmore	FOIA ex 6, Personal Privacy	310/702-1120
General Manager	Bob Brown	FOIA ex 6, Personal Privacy	310/612-2001

APPENDIX A - Emergency Response Plan

A .1 Background information

KIK International So Cal processes and repackages chlorine and sodium hydroxide in to bleach along with repackaging aqua ammonia and is located in Santa Fe Springs, CA.

This repackager buys chlorine in 90 ton railroad tank cars, sodium hydroxide in 4000 gal.tanker trucks and aqua ammonia in 4500 gal. tanker trucks and repackages the materials into half gallon and one gallon containers of household product. Relevant facts pertaining to the KIK So Cal facility are as follows:

a. Staffing (Organization Chart Attached)

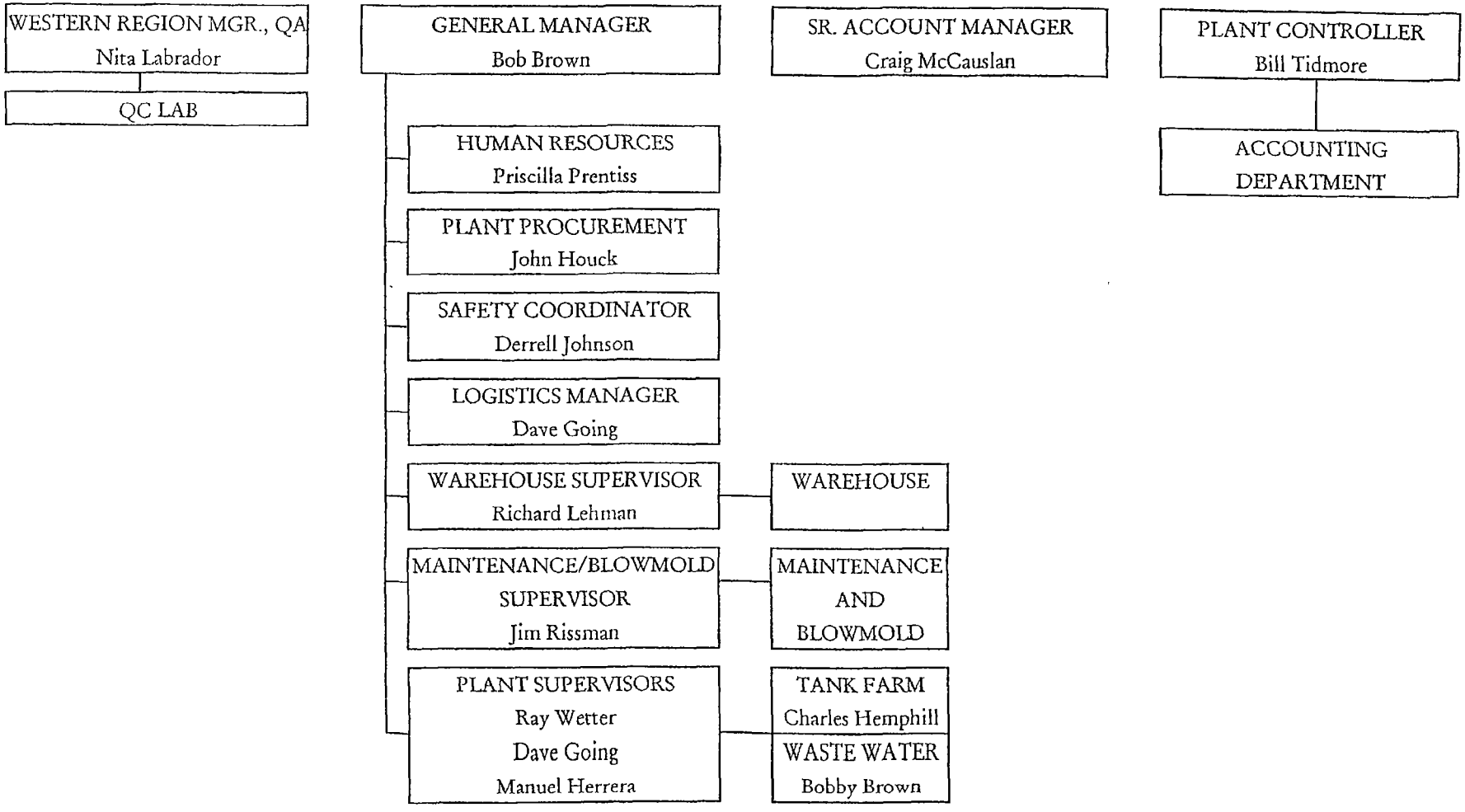
1. General Manager
2. Four Managers
3. Four Supervisors
4. Six Foreman/ Leadman
5. Sixty One Payroll employees;

b. Operations

1. Repackages household products during three eight hour shifts: Sunday - Friday (11:30am - 11:30pm)
2. Has eight combination safety shower and eyewash stations.
3. Has five eyewash stations.
4. Has first aid cabinets located throughout the plant.
5. Has Ten employees certified to provide CPR/first aid (at least two on each shift).
6. When not operating, the facility is protected by an industrial type chain link fence with gates closed and security guard on property.
7. Has back-up electrical supply for Safety items plus process area.
8. Is located in an industrial/commercial zone with several neighbors of which two are chemical company's located on the east, north and west of the facility. One industrial park located west across street with one resident across street to the south.
9. Has ten(10)self-contained breathing apparatus with four (4) replacement bottles at designated areas per attached map.
10. Has twenty two (22)employees certified in hazard response at the technician level and above in incident command system.
11. Have eighteen two channel two way radios.
12. Have four Level " A " emergency response suits.
13. The following emergency/protective equipment is available:
    a. Two Emergency " C " Kits
    b. Miscellaneous equipment (inventory attached)

KIK INTERNATIONAL SOCAL ORGANIZATIONAL CHART

9028 Dice Road, Santa Fe Springs, CA 90670



KIK INTERNATIONAL SOCAL

PAGERS AND CELL PHONES

GROUP	NAME	PAGER #	CELL PHONE #
*	**Bill Lamey**	310/875-0632	FOIA ex 6, Personal Privacy
	Bill Tidmore		FOIA ex 6, Personal Privacy
*	**Bob Brown**	310/875-0638	FOIA ex 6, Personal Privacy
*	**Charles Hemphill**	310/875-2375	
	Craig McCauslan		FOIA ex 6, Personal Privacy
	Dave Going	310/875-0634	FOIA ex 6,
*	**Frank Calvo**	310/875-0414	
	Greg Wiese		FOIA ex 6, Personal Privacy
*	**Jaime Blas**	310/875-0636	
*	**Jim Rissman**	310/875-0640	FOIA ex 6, Personal Privacy
	Juan Villalta	310/875-4642	
	Manuel Herrera	310/875-2376	
*	**Manuel Ortiz**	310/875-1937	
	Nita Labrador		FOIA ex 6, Personal Privacy
	Priscilla Prentiss		FOIA ex 6, Personal Privacy
	Raul Alvarez	310/875-0639	
*	**Ray Wetter**	310/875-0633	
	Richard Lehman		FOIA ex 6, Personal Privacy
	Walter Avalos	310/875-0637	

* Group Page for Emergency Response Personnel 310/875-3695

When Paging;

1. Dial pager number & wait for beep
2. Dial your number (area code first)
3. Press the pound sign (#) until you hear beep & hang up

KIK INTERNATIONAL SOCAL

PAGERS AND CELL PHONES

GROUP	NAME	PAGER #	CELL PHONE #
*	**Bill Lamey**	**310/875-0632**	FOIA ex 6, Personal Privacy
	Bill Tidmore		FOIA ex 6, Personal Privacy
*	**Bob Brown**	**310/875-0638**	FOIA ex 6, Personal Privacy
*	**Charles Hemphill**	**310/875-2375**	
	Craig McCauslan		FOIA ex 6, Personal Privacy
	Dave Going	310/875-0634	FOIA ex 6, Personal Privacy
*	**Frank Calvo**	**310/875-0414**	
	Greg Wiese		FOIA ex 6, Personal Privacy
*	**Jaime Blas**	**310/875-0636**	
*	**Jim Rissman**	**310/875-0640**	FOIA ex 6, Personal Privacy
	Juan Villalta	310/875-4642	
	Manuel Herrera	310/875-2376	
*	**Manuel Ortiz**	**310/875-1937**	
	Nita Labrador		FOIA ex 6, Personal Privacy
	Priscilla Prentiss		FOIA ex 6, Personal Privacy
	Raul Alvarez	310/875-0639	
*	**Ray Wetter**	**310/875-0633**	
	Richard Lehman		FOIA ex 6, Personal Privacy
	Walter Avalos	310/875-0637	

* Group Page for Emergency Response Personnel 310/875-3695

When Paging;

1. Dial pager number & wait for beep
2. Dial your number (area code first)
3. Press the pound sign (#) until you hear beep & hang up

KIK INTERNATIONAL SOCAL

PAGERS AND CELL PHONES

GROUP	NAME	PAGER #	CELL PHONE #
*	**Bill Lamey**	310/875-0632	FOIA ex 6, Personal Privacy
	Bill Tidmore		FOIA ex 6, Personal Privacy
*	**Bob Brown**	310/875-0638	FOIA ex 6, Personal Privacy
*	**Charles Hemphill**	310/875-2375	
	Craig McCauslan		FOIA ex 6, Personal Privacy
	Dave Going	310/875-0634	FOIA ex 6, Personal Privacy
*	**Frank Calvo**	310/875-0414	
	Greg Wiese		FOIA ex 6, Personal Privacy
*	**Jaime Blas**	310/875-0636	
*	**Jim Rissman**	310/875-0640	FOIA ex 6, Personal Privacy
	Juan Villalta	310/875-4642	
	Manuel Herrera	310/875-2376	
*	**Manuel Ortiz**	310/875-1937	
	Nita Labrador		FOIA ex 6, Personal Privacy
	Priscilla Prentiss		FOIA ex 6, Personal Privacy
	Raul Alvarez	310/875-0639	
*	**Ray Wetter**	310/875-0633	
	Richard Lehman		FOIA ex 6, Personal Privacy
	Walter Avalos	310/875-0637	

* Group Page for Emergency Response Personnel 310/875-3695

When Paging;

1. Dial pager number & wait for beep
2. Dial your number (area code first)
3. Press the pound sign (#) until you hear beep & hang up

KIK INTERNATIONAL SOCAL

PAGERS AND CELL PHONES

GROUP	NAME	PAGER #	CELL PHONE #
*	**Bill Lamey**	310/875-0632	FOIA ex 6, Personal Privacy
	Bill Tidmore		FOIA ex 6, Personal Privacy
*	**Bob Brown**	310/875-0638	FOIA ex 6, Personal Privacy
*	**Charles Hemphill**	310/875-2375	
	Craig McCauslan		FOIA ex 6, Personal Privacy
	Dave Going	310/875-0634	FOIA ex 6, Personal Privacy
*	**Frank Calvo**	310/875-0414	
	Greg Wiese		FOIA ex 6, Personal Privacy
*	**Jaime Blas**	310/875-0636	
*	**Jim Rissman**	310/875-0640	FOIA ex 6, Personal Privacy
	Juan Villalta	310/875-4642	
	Manuel Herrera	310/875-2376	
*	**Manuel Ortiz**	310/875-1937	
	Nita Labrador		FOIA ex 6, Personal Privacy
	Priscilla Prentiss		FOIA ex 6, Personal Privacy
	Raul Alvarez	310/875-0639	
*	**Ray Wetter**	310/875-0633	
	Richard Lehman		FOIA ex 6, Personal Privacy
	Walter Avalos	310/875-0637	

* Group Page for Emergency Response Personnel 310/875-3695

When Paging;

1. Dial pager number & wait for beep
2. Dial your number (area code first)
3. Press the pound sign (#) until you hear beep & hang up

KIK INTERNATIONAL SOCAL

PAGERS AND CELL PHONES

GROUP	NAME	PAGER #	CELL PHONE #
*	**Bill Lamey**	**310/875-0632**	FOIA ex 6, Personal Privacy
	Bill Tidmore		FOIA ex 6, Personal Privacy
*	**Bob Brown**	**310/875-0638**	FOIA ex 6, Personal Privacy
*	**Charles Hemphill**	**310/875-2375**	
	Craig McCauslan		FOIA ex 6, Personal Privacy
	Dave Going	310/875-0634	FOIA ex 6, Personal Privacy
*	**Frank Calvo**	**310/875-0414**	
	Greg Wiese		FOIA ex 6, Personal Privacy
*	**Jaime Blas**	**310/875-0636**	
*	**Jim Rissman**	**310/875-0640**	FOIA ex 6, Personal Privacy
	Juan Villalta	310/875-4642	
	Manuel Herrera	310/875-2376	
*	**Manuel Ortiz**	**310/875-1937**	
	Nita Labrador		FOIA ex 6, Personal Privacy
	Priscilla Prentiss		FOIA ex 6, Personal Privacy
	Raul Alvarez	310/875-0639	
*	**Ray Wetter**	**310/875-0633**	
	Richard Lehman		FOIA ex 6, Personal Privacy
	Walter Avalos	310/875-0637	

* **Group Page for Emergency Response Personnel** **310/875-3695**

When Paging;

1. Dial pager number & wait for beep
2. Dial your number (area code first)
3. Press the pound sign (#) until you hear beep & hang up

KIK Corporation Inc.

Superfund Amendments and Reauthorization Act (SARA)

Assessments

KIK Corporation Inc.

Superfund Amendments and Reauthorization Act (SARA)

Tier II

KIK Corporation Inc.

Superfund Amendments and Reauthorization Act (SARA)

Form R

Form Approved OMB Number:2070-0093
Approval Expires: 1/31/2008

(IMPORTANT: Type or print, read instructions before completing form)

EPA Copy -- Do Not Submit

EPA United States Environmental Protection Agency

FORM R

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Chlorine

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P O.Box 1513, Lanham, MD 20703-1513 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2006

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2 2, Attach substantiation forms) [X] NO (Do not answer 2.2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report

Name and official title of owner/operator or senior management official	Signature	Date Signed.
Bob Brown General Manager		05/23/2007

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name	TRI Facility ID Number	Facility or Establishment Name or Mailing Address (if different from street address)
SoCal Inc	90670TCHMP9028D	
Street: 9028 Dice Road	Mailing Address: NA	
City/County/State/Zip Code: Sante Fe Springs, Los Angeles, CA 90670	City/State/Zip Code	Country (Non-US)

4.2 This report contains information for (Important check a or b, check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c. [ ] A Federal facility d. [ ] GOCO

4.3	Technical Contact Name	Bob Brown	Telephone Number (include area code): (562) 946-6427
	Email Address	NA	
4.4	Public Contact Name	United States Compliance Corp.	Telephone Number (include area code): (952) 252-3000

4.5 NAICS Code (s) (6 digits)

Primary					
a. 325611	b.	c.	d.	e.	f.

4.7 Dun & Bradstreet Number(s) (9 digits)
a. 051482784
b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK Custom Products
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

File Copy - DO NOT SUBMIT TO EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number
0[illegible]9026J
Toxic Chemical, Category or Generic Name
Chlorine

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7782-50-5
1.2	Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list.)
	Chlorine
1.3	Generic Chemical Name (Important Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.)
	NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA.)

NA ☐	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important. Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import		
If produce or import	a. ☒ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☐ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	05	(Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions NA ☐	1	E	
5.2	Stack or point air emissions NA ☐	0	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
	Stream or Water Body Name			
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Not Submitted to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670CHNIF3028
Toxic Chemical, Category, or Generic Name
Chlorine

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X		
5.4.2	Underground Injection onsite to Class II-V Wells	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal		0	M

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B. 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B.	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No)	NA						
Off-Site Location Name	NA						
Off-site Address							
City		State		County		Zip	Country (Non-US)

Location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds.

EPA FORM R

PART II: CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90701C-IIIF9028
Toxic Chemical, Category, or Generic Name
Chlorine

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☒ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]								d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.1a	7A.1b	1		2		3		4	7A.1d
		5		6		7		8	
7A.2a	7A.2b	1		2		3		4	7A.2d
		5		6		7		8	
7A.3a	7A.3b	1		2		3		4	7A.3d
		5		6		7		8	
7A.4a	7A.4b	1		2		3		4	7A 4d
		5		6		7		8	
7A.5a	7A 5b	1		2		3		4	7A.5d
		5		6		7		8	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 6.2/7A page number in this box: ☐ **(example: 1,2,3, etc.)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds; B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number	
90[illegible]CHM[illegible]9028D	
Toxic Chemical, Category, or Generic Name	
Chlorine	

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	2	1	1	1
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	1 46			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8 11			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.
	If you wish to submit additional optional information on source reduction, recycling, or pollution control activities with this report, check "Yes "			Yes [ ]

*For Dioxin or Dioxin-like compounds, report in grams/year

TRI Facility ID Number
90670TCHM[illegible]28D
Toxic Chemical, Category or Generic Name
Chlorine

Form Submitted

CTION 8.11. Submit additional optional information on source reduction, recycling, or pollution control activities.

KIK So-Cal (KIKS02) RY. 2006

Product Name	Density (lbs/gal)	Solid, Liquid, or Gas	Constituents	CAS #	%	Maximum Amount Stored	Average Amount Stored	Annual Usage
Acetylene	7.56 lbs/cuft	Gas				29	15	
Accosoft 550-PG	7 82	Liquid	No SARA 313 Chemicals			51,817	26,540	318,481
Ammonia (Household)	8 18	Liquid				229,040	163,600	
Ammonia (Household)			Ammonia	1336-21-6	2.0%	4,581	3,272	0
Harborlite H700		Solid	No SARA 313 Chemicals			4,250	7,740	50,507
Antifoam XFO30						550	285	3,409
Anti Freeze Summer Coolant	9 47	Liquid				521	313	
Anti Freeze Summer Coolant			Ethanediol	107-21-1	95.0%	495	297	
Aqua Ammonia	7 481	Liquid				44,988	29,992	570,132
Aqua Ammonia			Ammonia	7664-41-7	29.0%	13,047	8,698	165,338
Argon	0 103 lbs/cuft	Gas				26	16	
Bio-Soft D-40	8.902	Liquid	No SARA 313 Chemicals			19,133	9,500	113,436
Bio Terge AS-40	8 836	Liquid	No SARA 313 Chemicals			3,456	1,675	20,034
Bleach & Ammonia Product Fragrances	8.73	Liquid				9,603	4,965	
BWT-OD-PPSA CR3057	9 6	Liquid	No SARA 313 Chemicals			528	288	
Calfoam ES-603	8.345	Liquid	No SARA 313 Chemicals			9,000	1,500	46,215
Carbon Dioxide	0 114 lbs/cuft					0	0	
Caustic Soda 50%	12.68	Liquid				2,916,400	126,800	4,675,085
Caustic Potash 50%	12.1	Liquid				145,200	96,800	400,456
Citric Acid Granular		Solid	No SARA 313 Chemicals			1,300	810	9,666
Chlorine	12.24	Gas				900,000	540,000	13,317,038
Chlorine			Chlorine	7782-50-5	100.0%	900,000	540,000	13,317,038
Coconut Diethanolamide	8 21	Liquid				4,730	2,400	28,813
Coconut Diethanolamide			Diethanolamide	111-42-2	8 0%	378	192	2,305
Dantogard DMDM Hydantoin	9 93	Liquid				1,092	546	6,652
Dantogard DMDM Hydantoin			Formaldehyde		1 5%	16	8	100
Dantogard DMDM Hydantoin			3-Iodo-2-propynyl	55406-53-6	2 6%	28	14	173
DGC Win Surf (Aqueous Synthetic Detergen	9 26	Liquid	No SARA 313 Ch	50-00-0		8,460	3,800	45,953
Dyes	NO MSDS	Solid				100	70	831
FIC 200		Solid	No SARA 313 Chemicals			930	440	5,240
FMB 1210-8	7 59	Liquid	No SARA 313 Chemicals			1,640	820	8,386
Glycol Ether DB	7 52	Liquid	No SARA 313 Chemicals			7,672	1,900	23,359
Glycol Ether DB			Glycol Ethers Col	N230	100.0%	7,672	1,900	23,359
Helium	010 sg							
Hydrogen Peroxide	9 98	Liquid				99,800	44,900	331,655
Hydrotrope Stephanate SXS	8 345	Liquid	No SARA 313 Chemicals			8,200	2,050	34,467
Magnesium Chloride		Solid	No SARA 313 Chemicals			2,330	1,050	12,580

Product Name	Density (lbs/gal)	Solid, Liquid, or Gas	Constituents	CAS #	%	Maximum Amount Stored	Average Amount Stored	Annual Usage
Multi Gear Oil API GL-S SAE 85 W150	Est 10	Liquid				3,300	2,000	
Nitrogen	0 0724 lbs/cuft	Gas				264	154	
Opacifier E305	8 345	Liquid	No SARA 313 Chemicals			900	360	4,281
Optic Bright Tinopal CBS-X		Solid	No SARA 313 Chemicals			55	31	366
Oxygen	0 082 lbs/cuft	Gas				62	29	
Phosphoric Acid	13 2	Liquid				700	575	4,151
Potassium Hypochlorite	9 6	Liquid				57,600	19,200	
Propane	095 lbs/cuft	Gas				1,731	1,039	73,198
Propane			Propylene	115-07-1	1 0%	17	10	732
Rain Clean Type Fragrance	8.73					0	0	
Soda Ash	21 1	Solid				3,070	775	17,620
Sodium Chloride TopFlo		Solid	No SARA 313 Chemicals			4,050	2,250	26,956
Sodium Chloride Select		Solid	No SARA 313 Chemicals			43,700	31,685	380,200
Sodium Hypochlorite	9 6	Liquid				199,680	199,680	
Styrene/Acrylic Emulsion Polymer		Liquid				55	N/A	
Surfonic N-102	8 35	Liquid				100,200	41,750	45,181
Surfonic N-102			Poly (Oxy-1,2-Eth	9016-45-9	100 0%	100,200	41,750	
Surfonic N-60	11 14	Liquid				0	0	
Surfonic N-60			Glycol Ethers	N230	10 0%	0	0	
Surfonic NP-9.5	8.85	Liquid	No SARA 313 Chemicals			475	207	2,483
T-10FS Hydrochloric Acid Solution	9 17		Hydrochloric Acid	7647-01-0	100.0%	2,017	1,008	
Tomadol 91-6	8.21	Liquid	No SARA 313 Chemicals			4,400	1,100	13,200
Ucarcide 50 Antimicrobial		Liquid				1,377	685	8,207
Ucarcide 50 Antimicrobial			Methanol	67-56-1	0.5%	De Minimis	De Minimis	De Minimis
Versonal ® 120 Cleating Agent	10.77					1,185	592	
Versene 100	10.93	Liquid				67,795	52,300	33,971
#2 Diesel Fuel	7.05	Liquid				1,551	389	
#2 Diesel Fuel			No 2 Fuel Oil	68476-30-2	100%	1551	389	
#2 Diesel Fuel			Napthalene	91-20-3	0 10%	1 551	0.389	
#2 Diesel Fuel			Benzo(g,h,I)peryler	191-24-2	0 0000050%	De Minimis	De Minimis	De Minimis
#2 Diesel Fuel			Polycyclic Aromatic Com	N590	0 00%	De Minimis	De Minimis	De Minimis
#2 Diesel Fuel			Mercury Compound	N458	0 00000010%	0.000001551	0.000000389	0

KIK So-Cal (KIKS02) 2006

Chemical Name	CAS #	Usage	Total Used	Threshold Exceeded
Ethanediol	107-21-1	0	0	No
Ammonia	7664-41-7	165,338	16533.828	No
Chlorine	7782-50-5	13,317,038	13,317,038	Yes
Propylene	115-07-1	732	6979	No
Napthalene	91-20-3			No
Benzo(g,h,I)perylene	191-24-2			No
polycyclic Aromatic Com	N590			No
Mercury Compounds	N458			No

United States Compliance

May 30, 2007

Bob Brown
KIK-SoCal Inc.
9028 Dice Road
Santa Fe Springs, CA 90670

Re: 2006 SARA TRI Reporting

Dear Bob Brown:

Enclosed please find the 2006 Superfund Amendment Reauthorization Act (SARA) Section 313 (Form R/A) Report for KIK-SoCal Inc. and two diskettes, one for the State and one for the Federal EPA. The 2006 Form R was completed by U.S. Compliance Corporation based upon information supplied by the facility.

Please have the facility's signing official sign and date the certification letters where indicated. The diskettes must be sent in their respective envelopes along with the certification letters. **Please send this information via certified mail, return receipt requested, to the respective destinations before the July 1, 2007 deadline.**

A file copy of the SARA Section 313 Report is enclosed for your facility's records. Please review the report, sign where indicated, and file in the facility's compliance manual as documentation of filing for the 2006 reporting year.

If you have any questions, please contact me at bwynnemer@uscompliance.com or (952) 252-3000 x145.

Regards,

Brad Wynnemer
Environmental Specialist

Enclosure

Form Approved OMB Number: 2070-0093
Approval Expires: 1/31/2008

(IMPORTANT: Type or print, read instructions before completing form)

FILE COPY Do Not Submit To EPA

EPA United States Environmental Protection Agency

FORM R

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number: 90670TCHMP9028D

Toxic Chemical, Category or Generic Name: Ammonia

WHERE TO SEND COMPLETED FORMS: 1. TRI Data Processing Center, P O Box 1513, Lanham, MD 20703-1513 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only: [ ]

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2005

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2.2, Attach substantiation forms) [X] NO (Do not answer 2.2, Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report

Name and official title of owner/operator or senior management official:	Signature:	Date Signed:
Bob Brown General Manager		06/23/2006

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name: KIK-SoCal Inc.

Facility or Establishment Name or Mailing Address (if different from street address):

Street: 9028 Dice Road

Mailing Address: NA

City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670

City/State/Zip Code:

Country (Non-US):

4.2 This report contains information for. (Important: check a or b; check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c. [ ] A Federal facility d. [ ] GOCO

4.3 Technical Contact Name: Derrell Johnson — Telephone Number (include area code): (562) 946-6427

Email Address: NA

4.4 Public Contact Name: United States Compliance Corp. — Telephone Number (include area code): (952) 252-3000

4.5 SIC Code (s) (4 digits):

Primary					
a. 2841	b.	c.	d.	e.	f.

4.7 Dun & Bradstreet Number(s) (9 digits): a. 051482784 b.

SECTION 5. PARENT COMPANY INFORMATION

5.1 Name of Parent Company: NA [ ] — KIK Custom Products

5.2 Parent Company's Dun & Bradstreet Number: NA [X]

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number: [illegible]

Toxic Chemical, Category or Generic Name: Ammonia

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category): 7664-41-7
1.2	Toxic Chemical or Chemical Category Name (Important. Enter only one name exactly as it appears on the Section 313 list.): Ammonia
1.3	Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive): NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation): NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import		
If produce or import	a. ☐ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☒ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e. ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 04 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions: NA ☐	2	E	
5.2	Stack or point air emissions: NA ☐	107	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
	Stream or Water Body Name			
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds; C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
50670CHMIF3028J
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X		
5.4.2	Underground Injection onsite to Class II-V Wells	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal		0	M

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B. 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B.	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No.)	NA						
Off-Site Location Name	NA						
Off-site Address							
City		State		County		Zip	Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 90670CHLIF5028D

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]								d Waste Treatment Efficiency Estimate [enter 2 character code]
7A.1a	7A.1b	1		A03	2	NA			7A.1d
A		3		4		5			E4
		6		7		8			
7A.2a	7A.2b	1			2				7A.2d
		3		4		5			
		6		7		8			
7A.3a	7A.3b	1			2				7A.3d
		3		4		5			
		6		7		8			
7A.4a	7A.4b	1			2				7A.4d
		3		4		5			
		6		7		8			
7A.5a	7A.5b	1			2				7A.5d
		3		4		5			
		6		7		8			

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6.2/7A page number in this box: ☐ **(example: 1,2,3, etc.)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds; C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 30077SHMP9026S

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [H39] 2 [ ] 3 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	82	109	109	109
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	4319	3406	3406	3406
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	154	122	122	122
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	0 79			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8.11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 If you wish to submit additional optional information on source reduction, recycling, or pollution control activities with this report, check "Yes" [ ] Yes

*For Dioxin or Dioxin-like compounds, report in grams/year

TRI Facility ID Number
90670TCHM2928D
Toxic Chemical, Category, or Generic Name
Ammonia

Copy - Do Not Submit to E

SECTION 8.11. Submit additional optional information on source reduction, recycling, or pollution control activities.

File Copy -- Do Not Submit to EPA

EPA United States Environmental Protection Agency

FORM R

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number: 90670TCHMP9028D

Toxic Chemical, Category or Generic Name: Chlorine

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P O.Box 1513, Lanham, MD 20703-1513 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2005

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2 2, Attach substantiation forms) [X] NO (Do not answer 2 2, Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report

Name and official title of owner/operator or senior management official.	Signature	Date Signed
Bob Brown General Manager		06/23/2006

SECTION 4. FACILITY IDENTIFICATION

4.1 Facility or Establishment Name: KIK-SoCal Inc

TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name or Mailing Address (if different from street address):

Street: 9028 Dice Road

Mailing Address: NA

City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670

City/State/Zip Code:

Country (Non-US):

4.2 This report contains information for (Important check a or b, check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c. [ ] A Federal facility d [ ] GOCO

4.3	Technical Contact Name	Derrell Johnson				Telephone Number (include area code)	(562) 946-6427
	Email Address	NA					
4.4	Public Contact Name	United States Compliance Corp				Telephone Number (include area code)	(952) 252-3000
4.5	SIC Code (s) (4 digits)	Primary a. 2841	b.	c.	d.	e.	f.
4.7	Dun & Bradstreet Number(s) (9 digits)	a. 051482784	b.				

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK Custom Products
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

File Copy Do Not Submit to EPA

EPA FORM R

TRI Facility ID Number: 07[illegible]9025

Toxic Chemical, Category or Generic Name: Chlorine

PART II. CHEMICAL - SPECIFIC INFORMATION

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category.)
7782-50-5

1.2 Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list.)
Chlorine

1.3 Generic Chemical Name (Important. Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive)
NA

1.4 **Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.**
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA ☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation)
NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import		
If produce or import:	a. ☒ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☐ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e. ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 05 (Enter two-digit code from instruction package)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA ☐	2	E	
5.2	Stack or point air emissions	NA ☐	0	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes. A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

TRI Facility ID Number: 90070CMLP3028D

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X		
5.4.2	Underground Injection onsite to Class II-V Wells	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal		0	M

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B. 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B.	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No.)	NA							
Off-Site Location Name	NA								
Off-site Address									
City		State		County		Zip		Country (Non-US)	

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds, C= 500 - 999 pounds.

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 90707CHLIF9028D

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a. General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]								d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.1a	7A.1b	1		2		3		4	7A.1d
	5		6		7		8		
7A.2a	7A.2b	1		2		3		4	7A.2d
	5		6		7		8		
7A.3a	7A.3b	1		2		3		4	7A.3d
	5		6		7		8		
7A.4a	7A.4b	1		2		3		4	7A.4d
	5		6		7		8		
7A.5a	7A.5b	1		2		3		4	7A.5d
	5		6		7		8		

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6.2/7A page number in this box: ☐ **(example: 1,2,3, etc.)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds; B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 30307CHMTR9028B

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	2	2	2	2
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	1 27			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10 1 and answer Section 8.11			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.
8.11	If you wish to submit additional optional information on source reduction, recycling, or pollution control activities with this report, check "Yes "			Yes [ ]

*For Dioxin or Dioxin-like compounds, report in grams/year

TRI Facility ID Number
90670TCHMF5628D
Toxic Chemical, Category, or Generic Name
Chlorine

COPY - Do Not Submit to E

SECTION 8.11. Submit additional optional information on source reduction, recycling, or pollution control activities.

FILE COPY

KIK So-Cal (KIKS02) RY: 2005

Product Name	2005			
	Maximum Amount Stored	Average Amount Stored	Annual Usage	Units
Acetylene	166,740	85,507	320,632	Lbs
Ammonia (Household)	229,040	163,600	6,032,292	Lbs
Anti Freeze Summer Coolant	521	313	947	Lbs
Aqua Ammonia	48,080	32,720	553,220	Lbs
Argon	3	3	-	Lbs
Bleach & Ammonia Product Fragrances	10,750	6,722	15,240	Lbs
Calfoam ES-603	3,672	1,836	64,800	Lbs
Carbon Dioxide	0	0	0	Lbs
Caustic Soda 50%	2916400	126800	44767485	Lbs
Caustic Potash 50%	145200	96800	291090	Lbs
Chlorine	900000	13792833	20085600	Lbs
DGC Win Surf (Aqueous Synthetic Detergent)	440	200	N/A	Gallons
Dyes	25	23	N/A	Lbs
Glycol Ether DB	3672	3672	42240	Lbs
Helium	300	N/A	N/A	Cubic Feet
Hydrogen Peroxide	99810	49900	250000	Lbs
Hydrotrope Stepanate SXS	3672	1836	24000	Lbs
Multi Gear Oil API GL-S SAE 85 W150	330	N/A	N/A	Gallons
Nitrogen	264	22	10800	Lbs
Oxygen	61	29	103448	Lbs
Phosphoric Acid	726	594	1400	Lbs
Potassium Hypochlorite	57600	914709	1152000	Lbs
Propane	1731	1039	697854	Lbs
Rain Clean Type Fragrance	0	0	0	Lbs
Soda Ash	2000	500	12000	Lbs
Sodium Hypochlorite	1996176	1996176	231937860	Lbs
Styrene/Acrylic Emulsion Polymer	55	N/A	N/A	Lbs
Surfonic N-102	100200	41750	0	Lbs
Surfonic N-60	1100	1100	N/A	Gallons
T-10FS Hydrochloric Acid Solution	2451	1225	0	Lbs
Versonal ® 120 Cleating Agent	1185	592	3000	Lbs
Versene 100	2405.029	N/A	N/A	Lbs
#2 Diesel Fuel	869	799	2904	Lbs

FORM R

RECEIVERS
- CHLORINE
- CAUSTIC
- KOH
- AMMONIA

JAN 1 2006 TO JUNE 30

PRODUCTION
JULY 1ST 2005 TO JUNE 30, 06

BULK
CASE PRODUCTION

CASE PRODUCTION
JAN 1ST 2005 - DEC 31ST 2005
128 oz
64 oz >

SENT MICHELLE INFO
10:45 AM 6-16-06

COMPLETE

Ans

$$\frac{128_2}{28,800} \qquad \frac{164_2}{142,800}$$

KIK CUSTOM PRODUCTS
COMMENTARY AND DETAILED EBITDA RECONCILIATION - 2006 SECOND HALF FORECAST vs BUDGET

US $ 000

Issued 6/16/2006
Operation: So Cal

Budgeted EBITDA for second half of 2006	4,832
Gross Sales	
Comparison (average sales/week basis)	
Discounts & Allowances:	1
Supplier rebates:	0
Standard Gross Profit:	
Volume Variance	(386)
Price/Cost/Mix Variance	541
Freight & Duty	315
Labor Variance	(47)
Material Variance - (See separate Var. page for details)	(220)
Fixed Cost Adjustment	(510)
Selling & Administrative:	
Commissions -	
Salaries & benefits -	
Travel and entertainment -	
Miscellaneous -	
	51
Forecasted EBITDA for second half of 2006	4,579

Bob Brown

From: Bob Brown
Sent: Friday, June 16, 2006 10:48 AM
To: 'Michelle Schmid'
Subject: RE: Form R calculations

8/64z Ammonia
- Annual Volume(cs) - 142,344
- Annual Volume(gals) - 569,376
- Annual Production hours - 355.8

6/128z Ammonia
- Annual Volume(cs) - 28,739
- Annual Volume (gals) 172,434
- Annual Production hours - 47.9

Total Volume (cs) - 171,083 cases
Total Volume)gals) - 741,810 gals
Total Production hours - 403.7

-----Original Message-----
From: Michelle Schmid [mailto:mschmid@uscompliance.com]
Sent: Wednesday, June 14, 2006 2:39 PM
To: Bob Brown
Subject: Re: Form R calculations

I am 2 hours ahead. 11 my time will work.

-----Original Message-----
From: Bob Brown <BBrown@KIKCORP.com>
To: Michelle Schmid
Sent: Wed Jun 14 16:38:51 2006
Subject: RE: Form R calculations

Short day for me too. Are you 2 hours or 3 hours ahead ? I have a 7:00 am conference call that should last about an hour. Maybe 9:00 am pdt ?

Bob

-----Original Message-----
From: Michelle Schmid [mailto:mschmid@uscompliance.com]
Sent: Wednesday, June 14, 2006 2:31 PM
To: Bob Brown
Subject: Re: Form R calculations

I am out of thr office tomorrow, how about Friday? I am in till 3:30.

-----Original Message-----
From: Bob Brown <BBrown@KIKCORP.com>
To: Michelle Schmid
Sent: Wed Jun 14 16:29:46 2006
Subject: RE: Form R calculations

Michelle,

What would be a good time to call you ?

Bob

-----Original Message-----
From: Michelle Schmid [mailto:mschmid@uscompliance.com]
Sent: Wednesday, June 14, 2006 8:34 AM
To: Bob Brown
Subject: Form R calculations

Bob-

Can you give me a time frame on when you think you will have those calculations done? We are just trying to plan out the last 3 weeks of the deadline.

Thanks-

Michelle Schmid

Environmental Supervisor

US Compliance Corporation

301 Carlson Parkway, Suite 200

Minnetonka, MN 55305

ph:(952) 252-3000 ext:105

fax:(952) 252-3001

KIK INTERNATIONAL SOCAL, INC. ANNUAL SARA 313 EMISSIONS REPORT
FORM R for 2004

128 oz = 1 Ga

AQUA AMMONIA

PRODUCT DESCRIPTTION	ANNUAL VOLUMES(CS) (cases)	ANNUAL VOLUME(GA)	AVG. PROD PER HR.	ANNUAL PROD/HRS
8/64 oz Ammonia	32,802	131,208	400	82,0050
6/128 oz Ammonia	134,579	807,474	600	224.2983
TOTALS	167,381	938,682		306.3033
10% Reportable	**16,738**	**93,868**		**30.6303**

Pounds Received (From PO Log) 497,074
10% Reportable **49,707**

CALCULATIONS

STACK EMMISSIONS: 30PPM X 0.00147 X 30,6303 X 60= 81 0477

FUGITIVE EMMISSIONS: 80ppmMONITOREDin 25 2q.ft:
2 x 5280 x (5x5 x 80ppm/359x127lbs/mole = 1 lb NH3/hr
ASSUME TANK OFF LOAD IS 1 HR:
1 X 1hr x 14 Loads = 14 (1 4) lbs

QUANTITY RELEASED: 82.4477

QUANTITY RECYCLED:
Ammonia Purchased 49707 X 0.3 = 14912
Produced 2% Ammonia 26333 X 0.02 = ~~19996~~ 4319
TOTAL ~~19996~~ 19231
Ammonia Production 93868 X 8.2 x 0.02= 15394

Quantity Recycled on Site ~~41245~~ 19231 - 15394 + 154 = ~~39996~~ 3991 lbs/yr

QUANTITY TREATED ON SITE: 0.01 LOSS FACTOR
15394 X 0.01 = 154 lbs/yr

PRODUCTION RATIO:

2003	2004	
856724	938682	= 1.0956

FOR CALCULATION OF 2004 & 2005 WILL USE 0 % INCREASE AND 2005 & 2006 EVEN

Bob Brown

From: Michelle Schmid [mschmid@uscompliance com]
Sent: Wednesday, May 31, 2006 2:01 PM
To: Bob Brown
Cc: Jim Rissman; Kaija Wilson
Subject: KIK So Cal Ammonia Rpt.

Bob-

Attached is the spreadsheet of information provided annually by Darrel to complete the Form R report for Ammonia Is this something you are aware of or can it be created with 2005 numbers? We tried to manage ourselves but the values and units are unclear and we are unsure of where the numbers came from Please let me know if you can assist us with some of this to get the reporting completed for the upcoming deadline

Thank you-

Michelle Schmid

KIK INTERNATIONAL SOCAL, INC. ANNUAL SARA 313 EMISSIONS REPORT
FORM R for 2004

128 oz = 1 Gal

AQUA AMMONIA

PRODUCT DESCRIPTTION	ANNUAL VOLUMES(CS) (cases)	ANNUAL VOLUME(GA)	AVG. PROD PER HR.	ANNUAL PROD/HRS
8/64 oz Ammonia	32,802	131,208	400	82,0050
6/128 oz Ammonia	134,579	807,474	600	224.2983
TOTALS	167,381	938,682		306.3033
10% Reportable	**16,738**	**93,868**		**30.6303**

Pounds Received (From PO Log) 497,074
10% Reportable **49,707**

CALCULATIONS

STACK EMMISSIONS: 30PPM X 0.00147 X 30,6303 X 60= 81 0477

FUGITIVE EMMISSIONS: 80ppmMONITOREDin 25 2q.ft:
2 x 5280 x (5x5 x 80ppm/359x127lbs/mole = 1 lb NH3/hr
ASSUME TANK OFF LOAD IS 1 HR:
1 X 1hr x 14 Loads = 14 (1 4) lbs

QUANTITY RELEASED: 82.4477

QUANTITY RECYCLED:
Ammonia Purchased 49707 X 0.3 = 14912
Produced 2% Ammonia 26333 X 0.02 = 4319
TOTAL
Ammonia Production 93868 X 8.2 x 0 02= 15394

Quantity Recycled on Site ~~41745~~ 19231 - 15394 + 154 = ~~20006~~ 3991 lbs/yr

QUANTITY TREATED ON SITE: 0.01 LOSS FACTOR
15394 X 0.01 = 154 lbs/yr

PRODUCTION RATIO:

2003	2004	
856724	938682	= 1.0956

FOR CALCULATION OF 2004 & 2005 WILL USE 0 % INCREASE AND 2005 & 2006 EVEN

Bob Brown

From: Michelle Schmid [mschmid@uscompliance.com]
Sent: Wednesday, May 31, 2006 2.01 PM
To: Bob Brown
Cc: Jim Rissman; Kaija Wilson
Subject: KIK So Cal Ammonia Rpt.

Bob-

Attached is the spreadsheet of information provided annually by Darrel to complete the Form R report for Ammonia Is this something you are aware of or can it be created with 2005 numbers? We tried to manage ourselves but the values and units are unclear and we are unsure of where the numbers came from. Please let me know if you can assist us with some of this to get the reporting completed for the upcoming deadline

Thank you-

Michelle Schmid

Bob Brown

From: Michelle Schmid [mschmid@uscompliance.com]
Sent: Friday, June 09, 2006 5.12 AM
To: Bob Brown
Subject: RE: KIK So Cal Ammonia Rpt.

Any luck on those numbers?

From: Bob Brown [mailto:BBrown@KIKCORP.com]
Sent: Wednesday, May 31, 2006 10:54 PM
To: Michelle Schmid
Subject: Re: KIK So Cal Ammonia Rpt.

Yes, I can help.

Sent from my BlackBerry Wireless Handheld

-----Original Message-----
From: Michelle Schmid <mschmid@uscompliance com>
To: Bob Brown <BBrown@KIKCORP.com>
CC: Jim Rissman <JRissman@KIKCORP.com>; Kaija Wilson <kwilson@uscompliance.com>
Sent: Wed May 31 17:01:08 2006
Subject: KIK So Cal Ammonia Rpt

Bob-

Attached is the spreadsheet of information provided annually by Darrel to complete the Form R report for Ammonia. Is this something you are aware of or can it be created with 2005 numbers? We tried to manage ourselves but the values and units are unclear and we are unsure of where the numbers came from Please let me know if you can assist us with some of this to get the reporting completed for the upcoming deadline.

Thank you-

Michelle Schmid

Bob Brown

From: Michelle Schmid [mschmid@uscompliance.com]
Sent: Friday, June 09, 2006 10:58 AM
To: Bob Brown
Subject: Re: KIK So Cal Ammonia Rpt.

No problem, get it to me when you can.

-----Original Message-----
From: Bob Brown <BBrown@KIKCORP.com>
To: Michelle Schmid
Sent: Fri Jun 09 11:29:45 2006
Subject: RE: KIK So Cal Ammonia Rpt.

Sorry, Michelle. I'm getting on it quickly.

> -----Original Message-----
> From: Michelle Schmid [mailto:mschmid@uscompliance.com]
> Sent: Friday, June 09, 2006 5:12 AM
> To: Bob Brown
> Subject: RE: KIK So Cal Ammonia Rpt.
>
> Any luck on those numbers?
>
> ---
>
> From: Bob Brown [mailto:BBrown@KIKCORP.com]
> Sent: Wednesday, May 31, 2006 10:54 PM
> To: Michelle Schmid
> Subject: Re: KIK So Cal Ammonia Rpt.
>
> Yes, I can help.
>
> ---
> Sent from my BlackBerry Wireless Handheld
>
> -----Original Message-----
> From: Michelle Schmid <mschmid@uscompliance.com>
> To: Bob Brown <BBrown@KIKCORP.com>
> CC: Jim Rissman <JRissman@KIKCORP.com>; Kaija Wilson <kwilson@uscompliance.com>
> Sent: Wed May 31 17:01:08 2006
> Subject: KIK So Cal Ammonia Rpt.
>
> Bob-
>
> Attached is the spreadsheet of information provided annually by Darrel to complete the Form R report for Ammonia. Is this something you are aware of or can it be created with 2005 numbers? We tried to manage ourselves but the values and units are unclear and we are unsure of where the numbers came from. Please let me know if you can assist us with some of this to get the reporting completed for the upcoming deadline.

Thank you-

Michelle Schmid

Bob Brown

From: Michelle Schmid [mschmid@uscompliance.com]
Sent: Wednesday, June 14, 2006 8:34 AM
To: Bob Brown
Subject: Form R calculations

Bob-
Can you give me a time frame on when you think you will have those calculations done? We are just trying to plan out the last 3 weeks of the deadline

Thanks-

Michelle Schmid
Environmental Supervisor
US Compliance Corporation
301 Carlson Parkway, Suite 200
Minnetonka, MN 55305
ph:(952) 252-3000 ext 105
fax.(952) 252-3001

United States Compliance

June 20, 2006

Bob Brown
KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

Re: 2005 SARA Form R Reporting

Dear Bob Brown:

Enclosed please find the 2005 Superfund Amendment Reauthorization Act (SARA) Section 313 (Form R) Report for KIK-SoCal Inc. and two diskettes, one for the State and one for the Federal EPA. The 2005 Form R was completed by U.S. Compliance Corporation based upon information supplied by the facility.

Please have the facility's signing official sign and date the certification letters where indicated. The diskettes must be sent in their respective envelopes along with the certification letters. **Please send this information via certified mail, return receipt requested, to the respective destinations before the July 1, 2006 deadline.**

A file copy of the SARA Section 313 Report is enclosed for your facility's records. Please review the report, sign where indicated, and file in the facility's compliance manual as documentation of filing for the 2005 reporting year.

If you have any questions, please contact me at kwilson@uscompliance.com or (952) 252-3000 x145.

Regards,

Kaija L. Wilson
Environmental Specialist

Enclosure

United States Compliance Corporation
301 Carlson Parkway • Suite 200 • Minnetonka MN 55305 • Phone 952 252 3000 • Fax 952 252 3001
www uscompliance com

Form Approved OMB Number 2070-0093
Approval Expires 1/31/2006

(IMPORTANT: Type or print; read instructions before completing form)

File Copy -- Do Not Submit to EPA

EPA United States Environmental Protection Agency

FORM R

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Ammonia

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P O Box 1513, Lanham, MD 20703-1513 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2004

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2 2; Attach substantiation forms) [X] NO (Do not answer 2.2, Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report

Name and official title of owner/operator or senior management official:	Signature	Date Signed.
Bob Brown General Manager		06/17/2005

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name	TRI Facility ID Number: 90670TCHMP9028D
-SoCal Inc	Facility or Establishment Name or Mailing Address (if different from street address)
Street: 9028 Dice Road	Mailing Address: NA
City/County/State/Zip Code: Sante Fe Springs, Los Angeles, CA 90670	City/State/Zip Code / Country (Non-US)

4.2 This report contains information for (Important check a or b, check c or d if applicable) a [X] An entire facility b. [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

4.3	Technical Contact Name	Derrell Johnson				Telephone Number (include area code) (562) 946-6427		
	Email Address	NA						
4.4	Public Contact Name	United States Compliance Corp.				Telephone Number (include area code) (952) 252-3000		
4.5	SIC Code (s) (4 digits)	Primary a. 2841	b.	c.	d	e.	f	
4.6	Latitude	Degrees 33	Minutes 57	Seconds 26	Longitude	Degrees 118	Minutes 03	Seconds 56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D No) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc.
	Parent Company's Dun & Bradstreet Number	NA [X]	

File Copy - Do Not Submit to EPA

EPA FORM R

TRI Facility ID Number: 00707CHMF9026

Toxic Chemical, Category or Generic Name: Ammonia

PART II. CHEMICAL - SPECIFIC INFORMATION

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7664-41-7
1.2	Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list.)
	Ammonia
1.3	Generic Chemical Name (Important Complete only if Part 1, Section 2.1 is checked "Yes" Generic Name must be structurally descriptive.)
	NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import		
If produce or import.	a. ☐ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☒ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e. ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA ☐	1	E	
5.2	Stack or point air emissions	NA ☐	81	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐ and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes. A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL- SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 90670CHMF3028D

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X		
5.4.2	Underground Injection onsite to Class II-V Wells	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal		0	M

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B. 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B.	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No.)	NA							
Off-Site Location Name	NA								
Off-site Address									
City		State		County		Zip		Country (Non-US)	

location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 89701CHLRF3028D

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]								c Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b	1	A03	2	NA				7A.1c	7A.1d	7A.1e
A		3		4		5			02	99 %	Yes ☐ No ☒
		6		7		8					
7A.2a	7A.2b	1		2					7A.2c	7A.2d	7A.2e
		3		4		5				%	Yes ☐ No ☐
		6		7		8					
7A.3a	7A.3b	1		2					7A.3c	7A.3d	7A.3e
		3		4		5				%	Yes ☐ No ☐
		6		7		8					
7A.4a	7A.4b	1		2					7A.4c	7A.4d	7A.4e
		3		4		5				%	Yes ☐ No ☐
		6		7		8					
7A.5a	7A.5b	1		2					7A.5c	7A.5d	7A.5e
		3		4		5				%	Yes ☐ No ☐
		6		7		8					

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6.2/7A page number in this box: ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds; C= 500 - 999 pounds.

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION CONTINUED

TRI Facility ID Number: [illegible]

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [R99] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	100	82	82	82
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	8203	4319	4319	4319
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	141	154	154	154
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	1.09			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box) Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

Form Approved OMB Number 2070-0093
Approval Expires: 1/31/2006

(IMPORTANT: Type or print; read instructions before completing form)

TRI Copy - DO NOT Submit TO EPA

EPA United States Environmental Protection Agency

FORM R

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number: 90670TCHMP9028D

Toxic Chemical, Category or Generic Name: Chlorine

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P.O Box 1513, Lanham, MD 20703-1513 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2004

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] NO (Do not answer 2.2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report

Name and official title of owner/operator or senior management official	Signature	Date Signed
Bob Brown General Manager		06/17/2005

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name: KIK-SoCal Inc.

Facility or Establishment Name or Mailing Address (if different from street address):

Street: 9028 Dice Road

Mailing Address: NA

City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670

City/State/Zip Code:

Country (Non-US):

4.2 This report contains information for (Important check a or b, check c or d if applicable) a [X] An entire facility b. [ ] Part of a facility c [ ] A Federal facility d. [ ] GOCO

4.3	Technical Contact Name	Derrell Johnson					Telephone Number (include area code) (562) 946-6427	
	Email Address	NA						
4.4	Public Contact Name	United States Compliance Corp					Telephone Number (include area code) (952) 252-3000	
4.5	SIC Code (s) (4 digits)	Primary a. 2841	b.	c.	d.	e.	f.	
4.6	Latitude	Degrees 33	Minutes 57	Seconds 26	Longitude	Degrees 118	Minutes 03	Seconds 56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D No) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc
2	Parent Company's Dun & Bradstreet Number	NA [X]	

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number: 20774CHMFR9026

Toxic Chemical, Category or Generic Name: Chlorine

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category): 7782-50-5

1.2 Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list): Chlorine

1.3 Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive): NA

1.4 **Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.**
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation): NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical	3.3 Otherwise use the toxic chemical.
a. ☐ Produce b. ☐ Import		
If produce or import	a. ☒ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☐ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e. ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 05 (Enter two-digit code from instruction package)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions ☐ NA	2	E	
5.2	Stack or point air emissions ☐ NA	0	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
	Stream or Water Body Name			
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

TRI Facility ID Number: 90670CHNFR9028D

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X		
5.4.2	Underground Injection onsite to Class II-V Wells	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal		0	M

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B. 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B.	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No.)	NA						
Off-Site Location Name	NA						
Off-site Address							
City		State		County		Zip	Country (Non-US)

location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 90707CHLOR9028D

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b: 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes ☐ No ☐
7A.2a	7A.2b: 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes ☐ No ☐
7A.3a	7A.3b: 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes ☐ No ☐
7A.4a	7A.4b: 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes ☐ No ☐
7A.5a	7A.5b: 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes ☐ No ☐

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6.2/7A page number in this box: ☐ *(example: 1,2,3, etc.)*

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: [illegible]

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	1	2	2	2
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	1.19			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, *enter "NA" in Section 8.10.1 and answer Section 8.11*

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box) Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

Signature Certification for U.S. EPA Diskette Submission

DISK

KIK-SOCAL INC.
9028 DICE ROAD
SANTE FE SPRINGS, CA 90670
90670TCHMP9028D

June 9, 2005

TRI Data Processing Center
c/o Computer Sciences Corportation
Suite 300
8400 Corporate Drive
Landover, MD 20785

(301) 429-5005

To Whom It May Concern:

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC.

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990.

We are submitting a total of 2 chemical report(s) for our facility.

These 2 chemical report(s) are described below:

TRI Chemical or Chemical Category	Reporting Year	CAS Number	Report
Ammonia	2004	7664-41-7	Form R
Chlorine	2004	7782-50-5	Form R

Our technical point of contact is:

DERRELL JOHNSON
(562) 946-6427
NA

and is available should any questions or problems arise in the processing of this diskette

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s)

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372.27(a) did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed or otherwise used in an amount not exceeding 1 million pounds during the reporting year.

Sincerely,

BOB BROWN
GENERAL MANAGER

Enclosure: Diskette

Signature Certification for State Diskette Submission

DISK

KIK-SOCAL INC.
9028 DICE ROAD
SANTE FE SPRINGS, CA 90670
90670TCHMP9028D

June 9, 2005

Dept of Toxic Substance Control
Attn: Office of Environmental Information
□ Management
1001 I Street, 8th Floor
Sacramento, CA 95812

To Whom It May Concern:

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC.

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990.

We are submitting a total of 2 chemical report(s) for our facility.

These 2 chemical report(s) are described below:

TRI Chemical or Chemical Category	Reporting Year	CAS Number	Report
Ammonia	2004	7664-41-7	Form R
Chlorine	2004	7782-50-5	Form R

Our technical point of contact is:

DERRELL JOHNSON
(562) 946-6427
NA

and is available should any questions or problems arise in the processing of this diskette.

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s).

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372.27(a) did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed or otherwise used in an amount not exceeding 1 million pounds during the reporting year.

Sincerely,

BOB BROWN
GENERAL MANAGER

Enclosure Diskette

KIK So-Cal (KIKS02) RY: 2004

Product Name	Density (lbs/gal)	Solid, Liquid, or Gas	Constituents	CAS #	%	Maximum Amount Stored	Average Amount Stored	Annual Usage
Acetylene	7 56 lbs/cuft	Gas				166,740	85,507	320,632
Ammonia (Household)	8 18	Liquid				229,040	163,600	7,678,418
Ammonia (Household)			Ammonia	1336-21-6	2 0%			
Anti Freeze Summer Coolant	9 47	Liquid				521	313	947
Anti Freeze Summer Coolant			Ethanediol	107-21-1	95 0%	495	297	900
Aqua Ammonia	7 481	Liquid				48,080	32,720	497,074
Aqua Ammonia			Ammonia	7664-41-7	29 0%	13,943	9,489	144,151
Argon	0 103 lbs/cuft	Gas				3	3	0
Bleach & Ammonia Product Fragrances	8 73	Liquid				10,750	6,722	4,028
Carbon Dioxide	0 114 lbs/cuft					0	0	0
Caustic Soda 50%	12 68	Liquid				2,916,400	126,800	44,880,570
Caustic Potash 50%	12 1	Liquid				145,200	96,800	188,980
Chlorine	12 24	Gas				900,000	540,000	18,546,900
Chlorine			Chlorine	7782-50-5	100 0%	900,000	540,000	18,546,900
DGC Win Surf (Aqueous Synthetic Detergent	NO MSDS	Liquid						
Dyes	NO MSDS	Solid				25	23	N/A
Helium	010 sg							
Hydrogen Peroxide	9 98	Liquid				99,810	49,900	250,000
Multi Gear Oil API GL-S SAE 85 W150	NO MSDS	Liquid						
Nitrogen	0 0724 lbs/cuft	Gas				264	22	10,800
Oxygen	0 082 lbs/cuft	Gas				61	29	103,448
Phosphonic Acid	13 2	Liquid				726	594	94
Potassium Hypochlorite	9 6	Liquid				57,600	914,709	878,112
Propane	095 lbs/cuft	Gas				1,731	1,039	69,804
Propane			Propylene	115-07-1	1 0%	17	10	698
Rain Clean Type Fragrance	8 73					0	0	0
Soda Ash	21 1	Solid				2,000	500	8,250
Sodium Hypochlorite	9 6	Liquid				1,996,176	1,996,176	231,937,860
Styrene/Acrylic Emulsion Polymer		Liquid				55	N/A	N/A
Surfonic N-102	8 35	Liquid				100,200	41,750	0
Surfonic N-102			Poly (Oxy-1,2-Eth	9016-45-9	100 0%	100,200	41,750	0
Surfonic N-60		Liquid						
			Glycol Ethers	N230	10 0%	0	0	0
T-10FS Hydrochloric Acid Solution	11 14	Liquid				2,451	1,225	0
T-10FS Hydrochloric Acid Solution			Hydrochloric Acid	7647-01-0	100 0%	2,451	1,225	0
Versonal ® 120 Cleating Agent	10 77					1,185	592	3,000
Versene 100	1 31 sg	Liquid				2,405	N/A	N/A
#2 Diesel Fuel	7 05	Liquid				869	799	2,904
			No 2 Fuel Oil	68476-30-	100%	869	799	2904
			Napthalene	91-20-3	0 10%	0 869	0 799	2 904
			Benzo(g,h,i)peryler	191-24-2	0 0000050%	0 00004345	0 00003995	0 0001452
			Polycyclic Aromatic Com	N590	0 00%	0 00869	0 00799	0 02904
			Mercury Compound	N458	0 00000010%	0 000000869	0 000000799	0 000002904

KIK So-Cal (KIKS02) RY: 2004

Chemical Name	CAS #	%	Usage	Total Used	Threshold Exceeded
Propylene	115-07-1	1.0%	698 04	698.04	No
Chlorine	7782-50-5	100.0%	18546900	18546900	Yes
Ammonia	7664-41-7	29.0%	144151.46	14415.146	No
Ethanediol	107-21-1	95.0%	899 65	899.65	No

Form Approved OMB Number 2070-0093
Approval Expires: 1/31/2006

(IMPORTANT: Type or print; read instructions before completing form)

File Copy - Do Not Submit to EPA

EPA United States Environmental Protection Agency

FORM R

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Ammonia

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P.O Box 1513, Lanham, MD 20703-1513 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2003

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2.2, Attach substantiation forms) [X] NO (Do not answer 2.2, Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report

Name and official title of owner/operator or senior management official	Signature	Date Signed
Bob Brown General Manager		06/30/2004

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name	Facility or Establishment Name or Mailing Address (if different from street address)
KIK-SoCal Inc.	
Street	**Mailing Address**
9028 Dice Road	NA
City/County/State/Zip Code	**City/State/Zip Code** / **Country (Non-US**
Sante Fe Springs Los Angeles CA 90670	

4.2 This report contains information for (Important. check a or b, check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

4.3	Technical Contact Name: Derrell Johnson	Telephone Number (include area code): (562) 946-6427	
	Email Address: NA		
4.4	Public Contact Name: United States Compliance Corp.	Telephone Number (include area code): (952) 252-3000	

4.5 SIC Code (s) (4 digits)	Primary	b.	c.	d.	e.	f.
	a. 2841					

4.6	Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
		33	57	26		118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	**4.8** EPA Identification Number (RCRA I D No) (12 characters)	**4.9** Facility NPDES Permit Number(s) (9 characters)	**4.10** Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number: 07[illegible]9028[illegible]

Toxic Chemical, Category or Generic Name: Ammonia

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category): 7664-41-7
1.2	Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list): Ammonia
1.3	Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes". Generic Name must be structurally descriptive): NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation): NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import		
If produce or import:	a. ☐ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☒ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e. ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 [04] (Enter two-digit code from instruction package)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions ☐ NA	2	M	
5.2	Stack or point air emissions ☐ NA	98	M	
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
	Stream or Water Body Name			
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐ and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

TRI Facility ID Number: 90670CLNFS3028S

PART II. CHEMICAL- SPECIFIC INFORMATION (CONTINUED)

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
	POTW Address						
City		State		County		Zip	
6.1.B	POTW Name						
	POTW Address						
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example. 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No.)	NA						
Off-Site Location Name	NA						
Off-site Address							
City		State		County		Zip	Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 50170CHLRP5028

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b: 1 A03, 2 NA; 3, 4, 5, 6, 7, 8	7A.1c	7A.1d	7A.1e
A		02	0 01 %	Yes X / No
7A.2a	7A.2b: 1, 2, 3, 4, 5, 6, 7, 8	7A.2c	7A 2d	7A 2e
			%	Yes / No
7A.3a	7A.3b: 1, 2, 3, 4, 5, 6, 7, 8	7A.3c	7A.3d	7A 3e
			%	Yes / No
7A.4a	7A 4b: 1, 2, 3, 4, 5, 6, 7, 8	7A.4c	7A.4d	7A.4e
			%	Yes / No
7A.5a	7A.5b: 1, 2, 3, 4, 5, 6, 7, 8	7A.5c	7A.5d	7A.5e
			%	Yes / No

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6.2/7A page number in this box: ☐ *(example: 1,2,3, etc.)*

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy Do Not Submit to EPA

EPA FORM R

PART II CHEMICAL SPECIFIC INFORMATION CONTINUED

TRI Facility ID Number	
90277CHMLB9029	
Toxic Chemical, Category, or Generic Name	
Ammonia	

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [R99] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	382	100	90	90
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	6410	8203	7383	7383
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	250	141	127	127
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with productionprocesses (pounds/year)			NA	
8.9	Production ratio or activity index			0.56	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c
8.10.2		a.	b.	c.
8.10.3		a.	b.	c
8.10.4		a	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box) Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds report in grams/year

Form Approved OMB Number:2070-0093
Approval Expires 1/31/2006

(IMPORTANT: Type or print, read instructions before completing form)

EPA File Copy -- DO NOT Submit FORM R to EPA

United States Environmental Protection Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Chlorine

WHERE TO SEND COMPLETED FORMS: 1. TRI Data Processing Center, P O Box 1513, Lanham, MD 20703-1513 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2003

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2 2; Attach substantiation forms) [X] NO (Do not answer 2 2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report

Name and official title of owner/operator or senior management official:	Signature.	Date Signed
Bob Brown General Manager		06/30/2004

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name: KIK-SoCal Inc.

Facility or Establishment Name or Mailing Address (if different from street address):

Street: 9028 Dice Road

Mailing Address: NA

City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670

City/State/Zip Code: Country (Non-US):

4.2 This report contains information for (Important. check a or b, check c or d if applicable) a [X] An entire facility b. [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

4.3	Technical Contact Name	Derrell Johnson				Telephone Number (include area code) (562) 946-6427	
	Email Address	NA					
4.4	Public Contact Name	United States Compliance Corp.				Telephone Number (include area code) (952) 252-3000	
4.5	SIC Code (s) (4 digits)	Primary a. 2841	b	c.	d.	e.	f.
4.6	Latitude	Degrees 33	Minutes 57	Seconds 26	Longitude	Degrees 118	Minutes 03	Seconds 56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D No) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number
00776CHMN9026
Toxic Chemical, Category or Generic Name
Chlorine

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category)
	7782-50-5
1.2	*Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list)*
	Chlorine
1.3	Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive)
	NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important. Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical.	3.3 Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import		
If produce or import	a. ☒ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☐ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e. ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	05	(Enter two-digit code from instruction package)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA ☐	1	E	
5.2	Stack or point air emissions	NA ☐	0	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 61070CHMTF9028D

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal		0	M

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
	POTW Address						
	City		State		County		Zip

6.1.B	POTW Name						
	POTW Address						
	City		State		County		Zip

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No.)	NA							
	Off-Site Location Name	NA							
	Off-site Address								
	City		State		County		Zip		Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 62707CHLTF9028D

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☒ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b: 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes ☐ No ☐
7A.2a	7A.2b: 1 2 3 4 5 6 7 8	7A 2c	7A.2d %	7A.2e Yes ☐ No ☐
7A.3a	7A.3b: 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes ☐ No ☐
7A.4a	7A.4b: 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A 4e Yes ☐ No ☐
7A.5a	7A.5b: 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A 5e Yes ☐ No ☐

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6 2/7A page number in this box: ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 30[illegible]9029

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	1	1	1	1
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with productionprocesses (pounds/year)			NA	
8.9	Production ratio or activity index			0 98	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8.11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c
8.10.2		a.	b.	c.
8.10 3		a.	b.	c
8.10 4		a	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box) — Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

Signature Certification for State Diskette Submission

KIK-SOCAL INC.
9028 DICE ROAD
SANTE FE SPRINGS, CA 90670
90670TCHMP9028D

June 22, 2004

Coordinator
Department of Toxic Substance Control
Attn. Office of Environmental Information Management
1001 I Street, 8th Floor
Sacramento, CA 95812-0806

To Whom It May Concern

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990

We are submitting a total of 2 chemical report(s) for our facility.

These 2 chemical report(s) are described below:

TRI Chemical or Chemical Category	Reporting Year	CAS Number	Report
Ammonia	2003	7664-41-7	Form R
Chlorine	2003	7782-50-5	Form R

Our technical point of contact is:

DERRELL JOHNSON
(562) 946-6427
NA

and is available should any questions or problems arise in the processing of this diskette.

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s).

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372.27(a) did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed or otherwise used in an amount not exceeding 1 million pounds during the reporting year.

Sincerely,

90670TCHMP9028D
KIK-SOCAL INC.

BOB BROWN
GENERAL MANAGER

Enclosure: Diskette

United States Compliance Corporation

2003

SARA Assessment

for

KIK-SoCal Inc.

United States Compliance Corporation
301 Carlson Parkway • Suite 200 • Minnetonka, MN 55305 • Phone 952.252.3000 • Fax 952.252 3001
www.uscompliance com

United States Compliance

September 13, 2004

Derrell Johnson
KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

Re: 2003 SARA Assessment

Dear Derrell Johnson:

Enclosed, please find the 2003 SARA Assessment for KIK-SoCal Inc.. The SARA Assessment was completed based upon information provided by your facility.

KIK-SoCal Inc. was required to report the 2003 Hazardous Material Business Plan and the 2003 SARA Section 313 Toxic Chemical Release Inventory (Form R); copies of the reports were previously submitted to your attention.

This SARA Assessment provides documentation that KIK-SoCal Inc. did meet the requirements necessary to report for the 2003 Hazardous Material Business Plan and the SARA Section 313 Toxic Chemical Release Inventory (Form R). Please file the 2003 SARA Assessment in the facility's Compliance Manual.

If you have any questions, please contact me by telephone at (952) 252-3000 ext. 134.

Sincerely,

T Manders

Tricia Manders
Environmental Specialist
SARA Department

Enclosure

4

United States Compliance Corporation
301 Carlson Parkway • Suite 200 • Minnetonka MN 55305 • Phone 952 252 3000 • Fax 952 252 3001
www uscompliance com

KIK-SoCal Inc.
SARA 2003

Product / Chemical Constituent		Maximum Storage (lbs.) / Percent of Chemical In Product		Average Storage (lbs.)	Annual Pounds Used
Acetylene (7.56 #/cuft)		22055.5 cuft		11310.5cuft	42411.6 cuft
Ammonia (Household) (8.18 #/g)		229,040		163,600	10,119,011
(1336-21-6)	Ammonia		2.5%		252,975
Anti Freeze Summer Coolant (9.47 #/g)		521		313	947
(107-21-1)	Ethanediol		95.0%		900
Aqua Ammonia (8.18 #/g) (l)		48,080		32,720	741,769
(7664-41-7)	Ammonia	*311/312: C*	29.0%		215,113
Argon (0.103#/cu ft)(g)		3		3	0
Bleach & Ammonia Product Fragrances (8.73 #/g)		9,603 *311/312:F*		6,722	4,508
					NA
Carbon Dioxide (0.114#/cu ft)(g)		0		0	0
Caustic Soda 50% (12.68 #/g) (l)		2,916,400 *311/312: A, C*		126,800	32,812,038
Caustic Potash 50% (12.1#/gal) (l)		145,200		96,800	334,780
Chlorine (12.24 #/g)		900,000		13,792,833	16,755,947
(7782-50-5)	Chlorine	*SARA 302: Chlorine* *311/312: A,C,R,P*	100.0%		16,755,947
DGC WinSurf (Aqueous Synthetic Detere	*MSDS Unavailable*	440 gal		N/A	N/A
Dyes	*MSDS Unavailable*	25		N/A	N/A

Helium (s.g. .010)	300 cu.ft. *311/312: P*	N/A	N/A
Hydrogen Peroxide (9.98 #/g)	99,810	49,900	66,866
Multi Gear Oil API GL-S SAE 85 W150 *MSDS Unavailable*	330 gal	N/A	N/A
Nitrogen (0.0724#/cu ft)(g)	264	22	10,800
Oxygen (0.082 #/cu ft)(g)	61	29	103,448
Phosphoric Acid (13.2#/g)	726	594	55
Potassium Hypochlorite (9.60#/gal) (l)	57,600	19,200	523,487
Propane (0.095#/cu ft (l) (115-07-1) Propylene	1,731	1,039 1.0%	69,804 698
Rain Clean Type Fragrance (8.73#/g) (trade secret)	0	0	0
Soda Ash (21.1 #/g)	2,000	500	7,000
Sodium Hypochlorite 13% (9.6 #/g)	N/A *311/312:A,C*	N/A	29,628,969
Sodium Hypochlorite 10% (9 6 #/g)	N/A *311/312:A,C*	N/A	14,220,969
Sodium Hypochlorite 5% (9.6 #/g)	N/A *311/312:A,C*	N/A	78,845,078
Sodium Hypochlorite 3%, 6%, 7% (9.6 #/g)	N/A *311/312:A,C*	N/A	159,135,993
Sodium Hypochlorite TOTAL (9.6 #/g)	1,996,176 *311/312.A,C*	1,996,176	281,831,009
Styrene/Acrylic Emulsion Polymer	55 *311/312: A,C*	N/A	N/A

Surfonic N-102 (8.35 3/g)		100,200		41,750	0
(9016-45-9)	Poly (Oxy-1,2-Ethnaedıyl) ALPH		100.0%		0
Surfonic N-60 (Nonionic Surfactant-Alkyi		1100 gal *311/312. A,C*		N/A	N/A
T-1010FS Hydrochloric Acid Solution (11.14 #/g)		2,451		1,225	8,912
(7647-01-0)	Hydrochloric Acid		100.0%		8,912
Versonal ® 120 Cleating Agent (10.77 #/g)		1,185		592	3,000
Versene 100 (s.g. 1.31)		220 gal *311/312· A,C*		N/A	N/A
#2 Diesel Oil 7.05 #/gal		869		799	2,904
68476-30-2	No. 2 Fuel Oil		100%		2904
91-20-3	Napthalene		0.10%		0.00
191-24-2	Benzo(g,h,I)perylene		5.0E-6%		0.0001452
N590	Polycyclic Aromatic Compounds		0.001%		0.00
N458	Mercury Compounds		1.0E-7%		1.452E-13
313 By-products of Combustion				gallons used	412
N150	Dioxin-like compounds		3.22E-11 lb/gal		0.00
N458	Mercury		1.13E-07 lb/gal		0.00
191-24-2	Benzo(g,h,I)perylene		2.26E-09 lb/gal		0.00
N590	Polycyclic Aromatic Compounds		1.65E-08 lb/gal		0.00
N420	Lead		1.51E-06 lb/gal		0.00
		311/312 A, C, F			

KIK-SoCal Inc.
Chemical Thresholds
SARA 2003

Chemical	Product		Annual Pounds Used
Ammonia (7664-41-7):			
	Aqua Ammonia		215,113
	Household Ammonia		252,975
			468,088
	Only 10% of Total Aqueous Ammonia is Reportable		46,809
		Total for 2003:	46,809
		SARA 313 Threshold Exceeded for 2003	
Benzo (g.h.I)perylene (191-24-2):			
	#2 Diesel Oil		0
	#2 Diesel Oil	313 By-products of Combustion	0
		Total for 2003:	0
		SARA 313 Chemical Threshold Not Exceeded	
Chlorine (7782-50-5):			
	Chlorine		16,755,947
		Total for 2003:	16,755,947
		SARA 313 Threshold Exceeded for 2003	
Dioxin-like Compounds (N150)			
	#2 Diesel Oil	313 By-products of Combustion	0
		Total for 2003:	0
		SARA 313 Chemical Threshold Not Exceeded	

Ethylene Glycol (107-21-1):

Anti Freeze Summer Coolant		900
	Total for 2003:	900

SARA 313 Chemical Threshold Not Exceeded

Hydrochloric Acid (7647-01-0):

T-1010FS Hydrochloric Acid Solution		8,912
	Total for 2003:	8,912

SARA 313 Chemical Threshold Not Exceeded

Lead (N420)

#2 Diesel Oil	313 By-products of Combustion	0
	Total for 2003:	0

SARA 313 Chemical Threshold Not Exceeded

Mercury Compounds (N458):

#2 Diesel Oil		0
#2 Diesel Oil	313 By-products of Combustion	0
	Total for 2003:	0

SARA 313 Chemical Threshold Not Exceeded

Napthalene (91-20-3)

#2 Diesel Oil		0
	Total for 2003:	0

SARA 313 Chemical Threshold Not Exceeded

Polycyclic Aromatic Compounds (N590)

#2 Diesel Oil		0
#2 Diesel Oil	313 By-products of Combustion	0
	Total for 2003:	0

SARA 313 Chemical Threshold Not Exceeded

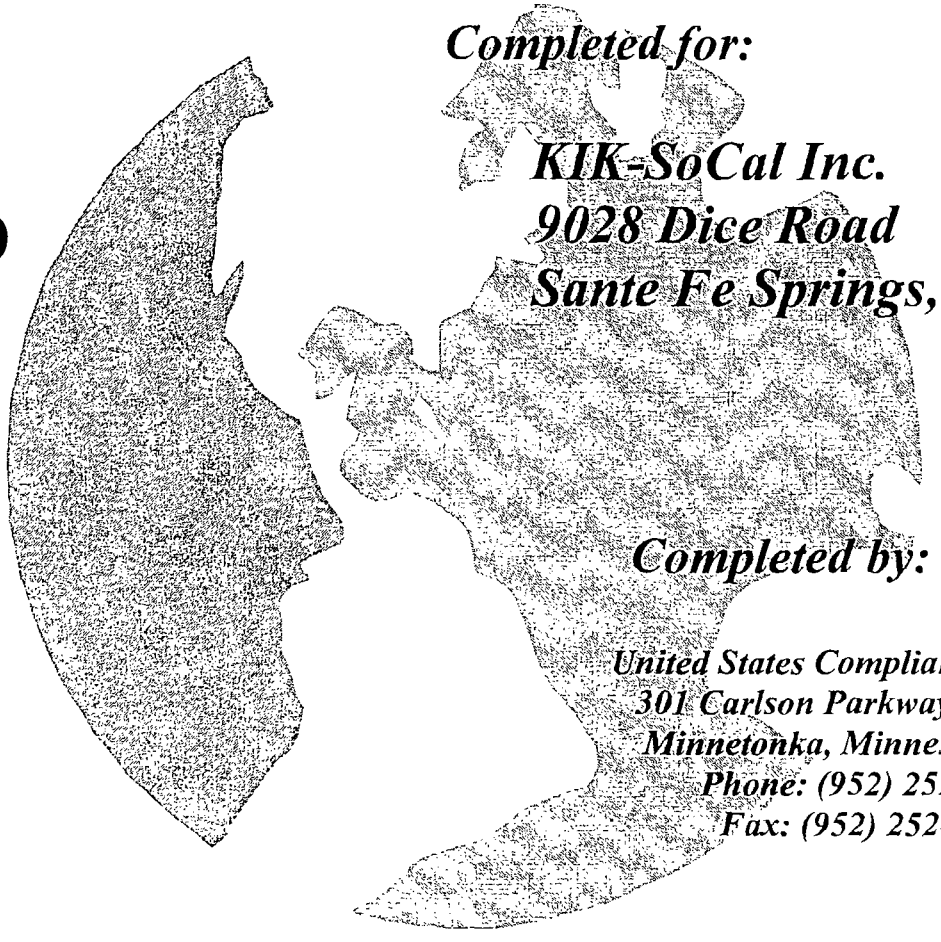
Propylene (115-07-1):

Propane		698
	Total for 2003:	698

SARA 313 Chemical Threshold Not Exceeded

United States Compliance Corporation

2002 SARA Booklet

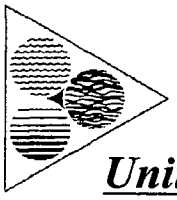


Completed for:

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

Completed by:

United States Compliance Corporation
301 Carlson Parkway, Suite 200
Minnetonka, Minnesota 55305
Phone: (952) 252-3000
Fax: (952) 252-3001



United States Compliance Corporation

SARA 2002

Chemical Inventory

KIK-SoCal Inc.
SARA 2002

Product	Chemical Constituent	Maximum Storage (lbs.)	Percent of Chemical In Product	Average Storage (lbs.)	Annual Pounds Used
Acetylene		22,056		11,311	42,412
(7.56 #/g)					
(74-86-2)	Acetylene		100.0%		42,412
Ammonia (Household)		229,040		163,600	194,859,136
(8.18 #/g)					
(1336-21-6)	Ammonia		2.5%		4,871,478
Anti Freeze Summer Coolant		521		313	947
(9.47 #/g)					
(107-21-1)	Ethanediol		95.0%		900
Aqua Ammonia		49,069		32,720	1,037,560
(8.18 #/g) (l)					
(7664-41-7)	Ammonia		29.0%		300,892
	SARA 311/312: Chronic				
Argon		26		26	0
(0.103#/cu ft)(g)					
(7440-37-1)	Argon		100.0%		0
Bleach & Ammonia Product Fragr		3,361		6,722	4,508
(8.73 #/g)					
(trade secret)					NA
	SARA 311/312: Acute, Fire				

Carbon Dioxide		0	0	0
(0.114#/cu ft)(g)				
(124-38-9)	Carbon Dioxide	100.0%		0
Caustic Soda 50%		253,680	126,800	39,008,856
(12.68 #/g) (l)				
(1310-73-2)	Sodium Hydroxide	50.0%		19,504,428

SARA 311/312: Acute, Chronic

Caustic Potash 50%		145,200	96,800	0
(12.1#/gal) (l)				
7732-18-5	Potassium Hydroxide	50.0%		
Chlorine		177,336,426	13,792,833	16,558,800
(12.24 #/g)				
(7782-50-5)	Chlorine	100.0%		16,558,800

SARA 302: Chlorine
SARA 311/312: Acute, Chronic, Pressure, Reactive

Hydrogen Peroxide		99,810	49,900	66,866
(9.98 #/g)				
(7722-84-1)	Hydrogen Peroxide	50.0%		33,433
Nitrogen		264	22	10,800
(0.0724#/cu ft)(g)				
(7727-37-9)	Nitrogen	100.0%		10,800
Oxygen		51,526	24,140	103,448
(0.082 #/cu ft)(g)				
(7782-44-7)	Oxygen	100.0%		103,448

Phosphoric Acid (13.2#/g)		55		45	55
(7664-38-2)	Phosphoric Acid		75.0%		41
Potassium Hypochlorite (9.60#/gal] (l)		57,600		19,200	0
(7778-66-7)	Potassium Hypochlorite		15.0%		0
Propane (0.095#/cu (l)		580,968		348,944	69,804
(74-98-6)	Propane		97.0%		67,710
(74-84-0)	Ethane		1.0%		698
(115-07-1)	Propylene		1.0%		698
(106-97-8)	Butane		1.0%		698
Rain Clean Type Fragrance (8.73#/g) (trade secret)		0		0	0
Soda Ash (21.1 #/g)		2,000		500	7,000
(497-19-8)	Sodium Carbonate		99.8%		6,986
Sodium Hypochlorite (9.6 #/g)		1,996,176		1,996,176	123,526,435
(7681-52-9)	Sodium Hypochlorite		13.0%		16,058,437
(1310-73-2)	Sodium Hydroxide		0.5%		617,632

SARA 311/312: Acute, Chronic

Surfonic N-102 (8.35 3/g)		58,415		41,750	0
(9016-45-9)	Poly (Oxy-1,2-Ethnaediyl) ALPH		100.0%		0

T-1010FS Hydrochloric Acid Soluti (11.14 #/g)		2,451		1,225	8,912
(7647-01-0)	Hydrochloric Acid		100.0%		8,912
Versonal ® 120 Cleating Agent (10.77 #/g)		1,181		592	3,000
(139-89-9)	Trisodium		38.0%		1,140
(62099-15-4)	Disodium		2.0%		60
(1310-73-2)	Trisodium nitrilotriacetate		1.0%		30
(2836-32-0)	Sodium hydroxide		2.0%		60
(7732-18-5)	Sodium glycolate		56.0%		1,680

#2 Diesel Fuel		799		799	2,904
7.05 #/gal					
68476-30-2	No. 2 Fuel Oil	100%			2904
91-20-3	Napthalene	0.10%			0.00
191-24-2	Benzo(g,h,I)perylene	5.0E-6%			0.0001452
N590	Polycyclic Aromatic Compounds	0.001%			0.00
N458	Mercury Compounds	1.0E-7%			1.452E-13
313 By-products of Combustion				gallons used	412
N150	Dioxin-like compounds	3.22E-11	lb/gal		0.00
N458	Mercury	1.13E-07	lb/gal		0.00
191-24-2	Benzo(g,h,I)perylene	2.26E-09	lb/gal		0.00
N590	Polycyclic Aromatic Compounds	1.65E-08	lb/gal		0.00
N420	Lead	1.51E-06	lb/gal		0.00

SARA 311/312: Acute, Chronic, Fire

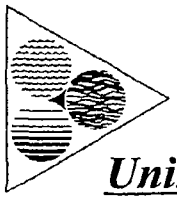
KIK-SoCal Inc.
Chemical Thresholds
SARA 2002

Chemical	Product	Annual Pounds Used
Ammonia (7664-41-7):		
	Aqua Ammonia	300,892
	Household Ammonia	4,871,478
	Only 10% of Total Aqueous Ammonia is Reportable	517,237
	Total for 2002:	517,237
	SARA 313 Threshold Exceeded for 2002	
Chlorine (7782-50-5):		
	Chlorine	16,558,800
	Total for 2002:	16,558,800
	SARA 313 Threshold Exceeded for 2002	
Ethylene Glycol (107-21-1):		
	Anti Freeze Summer Coolant	900
	Total for 2002:	900
	SARA 313 Chemical Threshold Not Exceeded	
Hydrochloric Acid (7647-01-0):		
	T-1010FS Hydrochloric Acid Solution	8,912
	Total for 2002:	8,912
	SARA 313 Chemical Threshold Not Exceeded	

Propylene (115-07-1):

Propane	698
Total for 2002:	698

SARA 313 Chemical Threshold Not Exceeded



United States Compliance Corporation

SARA 2002

Hazardous Materials Business Plan

According to the information provided, your facility completed its own 2002 Hazardous Materials Business Plan.

United States Compliance Corporation

SARA 2002

Toxic Chemical Release Inventory

United States Compliance

June 2, 2003

Derrell Johnson
KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

Re: 2002 SARA Form R Reporting

Dear Derrell Johnson:

Enclosed please find the 2002 Superfund Amendment Reauthorization Act (SARA) Section 313 (Form R) Report for KIK-SoCal Inc. and two diskettes for the State and Federal EPA. The 2002 Form R was completed by U.S. Compliance Corporation (U.S. Compliance) based upon information supplied by the facility.

Please review the hard copy of the report for accuracy. If any changes need to be made, please contact me. If everything appears to be accurate, **please have the facility's signing official sign and date the certification letters where indicated.** The diskettes must be sent in their respective envelopes along with the certification letters. **Please send this information via certified mail, return receipt requested to the respective destinations before the July 1, 2003 deadline.**

If you have any questions or concerns regarding this matter, feel free to contact me by telephone at (952) 252-3000 or by email at basleson@uscompliance.com.

Sincerely,

Brooke Asleson
Environmental Specialist
SARA Division

Enc.

Signature Certification for U.S. EPA Diskette Submission

KIK-SOCAL INC.
9028 DICE ROAD
SANTE FE SPRINGS, CA 90670
90670TCHMP9028D

June 2, 2003

TRI Data Processing Center
c/o Computer Sciences Corportation
Suite 300
8400 Corporate Drive
New Carrollton, MD 20785

(301) 429-5005

To Whom It May Concern.

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for

KIK-SOCAL INC.

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990

We are submitting a total of 2 chemical report(s) for our facility.

These 2 chemical report(s) are described below.

TRI Chemical or Chemical Category	Reporting Year	CAS Number	Report
Ammonia	2002	7664-41-7	Form R
Chlorine	2002	7782-50-5	Form R

Our technical point of contact is

DERRELL JOHNSON
(562) 946-6427
NA

and is available should any questions or problems arise in the processing of this diskette

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s)

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372.27(a) did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed or otherwise used in an amount not exceeding 1 million pounds during the reporting year.

Sincerely,

BOB BROWN
GENERAL MANAGER

Enclosure: Diskette

Signature Certification for State Diskette Submission

KIK-SOCAL INC
9028 DICE ROAD
SANTE FE SPRINGS, CA 90670
90670TCHMP9028D

June 2, 2003

California Environmental Protection Agency
Office of Environmental Information Management
400 P Street
Sacramento, CA 95812
Attn: Toxics Release Inventory

To Whom It May Concern

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC.

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990.

We are submitting a total of 2 chemical report(s) for our facility.

These 2 chemical report(s) are described below.

TRI Chemical or Chemical Category	Reporting Year	CAS Number	Report
Ammonia	2002	7664-41-7	Form R
Chlorine	2002	7782-50-5	Form R

Our technical point of contact is

DERRELL JOHNSON
(562) 946-6427
NA

and is available should any questions or problems arise in the processing of this diskette.

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s)

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372.27(a) did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed or otherwise used in an amount not exceeding 1 million pounds during the reporting year

Sincerely,

BOB BROWN
GENERAL MANAGER

Enclosure: Diskette

EPA United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P O Box 1513, Lantham, MD 20703-1513 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: -

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2002

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2 2, Attach substantiation forms) [X] NO (Do not answer 2 2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report

Name and official title of owner/operator or senior management official.	Signature	Date Signed
Bob Brown General Manager		06/13/2003

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name: KIK-SoCal Inc

Facility or Establishment Name or Mailing Address (if different from street address):

Street: 9028 Dice Road

Mailing Addres: NA

City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670

City/State/Zip Code:

Country (Non-US):

4.2 This report contains information for (Important check a or b, check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

4.3 Technical Contact Name: Derrell Johnson — Telephone Number (include area code): (562) 946-6427

Email Address: NA

4.4 Public Contact Name: United States Compliance Corp — Telephone Number (include area code): (952) 252-3000

4.5 SIC Code (s) (4 digits):

Primary	b	c.	d.	e	f.
a. 2841					

4.6

Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
	33	57	26		118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D No) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc.
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number: 90670TCHMP9028D

Toxic Chemical, Category or Generic Name: Ammonia

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category): 7664-41-7

1.2 Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list): Ammonia

1.3 Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive): NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA ☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important. DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation): NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical.	3.2 Process the toxic chemical.	3.3 Otherwise use the toxic chemical.
a. ☐ Produce b. ☐ Import		
If produce or import	a. ☐ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☒ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e. ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 05 (Enter two-digit code from instruction package)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions ☐ NA	2 8	M	
5.2	Stack or point air emissions ☐ NA	379	M	
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
	Stream or Water Body Name			
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5 3 are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3	Surface Impoundment	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6 1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No)	NA							
Off-Site Location Name	NA								
Off-site Address									
City		State		County		Zip		Country (Non-US)	

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2	2
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]							c Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A 1b	1	A03	2	NA			7A.1c	7A 1d	7A.1e
A	3	4		5				02	0 01 %	Yes X / No
	6	7		8						
7A.2a	7A.2b	1		2				7A 2c	7A.2d	7A.2e
	3	4		5					%	Yes / No
	6	7		8						
7A.3a	7A.3b	1		2				7A 3c	7A.3d	7A.3e
	3	4		5					%	Yes / No
	6	7		8						
7A.4a	7A.4b	1		2				7A.4c	7A.4d	7A.4e
	3	4		5					%	Yes / No
	6	7		8						
7A.5a	7A.5b	1		2				7A.5c	7A.5d	7A.5e
	3	4		5					%	Yes / No
	6	7		8						

If additional pages of Part II, Section 6 2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6.2/7A page number in this box: ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [R99] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	347	382	386	390
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	5041	6410	6538	6603
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	311	250	253	256
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			1 20	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8 11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8 10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8 11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box) Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

***Report releases pursuant to EPCRA Section 329 (8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment " Do not include any quantity treated onsite

Form Approved OMB Number. 2070-0093
Approval Expires 10/31/2003

(IMPORTANT Type or print, read instructions before completing form)

EPA
United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P O Box 1513, Lantham, MD 20703-1513 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2002

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2 2; Attach substantiation forms) [X] NO (Do not answer 2 2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report

Name and official title of owner/operator or senior management official	Signature	Date Signed
Bob Brown General Manager		06/13/2003

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name	Facility or Establishment Name or Mailing Address (if different from street address)
KIK-SoCal Inc.	
Street: 9028 Dice Road	Mailing Addres: NA
City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670	City/State/Zip Code: Country (Non-US)

4.2 This report contains information for (Important check a or b, check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

4.3	Technical Contact Name: Derrell Johnson	Telephone Number (include area code): (562) 946-6427	
	Email Address: NA		
4.4	Public Contact Name: United States Compliance Corp	Telephone Number (include area code): (952) 252-3000	

4.5 SIC Code (s) (4 digits)

Primary	b	c.	d.	e.	f.
a. 2841					

4.6 Latitude / Longitude

Latitude Degrees	Latitude Minutes	Latitude Seconds	Longitude Degrees	Longitude Minutes	Longitude Seconds
33	57	26	118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	**4.8** EPA Identification Number (RCRA I D No) (12 characters)	**4.9** Facility NPDES Permit Number(s) (9 characters)	**4.10** Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Chlorine

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category)
7782-50-5

1.2 Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list)
Chlorine

1.3 Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive)
NA

1.4 **Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.**
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA [ ]																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important. Maximum of 70 characters, including numbers, letters, spaces, and punctuation)
NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical	3.2 Process the toxic chemical	3.3 Otherwise use the toxic chemical
a. [ ] Produce b. [ ] Import		
If produce or import	a. [X] As a reactant	a [ ] As a chemical processing aid
c. [ ] For on-site use/processing	b. [ ] As a formulation component	b. [ ] As a manufacturing aid
d. [ ] For sale/distribution	c. [ ] As an article component	c. [ ] Ancillary or other use
e. [ ] As a byproduct	d. [ ] Repackaging	
f. [ ] As an impurity	e. [ ] As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 08 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions NA [ ]	1 38	M	
5.2	Stack or point air emissions NA [X]			
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
	Stream or Water Body Name			
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box [ ]
and indicate the Part II, Section 5 3 page number in this box. [ ] (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Chlorine

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3	Surface Impoundment	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6 1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example. 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No)	NA						
Off-Site Location Name	NA						
Off-site Address							
City		State		County		Zip	Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Chlorine

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b: 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes ☐ No ☐
7A.2a	7A.2b: 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes ☐ No ☐
7A.3a	7A.3b: 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes ☐ No ☐
7A.4a	7A.4b: 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes ☐ No ☐
7A.5a	7A.5b: 1 2 3 4 5 6 7 8	7A.5c	7A 5d %	7A.5e Yes ☐ No ☐

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 6.2/7A page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Chlorine

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

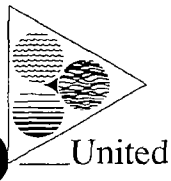
		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	1	1 38	1 38	1 38
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			1 08	

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8 11			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.
8.11	Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box)			Yes [ ] No [X]

EPA Form 9350-1 (Rev 03/2003) - Previous editions are obsolete

*For Dioxin or Dioxin-like compounds, report in grams/year

***Report releases pursuant to EPCRA Section 329 (8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment" Do not include any quantity treated onsite



United States Compliance

SARA 2001

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

United States Compliance Corporation
6121 Baker Road • Suite 101 • Minnetonka, MN 55345 • Phone 952 938 2228 • Fax 952 938 9338
www.uscompliance.com

KIK-SoCal Inc.
SARA 2001

Product	Chemical Constituent	Percent of Chemical In Product		Annual Pounds Used
		Maximum Storage	Average Storage	
Caustic Soda 50%		253,680	126,800	30,599,858
(12.68 #/g)				
(1310-73-2)	Sodium Hydroxide		50%	15,299,929
Chlorine		177,336,426	13,792,833	15,274,528
(12.24 #/g)				
(7782-50-5)	Chlorine		100%	15,274,528
Aquaeous Ammonia		49,069	32,720	1,379,480
(8.18 #/g)				
(7664-41-7)	Ammonia		29%	400,049
Household Ammonia		229,040	163,600	15,570,160
(8.18 #/g)				
(1336-21-6)	Ammonia		2.5%	389,254
Hydrogen Peroxide		99,810	49,900	66,866
(9.98 #/g)				
(7722-84-1)	Hydrogen Peroxide		50%	33,433
Surfonic N-102		58,415	41,750	15,030
(8.35 3/g)				
(9016-45-9)	Poly (Oxy-1,2-Ethnaediyl) ALF		100%	15,030
Propane		580,968	348,944	69,804
(4.26 #/g)				
(74-98-6)	Propane		97%	67,710

Propane Continued...					
(74-84-0)	Ethane		1%		698
(115-07-1)	Propylene		1%		698
(106-97-8)	Butane		1%		698
Acetylene		22,056		11,311	42,412
(7.56 #/g)					
(74-86-2)	Acetylene		100%		42,412
Oxygen		51,526		24,140	103,448
(9.22 #/g)					
(7782-44-7)	Oxygen		100%		103,448
Argon		NA		NA	NA
(NA)					
(7440-37-1)	Argon		100%		
Nitrogen		NA		NA	10,800
(NA)					
(7727-37-9)	Nitrogen		100%		10,800
Soda Ash		2,000		500	7,000
(21.1 #/g)					
(497-19-8)	Sodium Carbonate		100%		6,986
Anti Freeze Summer Coolant		521		313	947
(9.47 #/g)					
(107-21-1)	Ethanediol		95%		900
(1303-96-4)	Borax		3%		28
(7631-99-4)	Nitric Acid Sodium Salt		99%		938
(1310-73-2)	NaOH		99%		938
Sodium Hypochlorite		1,996,176		1,996,176	24,906,576
(9.6 #/g)					
(7681-52-9)	Sodium Hypochlorite		14%		3,486,921
(1310-73-2)	Sodium Hydroxide		1%		124,533

Phosphoric Acid		55		45	55
(7664-38-2)	Phosphoric Acid		75%		41
T-1010FS Hydrochloric Acid Solutio (11.14 #/g)		2,451		1,225	8,912
(7647-01-0)	Hydrochloric Acid		100%		8,912
Bleach & Ammonia Product Fragrances (8.73 #/g)					4,508
(trade secret)					NA
Not enough information					
Versonal ® 120 Cleating Agent (10.77 #/g)		1,181		592	3,000
(139-89-9)	Trisodium		38%		1,140
(62099-15-4)	Disodium		2%		60
(1310-73-2)	Trisodium nitrilotriacetate		1%		30
(2836-32-0)	Sodium hydroxide		2%		60
(7732-18-5)	Sodium glycolate		56%		1,680
#2 Diesel Fuel (7.26 #/g)		799		545	2,904
(68476-34-6)	Diesel Fuel No. 2		100%		2,904

KIK-SoCal Inc.
Chemical Thresholds
SARA 2001

Chemical	Product	Pounds Used
Ammonia (7664-41-7):		
	Aquaeous Ammonia	400,049
	Household Ammonia	389,254
	Only 10% of Total Aqueous Ammonia is Reportable	78,930
	Total Pounds Used	78,930

SARA 313 Threshol Exceeded for 2001

Chlorine (7782-50-5):		
	Chlorine	15,274,528
	Total Pounds Used	15,274,528

SARA 313 Threshold Exceeded for 2001

Ethylene Glycol (107-21-1):		
	Anti Freeze Summer Coolant	900
	Total Pounds Used	900

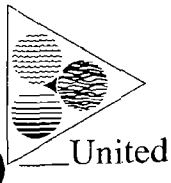
SARA 313 Threshold NOT Exceeded for 2001

Hydrochloric Acid (7647-01-0):		
	T-1010FS Hydrochloric Acid Solution	8,912
	Total Pounds Used	8,912

SARA 313 Threshold NOT Exceeded for 2001

Propylene (115-07-1):		
	Propane	698
	Total Pounds Used	698

SARA 313 Threshold NOT Exceeded for 2001



United States Compliance

SARA 2001
Tier II

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

United States Compliance Corporation
6121 Baker Road • Suite 101 • Minnetonka, MN 55345 • Phone 952 938 2228 • Fax 952 938 9338
www.uscompliance.com

According to the information provided,
KIK-SoCal Inc.
Completed and submitted the Unified
Program Consolidated Form Business Plan.

United States Compliance

SARA 2001
TRI/Form R

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

United States Compliance Corporation
6121 Baker Road • Suite 101 • Minnetonka, MN 55345 • Phone 952 938 2228 • Fax 952 938 9338
www uscompliance com

United States Compliance

June 21, 2002

Darrell Johnson
KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

Re: 2001 SARA Section 313 Reporting

Dear Darrell:

Please find enclosed the 2001 Superfund Amendment and Reauthorization Act (SARA) Section 313 Report for your facility.

The hard copy is for your review only. Please file accordingly once you have found the report to be accurate. The diskettes include the submissions for the state and federal EPA. These diskettes ***must*** be sent in their respective envelopes with the signed certification letters.

Please have Bob Brown sign both certification letters where indicated and send them ***certified mail,*** *return receipt requested, to their respective destinations prior to the July 1, 2002 deadline.*

The 2001 SARA Report was completed using the general information sheet, material safety data sheets (MSDSs), and the MSDS cover sheets submitted by your facility. Again, please review the report before placing it in your files for permanent record keeping.

I would also encourage you to contact USCC regarding the purchase or use of any new products. By submitting a copy of the new product MSDS before purchase, we will be able to review specific information regarding SARA chemicals, employee hazards, hazardous air pollutants, and potential waste issues. These issues are all important as they have potential to complicate your reporting requirements.

If you have any questions, comments, or concerns, please feel free to contact our office at 952.938.2228

Thank you,

Rebecca L. Walter
Environmental Services
SARA Department

Jessica A. Ingraham
Environmental Services
SARA Department

EPCRA Reporting Center
P.O. Box 3348
Merrifield, VA 22116 - 3348
Attn: Toxic Chemical Release Inventory
Magnetic Media Submission

KIK-SOCAL INC.
9028 DICE ROAD
SANTA FE SPRINGS
CA 90670
TRI Fac. ID: 90670-TCHMP-9028D
06/21/2002

To Whom It May Concern:

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC.

This information is submitted as required under Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990.

We are submitting a total of **2** Chemical Report(s) for our facility.
These **2** chemical report(s) are described below:

Chemical Name	Report Year	CAS Number	Report Type
CHLORINE	2001	7782505	5-page Form R
AMMONIA	2001	7664417	5-page Form R

Our technical point of contact is.

DERRELL JOHNSON Phone Number: **(562) 946-6427**

and is available if any questions or problems arise in your processing of these diskettes.

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Sincerely,

BOB BROWN
GENERAL MANAGER

COORDINATOR
CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
P.O. BOX 806
SACRAMENTO, CA 95812-0806
OFFICE OF ENVIRONMENTAL INFORMATION

KIK-SOCAL INC.
9028 DICE ROAD
SANTA FE SPRINGS
CA 90670
TRI Fac. ID. 90670-TCHMP-9028D
06/21/2002

To Whom It May Concern.

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC.

This information is submitted as required under Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990

We are submitting a total of **2** Chemical Report(s) for our facility.
These **2** chemical report(s) are described below:

Chemical Name	Report Year	CAS Number	Report Type
CHLORINE	2001	7782505	5-page Form R
AMMONIA	2001	7664417	5-page Form R

Our technical point of contact is:

DERRELL JOHNSON Phone Number: **(562) 946-6427**

and is available if any questions or problems arise in your processing of these diskettes.

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Sincerely,

BOB BROWN
GENERAL MANAGER

IPORTANT. Type or print, read instructions before completing form)

EPA FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

United States Environmental Protection Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

/HERE TO SEND COMPLETED FORMS: 1. EPCRA Reporting Center, P O Box 3348, Merrifield, VA 22116-3348, ATTN TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

nportant: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

ECTION 1. REPORTING YEAR 2001

ECTION 2. TRADE SECRET INFORMATION

.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

ECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

ıereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted formation is true and complete and that the amounts and values in this report are accurate based on reasonable estimates sing data available to the preparers of this report.

ame and official title of owner/operator or senior management official	Signature	Date Signed
)B BROWN GENERAL MANAGER		06/27/2002

ECTION 4. FACILITY IDENTIFICATION

or Establishment Name	TRI Facility ID Number	90670TCHMP9028D
K-SOCAL INC.	Facility or Establishment Name or Mailing Address(if different from street address)	
reet: 28 DICE ROAD	Mailing Address	
ty/County/State/Zip Code: NTA FE SPRINGS LOS ANGELES CA 90670-	City/State/Zip Code	Country (Non-US)

.2 This report contains information for: (Important check a or b; check c or d if applicable) a. [X] An entire facility b. [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

.3	Technical Contact Name	DERRELL JOHNSON	Telephone Number (include area code) (562) 946-6427
.4	Public Contact Name	BOB BROWN	Telephone Number (include area code) (562) 946-6427

.5 SIC Code (s) (4 digits)

Primary					
a. 2841	b.	c.	d.	e.	f.

.6 Latitude / Longitude

Latitude Degrees	Minutes	Seconds	Longitude Degrees	Minutes	Seconds
33	57	26	118	03	56

.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D. No.) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)
051482784	a. CAD051482784	a. NA	a. NA
	b.	b.	b.

ECTION 5. PARENT COMPANY INFORMATION

.1	Name of Parent Company	NA [ ]	KIK INTERNATIONAL, INC
	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
CHLORINE

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

7782505

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

CHLORINE

1.3 Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive.)

NA

1.4 ***Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.***

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA [X]																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical.

a. [ ] Produce b. [ ] Import

If produce or import:

c. [ ] For on-site use/processing
d. [ ] For sale/distribution
e. [ ] As a byproduct
f. [ ] As an impurity

3.2 Process the toxic chemical:

a. [X] As a reactant
b. [ ] As a formulation component
c. [ ] As an article component
d. [ ] Repackaging
e. [ ] As an impurity

3.3 Otherwise use the toxic chemical:

a. [ ] As a chemical processing aid
b. [ ] As a manufacturing aid
c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 05 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA [ ]	1	M	
5.2	Stack or point air emissions	NA [X]	NA		
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box [1] and indicate the Part II, Section 5.3 page number in this box. [1] (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1 - 10 pounds, B= 11 - 499 pounds, C= 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
CHLORINE

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X	NA	
5.4.2	Underground Injection onsite to Class II-V Wells	X	NA	
5.5	Disposal to land onsite			
5.5.1A	RCRA Subtitle C landfills	X	NA	
5.5.1B	Other landfills	X	NA	
5.5.2	Land treatment/application farming	X	NA	
5.5.3	Surface Impoundment	X	NA	
5.5.4	Other disposal	X	NA	

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B.1 POTW Name	NA						
POTW Address							
City		State		County		Zip	-
6.1.B.2 POTW Name							
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [1] and indicate the Part II, Section 6.1 page number in this box [1] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 Off-Site EPA Identification Number (RCRA ID No.)	NA								
Off-Site Location Name	NA								
Off-Site Address									
City		State		County		Zip		Country (Non-US)	

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
CHLORINE

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-Site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☒ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b: 1 2 3 4 5 6 7 8	7A.1c	7A.1d	7A.1e
NA			%	Yes ☐ No ☐
7A.2a	7A.2b: 1 2 3 4 5 6 7 8	7A.2c	7A.2d	7A.2e
			%	Yes ☐ No ☐
7A.3a	7A.3b: 1 2 3 4 5 6 7 8	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b: 1 2 3 4 5 6 7 8	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b: 1 2 3 4 5 6 7 8	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box: 1

and indicate the Part II, Section 6.2/7A page number in this box: 1 (example: 1,2,3, etc)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A = 1 - 10 pounds, B = 11 - 499 pounds, C = 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
CHLORINE

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - *Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.*

Energy Recovery Methods [enter 3-character code(s)]

1 NA | 2 | 3 | 4

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1. NA | 2. | 3. | 4. | 5.

6. | 7 | 8. | 9. | 10.

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	2	1	1	1
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			0000000 91	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report? (Check one box) — YES [ ] NO [X]

* For Dioxin or Dioxin-like compounds, report in grams/year

*** *Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment."* Do not include any quantity treated onsite

EPA
United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1. EPCRA Reporting Center, P O Box 3348, Merrifield, VA 22116-3348, ATTN TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]
For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2001

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official	Signature:	Date Signed.
BOB BROWN GENERAL MANAGER		06/27/2002

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name: KIK-SOCAL INC

Facility or Establishment Name or Mailing Address (if different from street address):

Street: 9028 DICE ROAD

Mailing Address:

City/County/State/Zip Code: SANTA FE SPRINGS LOS ANGELES CA 90670-

City/State/Zip Code:

Country (Non-US):

4.2 This report contains information for (Important: check a or b, check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c. [ ] A Federal facility d. [ ] GOCO

4.3	Technical Contact Name	DERRELL JOHNSON	Telephone Number (include area code): (562) 946-6427
4.4	Public Contact Name	BOB BROWN	Telephone Number (include area code): (562) 946-6427

4.5 SIC Code (s) (4 digits)

Primary					
a. 2841	b.	c.	d.	e.	f.

4.6 Latitude / Longitude

Latitude Degrees	Latitude Minutes	Latitude Seconds	Longitude Degrees	Longitude Minutes	Longitude Seconds
33	57	26	118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I.D. No.) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK INTERNATIONAL, INC
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
AMMONIA

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category.)
7664417

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
AMMONIA

1.3 Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes" *Generic Name must be structurally descriptive.*)
NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA [X]																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above)

2.1 Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation)
NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:
- a. [ ] Produce
- b. [ ] Import

If produce or import:
- c. [ ] For on-site use/processing
- d. [ ] For sale/distribution
- e. [ ] As a byproduct
- f. [ ] As an impurity

3.2 Process the toxic chemical:
- a. [ ] As a reactant
- b. [X] As a formulation component
- c. [ ] As an article component
- d. [ ] Repackaging
- e. [ ] As an impurity

3.3 Otherwise use the toxic chemical:
- a. [ ] As a chemical processing aid
- b. [ ] As a manufacturing aid
- c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 04 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions: NA [ ]	3	M	
5.2	Stack or point air emissions: NA [ ]	347	M	
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
	Stream or Water Body Name			
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box [1]
and indicate the Part II, Section 5.3 page number in this box [1] (example: 1,2,3, etc)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1 - 10 pounds, B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
AMMONIA

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X	NA	
5.4.2	Underground Injection onsite to Class II-V Wells	X	NA	
5.5	Disposal to land onsite			
5.5.1A	RCRA Subtitle C landfills	X	NA	
5.5.1B	Other landfills	X	NA	
5.5.2	Land treatment/application farming	X	NA	
5.5.3	Surface Impoundment	X	NA	
5.5.4	Other disposal	X	NA	

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B.1	POTW Name	NA					
POTW Address							
City		State		County		Zip	-
6.1.B.2	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [1] and indicate the Part II, Section 6.1 page number in this box [1] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1	Off-Site EPA Identification Number (RCRA ID No.)	NA							
Off-Site Location Name		NA							
Off-Site Address									
City		State		County		Zip		Country (Non-US)	

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A = 1 - 10 pounds, B = 11 - 499 pounds, C = 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
AMMONIA

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-Site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b: 1 A03, 2 NA, 3, 4, 5, 6, 7, 8	7A.1c	7A.1d	7A.1e
W		2	0.01 %	Yes X / No
7A.2a	7A.2b: 1, 2, 3, 4, 5, 6, 7, 8	7A.2c	7A.2d	7A.2e
			%	Yes / No
7A.3a	7A.3b: 1, 2, 3, 4, 5, 6, 7, 8	7A.3c	7A.3d	7A.3e
			%	Yes / No
7A.4a	7A.4b: 1, 2, 3, 4, 5, 6, 7, 8	7A.4c	7A.4d	7A.4e
			%	Yes / No
7A.5a	7A.5b: 1, 2, 3, 4, 5, 6, 7, 8	7A.5c	7A.5d	7A.5e
			%	Yes / No

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box: 1

and indicate the Part II, Section 6.2/7A page number in this box: 1 (example: 1,2,3, etc)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A = 1 - 10 pounds, B = 11 - 499 pounds, C = 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
AMMONIA

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - *Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.*

Energy Recovery Methods [enter 3-character code(s)]

1 NA | 2 | 3 | 4

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1. R99 | 2. | 3. | 4. | 5.

6. | 7. | 8. | 9. | 10.

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	382	347	347	347
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	13969	5041	5041	5041
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	483	311	311	311
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			0000000.91	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a	b.	c.
8.10.2		a.	b.	c.
8.10.3		a	b.	c.
8.10.4		a.	b.	c

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one box) — YES [ ] NO [X]

* For Dioxin or Dioxin-like compounds, report in grams/year

*** *Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment" Do not include any quantity treated onsite*

EPA
United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P.O Box 1513, Lantham, MD 20703-1513 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2002

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2 2, Attach substantiation forms) [X] NO (Do not answer 2.2, Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report

Name and official title of owner/operator or senior management official:	Signature.	Date Signed:
Bob Brown General Manager		06/13/2003

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name: KIK-SoCal Inc

Facility or Establishment Name or Mailing Address (if different from street address):

Street: 9028 Dice Road

Mailing Addres: NA

City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670

City/State/Zip Code:

Country (Non-US):

4.2 This report contains information for. (Important: check a or b, check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c. [ ] A Federal facility d [ ] GOCO

4.3 Technical Contact Name: Derrell Johnson — Telephone Number (include area code): (562) 946-6427

Email Address: NA

4.4 Public Contact Name: United States Compliance Corp — Telephone Number (include area code): (952) 252-3000

4.5 SIC Code (s) (4 digits)	Primary	b.	c	d.	e	f.
	a. 2841					

4.6	Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
		33	57	26		118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D No) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number: 90670TCHMP9028D

Toxic Chemical, Category or Generic Name: Ammonia

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
7664-41-7

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
Ammonia

1.3 Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.)
NA

1.4 **Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.**
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:
- a. ☐ Produce
- b. ☐ Import

If produce or import:
- c. ☐ For on-site use/processing
- d. ☐ For sale/distribution
- e. ☐ As a byproduct
- f. ☐ As an impurity

3.2 Process the toxic chemical:
- a. ☐ As a reactant
- b. ☒ As a formulation component
- c. ☐ As an article component
- d. ☐ Repackaging
- e. ☐ As an impurity

3.3 Otherwise use the toxic chemical:
- a. ☐ As a chemical processing aid
- b. ☐ As a manufacturing aid
- c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 05 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions ☐ NA	2.8	M	
5.2	Stack or point air emissions ☐ NA	379	M	
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
	Stream or Water Body Name			
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 5.3 page number in this box ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)	TRI Facility ID Number 90670TCHMP9028D Toxic Chemical, Category, or Generic Name Ammonia

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3	Surface Impoundment	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example. 1,2,3, etc)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No.)	NA							
Off-Site Location Name	NA								
Off-site Address									
City		State		County		Zip		Country (Non-US)	

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any *waste stream containing the toxic chemical or chemical category*

a General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]								c Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b	1	A03	2	NA				7A.1c	7A.1d	7A.1e
A	3	4		5					02	0.01 %	Yes X / No
	6	7		8							
7A.2a	7A.2b	1		2					7A.2c	7A.2d	7A.2e
	3	4		5						%	Yes ☐ / No ☐
	6	7		8							
7A.3a	7A.3b	1		2					7A.3c	7A.3d	7A 3e
	3	4		5						%	Yes ☐ / No ☐
	6	7		8							
7A.4a	7A 4b	1		2					7A.4c	7A.4d	7A 4e
	3	4		5						%	Yes ☐ / No ☐
	6	7		8							
7A.5a	7A 5b	1		2					7A.5c	7A.5d	7A.5e
	3	4		5						%	Yes ☐ / No ☐
	6	7		8							

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐ and indicate the Part II, Section 6.2/7A page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [R99] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	347	382	386	390
8.2	*Quantity used for energy recovery* onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	5041	6410	6538	6603
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	311	250	253	256
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			1 20	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8 11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box) — Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

***Report releases pursuant to EPCRA Section 329 (8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated onsite

EPA
United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P.O Box 1513, Lantham, MD 20703-1513 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only: [ ]

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2002

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2 2; Attach substantiation forms) [X] NO (Do not answer 2 2; Go to Section 3)	2.2	Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report

Name and official title of owner/operator or senior management official	Signature	Date Signed
Bob Brown General Manager		06/13/2003

SECTION 4. FACILITY IDENTIFICATION

4.1		TRI Facility ID Number	90670TCHMP9028D
Facility or Establishment Name	KIK-SoCal Inc	Facility or Establishment Name or Mailing Address (if different from street address)	
Street	9028 Dice Road	Mailing Addres	NA
City/County/State/Zip Code	Sante Fe Springs Los Angeles CA 90670	City/State/Zip Code / Country (Non-US)	

4.2	This report contains information for (Important: check a or b, check c or d if applicable)	a [X] An entire facility	b [ ] Part of a facility	c [ ] A Federal facility	d [ ] GOCO			
4.3	Technical Contact Name	Derrell Johnson				Telephone Number (include area code) (562) 946-6427		
	Email Address	NA						
4.4	Public Contact Name	United States Compliance Corp				Telephone Number (include area code) (952) 252-3000		
4.5	SIC Code (s) (4 digits)	Primary a. 2841	b.	c.	d.	e.	f.	

4.6	Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
		33	57	26		118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D No) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Chlorine

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category)
	7782-50-5
1.2	Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list)
	Chlorine
1.3	Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive)
	NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
[ ]																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical.
a. [ ] Produce b. [ ] Import		
If produce or import.	a [X] As a reactant	a. [ ] As a chemical processing aid
c. [ ] For on-site use/processing	b. [ ] As a formulation component	b. [ ] As a manufacturing aid
d. [ ] For sale/distribution	c. [ ] As an article component	c. [ ] Ancillary or other use
e. [ ] As a byproduct	d. [ ] Repackaging	
f. [ ] As an impurity	e. [ ] As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	08 (Enter two-digit code from instruction package)	

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA [ ]	1 38	M	
5.2	Stack or point air emissions	NA [X]			
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5 3 are attached, indicate the total number of pages in this box [ ]
and indicate the Part II, Section 5.3 page number in this box. [ ] (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Chlorine

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3	Surface Impoundment	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
	POTW Address						
	City		State		County	Zip	
6.1.B	POTW Name						
	POTW Address						
	City		State		County	Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No)	NA						
	Off-Site Location Name	NA						
	Off-site Address							
	City		State		County	Zip		Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Chlorine

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]								c. Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b	1		2		3	4	5	7A.1c	7A 1d	7A.1e
	6		7		8					%	Yes ☐ No ☐
7A.2a	7A.2b	1		2		3	4	5	7A.2c	7A.2d	7A.2e
	6		7		8					%	Yes ☐ No ☐
7A.3a	7A.3b	1		2		3	4	5	7A 3c	7A.3d	7A.3e
	6		7		8					%	Yes ☐ No ☐
7A.4a	7A.4b	1		2		3	4	5	7A.4c	7A.4d	7A.4e
	6		7		8					%	Yes ☐ No ☐
7A.5a	7A.5b	1		2		3	4	5	7A 5c	7A 5d	7A.5e
	6		7		8					%	Yes ☐ No ☐

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6.2/7A page number in this box: ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Chlorine

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	1	1 38	1 38	1.38
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			1 08	

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8 11			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10 2		a.	b.	c
8 10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box)	Yes [ ]	No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

***Report releases pursuant to EPCRA Section 329 (8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment " Do not include any quantity treated onsite

Signature Certification for State Diskette Submission

KIK-SOCAL INC.
9028 DICE ROAD
SANTE FE SPRINGS, CA 90670
90670TCHMP9028D

June 2, 2003

California Environmental Protection Agency
Office of Environmental Information Management
400 P Street
Sacramento, CA 95812
Attn: Toxics Release Inventory

To Whom It May Concern:

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC.

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990.

We are submitting a total of 2 chemical report(s) for our facility.

These 2 chemical report(s) are described below:

TRI Chemical or Chemical Category	Reporting Year	CAS Number	Report
Ammonia	2002	7664-41-7	Form R
Chlorine	2002	7782-50-5	Form R

Our technical point of contact is:

DERRELL JOHNSON
(562) 946-6427
NA

and is available should any questions or problems arise in the processing of this diskette

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s)

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372.27(a) did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed or otherwise used in an amount not exceeding 1 million pounds during the reporting year.

Sincerely,

BOB BROWN
GENERAL MANAGER

Enclosure Diskette

Signature Certification for U.S. EPA Diskette Submission

KIK-SOCAL INC
9028 DICE ROAD
SANTE FE SPRINGS, CA 90670
90670TCHMP9028D

June 2, 2003

TRI Data Processing Center
c/o Computer Sciences Corportation
Suite 300
8400 Corporate Drive
New Carrollton, MD 20785

(301) 429-5005

To Whom It May Concern:

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC.

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990

We are submitting a total of 2 chemical report(s) for our facility.

These 2 chemical report(s) are described below:

TRI Chemical or Chemical Category	Reporting Year	CAS Number	Report
Ammonia	2002	7664-41-7	Form R
Chlorine	2002	7782-50-5	Form R

Our technical point of contact is:

DERRELL JOHNSON
(562) 946-6427
NA

and is available should any questions or problems arise in the processing of this diskette.

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s)

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372 27(a) did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed or otherwise used in an amount not exceeding 1 million pounds during the reporting year.

Sincerely,

BOB BROWN
GENERAL MANAGER

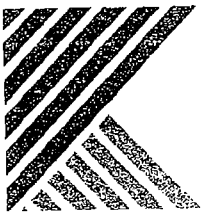
Enclosure: Diskette

KIK Corporation Inc.

Superfund Amendments and Reauthorization Act (SARA)

P2 Plans

P2 Plans



KIK Corporation Inc.

Superfund Amendments and Reauthorization Act (SARA)

Agency Documentation

Agency Documentation

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

RECEIVED
OPPT CBIC
06 DEC 20 AM 11:07

KIK INTERNATIONAL SOCAL
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

Bob Brown

7003 3110 0000 1785 5894

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

12/13/06

Sent To US ENV PROT Agency

Street, Apt. No.; or PO Box No.

City, State, ZIP+4

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

US PROTECTION AGENCY
1200 PENNSYLVANIA
WASHINGTON DC
20460

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7003 3110 0000 1785 5894

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Certified Mail Provides:

PS Form 3800, June 2002 (Reverse)

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail® or Priority Mail®
- Certified Mail is *not* available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement *"Restricted Delivery"*
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail

IMPORTANT: Save this receipt and present it when making an inquiry. Internet access to delivery information is not available on mail addressed to APOs and FPOs.

PAGE 1 of ____

(IMPORTANT. Type only, read instructions before completing form)

EPA

FORM U 2006

U.S. Environmental Protection Agency
Washington, DC 20460
Partial Updating of TSCA Inventory Data Base
Site Report
(Section 8(a) Toxic Substances Control Act, 15 U.S.C. 2607(a))

FOR EPA USE ONLY

Report Number	
Mark "X" here if this is a revision to the previous report	

Company Report No.: KIKS2005

CERTIFICATION

Certification Statement: I hereby certify to the best of my knowledge and belief that Parts I and II have been completed in compliance with the requirements of 40 CFR 710.52(c)(1), (2), and (3); Part III of this form has been completed in compliance with the requirements of 40 CFR 710.52(c)(4); and any confidentiality claims are true and correct as to that information for which they have been asserted.

Signature	Robert R Brown	Date signed	12-12-06
Name (printed)	Bob Brown	Official Title	General Manager

PART I. SITE IDENTIFICATION INFORMATION

SECTION A. COMPANY INFORMATION*

1.A.1	Company Name	KIK Custom Products
1.A.2	Company Dun & Bradstreet Number	249112814

SECTION B. SITE INFORMATION*

1.B.1	Site Name	KIK SoCal			
1.B.2	Site Dun & Bradstreet Number	051482784	EPA Facility Identification Number		For EPA Use Only Leave Blank
1.B.3	Street Address (Line 1)	9028 Dice Road			
1.B.4	Street Address (Line 2)				
1.B.5	City	Santa Fe Springs	1.B.6	County / Parish	Los Angeles
1.B.7	State	CA	1.B.8	Zip code	90670

SECTION C. TECHNICAL CONTACT INFORMATION*

1.C.1	Name	Bob Brown			1.C.2	Telephone	(562) 946-6427
1.C.3	Email Address	bbrown@kikcorp.com					
1.C.4	Mailing Address (Line 1)	9028 Dice Road					
1.C.5	Mailing Address (Line 2)						
1.C.6	City	Santa Fe Springs	1.C.7	State	CA	1.C.8	Zip Code	90670

* Confidentiality claims for information in Part I, Sections A, B, and C, are made, as necessary, for each chemical substance on subsequent pages

Page ___ of ___
FOR EPA USE ONLY

PART II. MANUFACTURING INFORMATION

SECTION A. CHEMICAL IDENTIFICATION					CBI[1]	
2.A.1	Chemical Identifying Number	7681-52-9	2.A.2	ID Code		C
2.A.3	Chemical Name	Sodium Hypochlorite				

SECTION B. MANUFACTURING INFORMATION									
			CBI			a Physical Form		b. Percent of Production Volume in Each Physical Form	
2.B.1	Company Information								
2.B.2	Site Information[1]								
2.B.3	Technical Contact Information					Check All That Apply	CBI	Percent	CBI
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder				
2.B.5	Activity (Check all that apply)	☒ Manufacture ☐ Import	X	2.B.11	Pellets or Large Crystals				
2.B.6	Manufactured Production Volume (LB)	19,100,936	X	2.B.12	Water or Solvent Wet Solid				
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid				
2.B.8	Number of Workers (code)	W4	X	2.B.14	Gas or Vapor				
2.B.9	Maximum Concentration (code)	M2	X	2.B.15	Liquid	X	X	100	X

PART III. PROCESSING AND USE INFORMATION

Complete Part III, Sections A and B if the sum of the production volumes noted in Blocks 2 B 6 and 2 B.7 is 300,000 pounds or more

SECTION A. INDUSTRIAL PROCESSING AND USE DATA — N/A: X

	a Type of Process or Use		b (5-digit) NAICS Code		c Industrial Function Category		d Percent Production Volume		e. Number of Sites		f Number of Workers	
	Code	CBI	Code	CBI	Code	CBI	Percent	CBI	Code	CBI	Code	CBI
3.A.1												
3.A.2												
3.A.3												
3.A.4												
3.A.5												
3.A.6												
3.A.7												
3.A.8												
3.A.9												
3.A.10												

SECTION B. COMMERCIAL AND CONSUMER USE DATA — N/A: X

	a Commercial and Consumer Product Category		b Used in Products Intended for Children		c Percent Production Volume associated with each category		d Maximum Concentration associated with each category	
	Code	CBI	Y/N/NRO	CBI	Percent	CBI	Code	CBI
3.B.1								
3.B.2								
3.B.3								
3.B.4								
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								
3.B.10								

[1]Substantiation required for CBI claims on chemical identity and site information

Concerning EPA Disclosure Information

If you submit information to EPA and claim any of it as confidential, EPA will publicly disclose that information only as allowed by the procedures set forth in 40 CFR Part 2. If no such claim accompanies the information when it is received, EPA may make that information public without further notice to you.

Confidentiality Statements

Information reported to EPA on the above form may be claimed as confidential by checking the appropriate CBI boxes. The person signing the certification statement attests to the truth of the following four statements concerning all information claimed as confidential:

1. My company has taken measures to protect the confidentiality of the information and intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtainable by other persons without our consent (other than through discovery based on a showing of special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to our competitive position.

Paperwork Reduction Act Notice

The annual public burden for this collection of information, which is approved under OMB Control Number 2070-0162, is estimated to be approximately 265 hours per response for manufacturers of inorganic chemical substances and 560 hours per response for manufacturers of organic chemical substances. According to the Paperwork Reduction Act, "burden" means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. For this collection it includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information; processing and maintaining information; and disclosing or providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number. The OMB control number for this collection appears above. In addition, the OMB control numbers for EPA's regulations, after initial display in the final rule, are listed in 40 CFR part 9.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden (including the use of automated collection techniques) to: Director, Collection Strategies Division, U S. Environmental Protection Agency (Mail Code 2822), 1200 Pennsylvania Ave, N.W., Washington, D.C. 20460 Include the OMB control number in any correspondence, but do not submit the completed form to this address. The requested information should be submitted in accordance with the instructions accompanying the form, or as specified in the corresponding regulation.

Submitting Form U

Submissions sent via the U S Postal Service:	Submissions sent by Courier or Hand Delivery
IUR Submissions Coordinator (7407M) U. S. Environmental Protection Agency Office of Pollution Prevention and Toxics Ariel Rios Building 1200 Pennsylvania Avenue, N.W. Washington, DC 20460	IUR Submissions Coordinator U S. EPA - OPPT EPA East Building Room 6428 1201 Constitution Ave., N.W. Washington, DC

United States Compliance

November 29, 2006

Bob Brown
KIK SoCal Inc.
9028 Dice Road
Santa Fe Springs, CA 90670

Re: 2005 TSCA Inventory Reporting

Dear Bob Brown:

Please find enclosed the Form U report for KIK SoCal Inc. After completing an assessment we have determined that the facility is required to file under TSCA Section 8(a) 15 U.S.C. 2607(a) because TSCA-listed chemical substances were manufactured beyond the specified threshold amount of 25,000 pounds.

Please review and sign the enclosed report for the EPA. Please send the report via certified return receipt mail as soon as possible.

A file copy of the facility's TSCA Inventory Form U is enclosed. Please review the report, sign where indicated, and file in the facility's Compliance Manual. Be sure to keep the report on-site as documentation of filing for the 2005 calendar year.

If you have any questions, please contact me at 952-252-3000 x145 or bwynnemer@uscompliance.com

Regards,

Brad M Wynnemer
Environmental Specialist

Enclosures

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Revised 3/31/95

Business Name & Address T-Chem Products, Inc. 9028 Dice, SES Date 1995

Product Identification TRADE SECRET ☐ Chemical Number 1 of 20

Common Name Sodium Hypochlorite Bleach DOT# 1791

Manufacture's Name Same as above Phone 310/946-6427

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies ____ Mixture ☒ State Waste Number ____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0, Health 2, Reactivity 1, Special Hazards ____

Check all that apply: Sudden pressure release ☐; Health delayed, chronic ☐; Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 208,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 208,000 Number of days on site a year 365 Largest container 22,500 gal

Storage Codes (see page 8)

Storage Code A K N

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Sodium Hypochlorite	5.6-14.0	7681-52-9
Sodium Hydroxide	0.14-0.5	1310-73-2

Storage Location Tank Farm, Warehouse TANK # 2, 3, 4, 5, 9, 10, 11, 12

Product Identification TRADE SECRET ☐ Chemical Number 2 of 20

Common Name Caustic Soda 50% DOT# 1824

Manufacture's Name Occidental Chemical Phone 800/733-3665

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies ____ Mixture ☒ State Waste Number ____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0, Health 3, Reactivity 2, Special Hazards ____

Check all that apply: Sudden pressure release ☐; Health delayed, chronic ☐; Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 20,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 10,000 Number of days on site a year 365 Largest container 10,000 gal

Storage Codes (see page 8)

Storage Code A

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Sodium Hydroxide	50	1310-73-2

Storage Location Tank Farm TANK # 647

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ Chemical Number 3 of 20

Common Name Chlorine DOT# 1017

Manufacture's Name Occidental Chemical Phone 800/733-3665

Physical State

Solid ☐ Radioactive ☐ Liquid ☒ Curies _____ Gas ☐

Pure ☒ Mixture ☐

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 3 Reactivity 1 Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 540,000 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 280,000 Number of days on site a year 365 Largest container 180,000

Storage Codes (see page 8)

Storage Code Q

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Chlorine	100	7782-50-5

Storage Location Tank Farm Northeast 5106 Building

Product Identification TRADE SECRET ☐ Chemical Number 4 of 20

Common Name Hydrogen Peroxide 50% DOT# 2014

Manufacture's Name ~~Interox America~~ Phone 800/INTEROX

Physical State

Solid ☐ Radioactive ☐ Liquid ☒ Curies _____ Gas ☐

Pure ☐ Mixture ☒

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 3 Reactivity 3 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 10,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 5,000 Number of days on site a year 365 Largest container 10,000 gal

Storage Codes (see page 8)

Storage Code A

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Hydrogen Peroxide	50	7722-84-1

Storage Location Tank Farm WWT-4 + TANK #3

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ | Chemical Number 5 of 20

Common Name Ammonia Baume DOT# 2672

Manufacture's Name La Roche Industries, Inc. Phone 714/521-9811

Physical State

Solid ☐ Radioactive ☐
Liquid ☒ Curies _____
Gas ☐

Pure ☐
Mixture ☒

If waste: annual amount generated 0 (tons)
State Waste Number _____

Physical and Health Hazards

NFPA 704 placard — Fire 1, Health 3, Reactivity 0, Special Hazards _____

Check all that apply:
Sudden pressure release ☐
Health delayed, chronic ☐
Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 6,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS
Average daily amount 4,000 Number of days on site a year 365 Largest container 6,000

Storage Codes (see page 8)

Storage Code: A
Pressure Code: 1
Temperature Code: 4

Hazardous component(s)	% Composition	CAS #
Ammonia	29	7664-41-7

Storage Location Tank Farm Tank #27

Product Identification TRADE SECRET ☐ | Chemical Number 6 of 20

Common Name Household Ammonia DOT# _____

Manufacture's Name T-Chem Products, Inc. Phone 310/946-6427

Physical State

Solid ☐ Radioactive ☐
Liquid ☒ Curies _____
Gas ☐

Pure ☐
Mixture ☒

If waste: annual amount generated 0 (tons)
State Waste Number _____

Physical and Health Hazards

NFPA 704 placard — Fire 0, Health 2, Reactivity 0, Special Hazards _____

Check all that apply:
Sudden pressure release ☐
Health delayed, chronic ☐
Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 28,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS
Average daily amount 20,000 Number of days on site a year _____ Largest container 6,200 gal

Storage Codes (see page 8)

Storage Code: K N
Pressure Code: 1
Temperature Code: 4

Hazardous component(s)	% Composition	CAS #
Ammonia Hydroxide	4-8	1336-21-6

Storage Location Tank Farm, Warehouse Tanks 24, 25, 26

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ Chemical Number 7 of 20

Common Name Terqitol NP9 or Surfonic N95 DOT# _____

Manufacture's Name Union Carbide or Texaco Phone UCC 304/744-3487 914/831-4300

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 1 Health 2 Reactivity 0 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 12,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 5,000 Number of days on site a year 365 Largest container 12,000 gal

Storage Codes (see page 8)

Storage Code A

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Nonyphenol Ethxylate	97	127087-87-0
Polyethylene Glycol	3	25322-68-3
Dinonylphenol Ethoxylate	2	9014-93-1

Storage Location Tank Farm TANK 15

Product Identification TRADE SECRET ☐ Chemical Number 8 of 20

Common Name Carsosoft DT95 (Fabric Softener Base) DOT# _____

Manufacture's Name Lonza Phone 800/777-1875

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 2 Health 2 Reactivity 0 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 8,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 5,000 Number of days on site a year 365 Largest container 8,000

Storage Codes (see page 8)

Storage Code A

Pressure Code 1

Temperature Code 5

Hazardous component(s)	% Composition	CAS #
Ditallowamidoethylpolyoxyethylene	90	68389-89-9
Methyl-Ammonium Methosulfate		
Isopropyl Alcohol	10	67-63-0

Storage Location Tank Farm TANK #18

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ Chemical Number 9 of 20

Common Name Propane DOT# 1075

Manufacture's Name Petrolane Phone 213/685-3040

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☒ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire 4 Health 1 0 Reactivity

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 400 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 200 Number of days on site a year 365 Largest container 400

Storage Codes (see page 8)

Storage Code A

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Ethane	0-6	74-84-0
Propane	87-97	74-98-6
Propylene	0-5	115-07-1
Butane	0-2.5	106-97-8

Storage Location Tank Farm Northeast End Bldg

Product Identification TRADE SECRET ☐ Chemical Number 10 of 20

Common Name Acet ylene DOT# _____

Manufacture's Name Union Carbide Phone 800/822-4357

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire 4 Health 1 3 Reactivity

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 390 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 200 Number of days on site a year 365 Largest container 130

Storage Codes (see page 8)

Storage Code L

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Alet ylene	100	74-86-2

Storage Location Maintenance Shop

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ | Chemical Number 11 of 20

Common Name Argon DOT# _____

Manufacture's Name Union Carbide Phone 800/822-4357

Physical State

Solid ☐ Radioactive ☐ Liquid ☐ Curies _____ Gas ☒

Pure ☒ Mixture ☐

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard: Not Rated

Fire _____ Health _____ Reactivity _____

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 250 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 150 Number of days on site a year 365 Largest container 250

Storage Codes (see page 8)

Storage Code: L

Pressure Code: 2

Temperature Code: 4

Hazardous component(s)	% Composition	CAS #
Argon	100	7440-37-1

Storage Location Maintenance Shop

Product Identification TRADE SECRET ☐ | Chemical Number 12 of 20

Common Name Nitrogen DOT# _____

Manufacture's Name Union Carbide Phone 800/822-4357

Physical State

Solid ☐ Radioactive ☐ Liquid ☐ Curies _____ Gas ☒

Pure ☒ Mixture ☐

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard: Fire 0 Health 3 Reactivity 0

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 600 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 300 Number of days on site a year 365 Largest container 300

Storage Codes (see page 8)

Storage Code: L

Pressure Code: 2

Temperature Code: 4

Hazardous component(s)	% Composition	CAS #
Nitrogen	100	7727-37-9

Storage Location Blowmold

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ Chemical Number 13 of 20

Common Name Oxygen DOT# _____

Manufacture's Name Union Carbide Phone 800/822-4357

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)
Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____
Gas ☒

Physical and Health Hazards

NFPA 704 placard Not Rated Fire _____ Health _____ Reactivity _____ Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 750 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS
Average daily amount 500 Number of days on site a year 365 Largest container 250

Storage Codes (see page 8)

Storage Code L
Pressure Code 2
Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Oxygen	100	7782-44-7

Storage Location Maintenance Shop

Product Identification TRADE SECRET ☐ Chemical Number ~~14~~ of ~~20~~

Common Name Hydrogen EXCEMPT DOT# _____

Manufacture's Name Big Three Industries Phone 713/868-0202

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)
Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____
Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire 4 Health 0 0 Reactivity Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 73 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS
Average daily amount 50 Number of days on site a year 365 Largest container 73

Storage Codes (see page 8)

Storage Code L
Pressure Code 2
Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Hydrogen	100	1333-74-0

Storage Location Upstairs Laboratory

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ Chemical Number ~~15~~ of ~~20~~

Common Name Helium (Except) DOT# _____

Manufacture's Name Union Carbide Phone 800/822-4357

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire ___ Health ___ Reactivity ___

Not Rated

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount ~~55~~ 300 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount ~~220~~ Number of days on site a year 365 Largest container ~~55~~ 300

Storage Codes (see page 8)

Storage Code L

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Helium	100	7440-59-7

Storage Location Upstairs Laboratory

Product Identification TRADE SECRET ☐ Chemical Number ~~16~~ 14 of 20

Common Name Air DOT# _____

Manufacture's Name Union Carbide Phone 800/822-4357

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☒ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire ___ Health ___ Reactivity ___

Not Rated

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 250 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 150 Number of days on site a year 365 Largest container 250

Storage Codes (see page 8)

Storage Code L

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Oxygen	21	7782-44-7
Nitrogen	79	7727-37-9

Storage Location Upstairs Laboratory

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ | Chemical Number 15 of 20

Common Name Multi Gear Oil, API GL-5, SAE 85 W140 DOT# _____

Manufacture's Name Lubricating Specialties Co. Phone 213/928-2311

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0.3 (tons)
Liquid ☒ Curies _____ Mixture ☒ State Waste Number CAL000028326
Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 1 Health 1 Reactivity 0 Cor Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS
Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal

Storage Codes (see page 8)

Storage Code D
Pressure Code 1
Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Solv Ref Petr Base Stock	LT95	64742-01-4
		64742-65-0
		64742-18-3

Storage Location Blowmold Department

Product Identification TRADE SECRET ☐ | Chemical Number 16 of 20

Common Name Sodium Silicate DOT# _____

Manufacture's Name PQ Corporation or Oxychem Phone PQ 215/293-7200 Oxy 716/278-7021

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)
Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____
Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 2 Reactivity 0 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS
Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal

Storage Codes (see page 8)

Storage Code D
Pressure Code 1
Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Silicic Acid, Sodium Salt	45-49	1344-09-8

Storage Location Tank Farm

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ Chemical Number 17 of 20

Common Name Soda Ash DOT# _____

Manufacture's Name FMC Phone 303/595-9048

Physical State

Solid [X] Radioactive ☐ Pure [X] If waste: annual amount generated 0 (tons)
Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____
Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 2 Reactivity 0 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 1100 units of measure: gallons ☐ LIQUID pounds [X] SOLID cubic feet ☐ GAS
Average daily amount 500 Number of days on site a year 365 Largest container 55 gal

Storage Codes (see page 8)

Storage Code [I]
Pressure Code [1]
Temperature Code [4]

Hazardous component(s)	% Composition	CAS #
Sodium Carbonate	99.8	497-19-8

Storage Location Tank Farm North of Drive

Product Identification TRADE SECRET ☐ Chemical Number ~~20~~ of ~~20~~

Common Name Anti Freeze and Summer Coolant DOT# _____

Manufacture's Name Texaco Inc. Phone 914/831-3400x204

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)
Liquid [X] Curies _____ Mixture [X] State Waste Number _____
Gas ☐

Physical and Health Hazards

NFPA 704 placard Biogradable Fire 1 Health 2 Reactivity 0 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons [X] LIQUID pounds ☐ SOLID cubic feet ☐ GAS
Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal

Storage Codes (see page 8)

Storage Code [D]
Pressure Code [1]
Temperature Code [4]

Hazardous component(s)	% Composition	CAS #
1,2, Ethanedol	95-99.99	107211
Borax	1-2.99	1303964
Naoh	0.10-0.99	1310732
Nitric Acid, Sodium Salt	0.10-0.99	7631994

Storage Location Blowmold Department

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date 1995

Product Identification TRADE SECRET ☐ Chemical Number ____ of ____

Common Name Polyethylene (Excempt) DOT# ____

Manufacture's Name OxyChem Phone ____

Physical State

Solid [X] Radioactive ☐ Pure [X] If waste: annual amount generated 0 (tons)
Liquid ☐ Curies ____ Mixture ☐ State Waste Number ____
Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 0 0 Reactivity
Special Hazards ____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 222,400 units of measure: gallons ☐ LIQUID pounds [X] SOLID cubic feet ☐ GAS
Average daily amount 150,000 Number of days on site a year 365 Largest container 123,600

Storage Codes (see page 8)

Storage Code [H]
Pressure Code [1]
Temperature Code [4]

Hazardous component(s)	% Composition	CAS #

Storage Location Blowmold Area

Product Identification TRADE SECRET ☐ Chemical Number ____ of ____

Common Name ____ DOT# ____

Manufacture's Name ____ Phone ____

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated ____ (tons)
Liquid ☐ Curies ____ Mixture ☐ State Waste Number ____
Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire ____ Health ____ ____ Reactivity
Special Hazards ____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount ____ units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☐ GAS
Average daily amount ____ Number of days on site a year ____ Largest container ____

Storage Codes (see page 8)

Storage Code
Pressure Code
Temperature Code

Hazardous component(s)	% Composition	CAS #

Storage Location ____

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address T-Chem Products, Inc., 9028 Dice Road Date 9/13/95

Product Identification TRADE SECRET ☐ Chemical Number 18 of 20

Common Name Magnesium Chloride DOT# -

Manufacture's Name Ashland Chemical Phone 614/889-3333

Physical State

Solid [X] Liquid [ ] Gas [ ] Radioactive [ ] Curies

Pure [ ] Mixture [X]

If waste: annual amount generated N/A (tons)

State Waste Number

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 0 Reactivity 0 Special Hazards

Check all that apply: Sudden pressure release [ ] Health delayed, chronic [ ] Health immediate, acute [ ]

Amount / Time at Facility

Maximum daily amount 2400 units of measure: gallons [ ] LIQUID pounds [X] SOLID cubic feet [ ] GAS

Average daily amount 1000 Number of days on site a year 365 Largest container

Storage Codes (see page 8)

Storage Code [J]

Pressure Code [1]

Temperature Code [4]

Hazardous component(s)	% Composition	CAS #
Magnesium Chloride	99	7786-30-3

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ Chemical Number 19 of 20

Common Name Citric Acid DOT# -

Manufacture's Name Cypress Chemical Co. Phone 310/802-3660

Physical State

Solid [X] Liquid [ ] Gas [ ] Radioactive [ ] Curies

Pure [X] Mixture [ ]

If waste: annual amount generated N/A (tons)

State Waste Number

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 0 Reactivity 0 Special Hazards

Check all that apply: Sudden pressure release [ ] Health delayed, chronic [X] Health immediate, acute [ ]

Amount / Time at Facility

Maximum daily amount 2500 units of measure: gallons [ ] LIQUID pounds [X] SOLID cubic feet [ ] GAS

Average daily amount 1000 Number of days on site a year 365 Largest container 50# Bag

Storage Codes (see page 8)

Storage Code [J]

Pressure Code [1]

Temperature Code [4]

Hazardous component(s)	% Composition	CAS #
Chemical & Common Name's		77-92-9
Not Applicable		

Storage Location Tank Farm

HAZARDOUS MATERIALS DISCLOSURE / CHEMICAL INVENTORY SHEET

Business Name & Address _____ Date _____

Product Identification TRADE SECRET ☐ Chemical Number 20 of 20

Common Name Carbon Dioxide Refrigerated Liquid DOT# 2187

Manufacture's Name Liquid Air Phone 310/945-1383

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated N/A (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 1 1 Reactivity Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 33.9 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 16.95 Number of days on site a year 365 Largest container 5.65

Storage Codes (see page 8)

Storage Code L

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Carbon Dioxide		124-38-9

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ Chemical Number _____ of _____

Common Name _____ DOT# _____

Manufacture's Name _____ Phone _____

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated _____ (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire _____ Health _____ Reactivity Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount _____ units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount _____ Number of days on site a year _____ Largest container _____

Storage Codes (see page 8)

Storage Code

Pressure Code

Temperature Code

Hazardous component(s)	% Composition	CAS #

Storage Location _____

Number	*Description*	Starting QTY	Mixed	Adjmts	Ending QTY
40000014	FOR:3.25% UAFB REG				
40000015	FOR:3.25% UAFB FLR				
40000051	FOR:REL DD PP PINK				
40000002	FOR:5.25% BL REG		47016	-10608	23352
40000001	FOR:3% BL REG	27888	38730	-14016	32604
40000023	FOR:6% UBL REG	23760	54198	-4170	21384
40000020	FOR:10% BL REG	17424	13068		19272
40000016	FOR:12.5% BL REG	9044	72487		15212
40000070	FOR:2.5% FS PINK	1644	5527		274
40000052	FOR:0.15% WC BLUE	2756			2756
40000128	FOR:VOC FREE WWA				
40000027	FOR:2.5% AMM CLR	5807			4132
40000028	FOR:2.5% AMM LEM	12,500			10857
40000030	FOR:2.5% AMM SUD	70	2600		1232
40000137	FOR:Reliance Hand Soap				
40000092	FOR:Reliance Lem Dis				
40000091	FOR:Reliance Degreaser				

5-17-04

Charles Hamilton

Chem Room E-603

	Number	Description		Starting QTY	Mixed	Adjmts	Ending QTY
	51000108	CHM:HYDROGEN PEROXIDE 50%	LB	10710			10710
	51000022	CHM:POTASSIUM HYDDROXIDE 50%	LB	40920			40920
1	51000097	CHM:ACUSOL 820	LB	820			820
2	51000135	CHM:ALCOSPERSE 747	LB	525			525
	51000006	CHM:Caustic Soda	LB	363208			133421
3	51000058	CHM:DANTOGARD DMDM HYDANTOIN	LB	544			544
4	51000055	CHM:Rock Salt	LB	36500			34200
5	51000119	CHM:Lytron 305	LB	380			368
6	51000078	CHM:OPTIC BRIGHT TINOPAL CBS-X	LB	104			104
	51000007	CHM:BORAX 5 MOL	LB	50			50
7	51000042	CHM:BioTerege 40%	LB	3181			3181
8	51000100	CHM:FMB 1210-8 QUAT 80%	LB	905			905
9	51000081	CHM:CALCIUM CHLORIDE	LB	50			50
10	51000049	CHM:Glycol Ether DB	LB	6274			6274
11	51000047	CHM:SOD METASILICATE ANHYDROUS	LB	2572	(miscellaneous)		(2572)
	51000071	CHM:Surfonic N-9.5	LB	270			270
12	51000121	CHM:N-Clear SILICATE	LB	1320			1320
13	51000048	CHM:TRISODIUM PHOSPHATE	LB	2211			2211
	51000183	CHM:SURFONIC L 12-6	LB				
14	51000080	CHM:Ucarcide 250	LB	904			854
	51000041	CHM:Evaporated Salt	LB	2900			2900
16	51000163	CHM:ANTIFOAM Sag 30	LB	880			874
17	51000079	CHM:STEPAN ACCUSOFT 550PG	LB	20954			19541
	51000094	CHM:SODA ASH DENSE	LB	2220			2200
	51000065	CHM:PHOSPHORIC ACID 75%	LB	1220			1220
18	51000116	CHM: Ammonyx Lo	LB	850			850
	51000040	CHM:AQUA AMMONIA 29%	LB	11437			9657
19	51000083	CHM:CITRIC ACID POWDER	LB	937			824
20	51000157	CHM:TOMADOL 91-6	LB	2483			2483
21	51000176	CHM:BLANKOPHOR ARTIC WHITE TX	LB				
	51000095	CHM:LIQUID CHLORINE	LB	693448			602065
	51000075	CHM:Surfonic N102	LB	5154			5154

Number	Description		Starting QTY	Mixed	Adjmts	Ending QTY
51000073	CHM:Versene L 120	LB				
51000052	CHM:Biosoft D40	LB	10644			10537
51000016	CHM:KATHON CG	LB	336			336
51000139	CHM:MAGNESIUM CHLORIDE	LB	2100			2090
51000141	CHM:HARBORLITE H700	LB	4400			4300
51000140	CHM:NAFCO C	LB	110			105
51000004	CHM:Versene 100	LB	2421			2314
51000079	CHM:STEPAN ACCUSOFT 550PG	LB	2250			2250
52000002	WAT:SOFTENED WATER	GA				
51000043	CHM:Ninol 40 - CO	LB	2036			2036
51000130	CHM:SAVINASE 16L TYPE EX	LB	55			55
51000155	CHM:SODIUM CITRATE 100%	LB	50			50
51000118	CHM:SODIUM GLUCONATE	LB				
51000159	CHM:TERMAMYL 300L	LB	55			55
51000161	CHM:VARIONIC K205	LB	400			400
51000044	CHM:Steol CS -460	LB	7978			7978
51000050	CHM:SOD XYLENE SULFONATE 40%	LB	1966			1966
51000117	CHM:Sulfonic N-60	LB	13907			13907
51000002	CHM:Ammonyx CD Special	LB	70			70
51000039	CHM:WINSURF DGC	LB	7428			7428
51000162	CHM:WINSURF NLS-90	LB	467			467
53000031	FRA:FFS 500 F21 RINSE PERFUME	LB	1019			1010
53000032	FRA:AFI LNN #61 (Floral 6137-77 Lemon)	LB	~~249~~			~~249~~
53000027	FRA:FFS LEMON Ammonia Aroma 22658	LB	959			959
53000074	FRA:AFB Lemon 301839	LB	239			239
53000084	FRA:RAIN CLEAN 5208 4950	LB				
53000045	FRA:FFS 700Z00 GV Rain	LB	1165			1160
53000014	FRA:ROSE A 2244	LB	376			376
53000057	FRA:ARYLESSENCE C-8318 LEMON Scent	LB	77			77
53000043	FRA:FFS 900K50 Lemon	LB	1160			1155
53000062	FRA:FFS 900K72 Floral / Wild Flower	LB	625			620
53000060	FRA:TFF 109404 Rain Fresh	LB				

Number	Description		Starting QTY	Mixed	Adjmts	Ending QTY
53000048	FRA:BELMAY 8538 19647X	LB	275			275
53000049	FRA:FFS Rain AFB 900 M77	LB	987			987
53000036	FRA:Floral Wildflower AFB300P47	LB	273			273
54000037	DYE:KEYACID BRILLIANT BLUE 201-080-50	LB	34			34
54000036	DYE:RHODAMINE B 500%	LB	6			6
54000045	DYE:SPECIAL BLUE GDFG 135	LB	3.5			3.5
54000046	DYE:CIBACRON BRILLIANT YELLOW	LB	7.5			7.5
54000010	DYE:FD & C YELLOW #5	LB	41			41
54000006	DYE:Supramine 3 BA Red	LB				
54000047	DYE:SUPRANOL YELLOW DYE 4GL	LB	3.5			3.5
54000012	DYE:PONTAMINE TURQ BLUE 8 GL	LB	15			15
54000014	DYE:PYLAKKLOR BLUE GREEN DYE S-348	LB	15.5			15.5
54000039	DYE:PYLAKLOR S184 YELLOW	LB	4.5			4.5
54000021	DYE:URANINE CONCENTRATE	LB	16			6

123 #

NTRS

Alcosperse 747 — 60%

✓ Dimethylaminoethyl methacrylate 65 gr. (60) 10-30 -5to1

✓ Butyl acrylate 45 gr. (40) (40)

Sodium AMPS 2-Acrylamido-2-Methyl Propyl (Powder)

Ammonium persulfate

✓ Tetradecyl dimethyl benzyl ammonium chloride (Monomer A-16)

Ammonium persulfate

Anionic 40-60

Stearic acid - 460 — 50 Kylene sulfonic acid

Ammonium persulfate

Cumene AMS - 90

NONIONIC Surfactant 9

FMB Quat 80%

P4 LAKlan yellow 5184 Dye

Lemon C-8318 perfume

Trisodium Phosphate

Sodium METASILICATE PENTAHYDRATE

ETHOXYLATED LINEAR ALCOHOL 9-6

Sodium Xylene Sulfonate 40%

GLYCOL ETHER DB

PLAKLOR Blue Green Dye

Sodium LAURYL ETHER SULFATE

COCONUT DIETHANOLAMIDE

ALPHA OLEPHIN SULFONATE 40%

EVAPORATIVE SALT

ROSE A224 perfume

DANTOGARD

Glycol 0-4C

CAL Form 35-60%

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK #'s 6 & 7

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CAUSTIC SODA 50%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CAUSTIC SODA 50%

EHS* ☐ Yes ☑ No

CAS #

If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	180000		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	196000	MAXIMUM DAILY AMOUNT	230000	ANNUAL WASTE AMOUNT		STATE WASTE CODE	0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☑ Rail Car	
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:	
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin		
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon		

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50 00%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, NORTHEAST SIDE OF BUILDING

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☑ Yes ☐ No

FACILITY ID# 1 9 - 0 4 9 - 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME: CHLORINE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME: CHLORINE

EHS* ☑ Yes ☐ No

CAS #: 7782-50-5

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only): ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES:

PHYSICAL STATE (Check one item only): ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER: 180000

FED HAZARD CATEGORIES (Check all that apply): ☐ Fire ☐ Reactive ☑ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
540000	900000		0

UNITS* (Check one item only): ☐ GALLONS ☐ CUBIC FEET ☑ POUNDS ☐ TONS

DAYS ON SITE: 365

Storage Container (Check all that apply):
☐ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☐ Fiber Drum ☐ Glass Bottle ☑ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other: _____
☐ Tank Inside Building ☐ Carboy ☐ Box ☐ Tote Bin
☐ Steel Drum ☐ Silo ☐ Cylinder ☐ Tank Wagon

STORAGE PRESSURE: ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	CHLORINE	☑ Yes ☐ No	7782-50-5
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK#27

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
AMMONIA AQUAEOUS

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
AMMONIA AQUAEOUS

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
6000

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
4000	6000		0

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)
☑ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☐ Fiber Drum ☐ Glass Bottle ☐ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other: _____
☐ Tank Inside Building ☐ Carboy ☐ Box ☐ Tote Bin
☐ Steel Drum ☐ Silo ☐ Cylinder ☐ Tank Wagon

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	29 00%	AMMONIA	☑ Yes ☐ No	7664-41-7
2		AQUA AMMONIA	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM TANK #'s 23,25,26,33 &48 AND WAREHOUSE

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID#: 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
HOUSEHOLD AMMONIA

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HOUSEHOLD AMMONIA

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
6200

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
20000	28000		0

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE: 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☑ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	8 00%	AMMONIA	☐ Yes ☑ No	1336-21-6
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, WW & TANK# 13

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
HYDROGEN PEROXIDE 50%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HYDROGEN PEROXIDE 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only): ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only): ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
10000

FED HAZARD CATEGORIES (Check all that apply): ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
5000	10000		0

UNITS* (Check one item only): ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE: 365

Storage Container (Check all that apply):

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car	
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:	
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin		
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon		

STORAGE PRESSURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT.	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50.00%	HYDROGEN PEROXIDE	☐ Yes ☑ No	7722-84-1
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK 15

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SURFONIC N-102

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SURFONIC N-102

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
12000

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
5000	12000		0

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car	
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.	
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin		
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon		

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1		POLY(OXY-1 2 ETHANEDIYL) ALPH	☐ Yes ☑ No	9016-45-9
2		SULFURIC ACID	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, NORTHEAST END OF BUILDING

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME: PROPANE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME: PROPANE

EHS* ☐ Yes ☑ No

CAS #: 74-98-6

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only): ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No | CURIES

PHYSICAL STATE (Check one item only): ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER: 18231

FED HAZARD CATEGORIES (Check all that apply): ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
10950	18231		0

UNITS* (Check one item only): ☐ GALLONS ☑ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE: 365

Storage Container (Check all that apply):
☑ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☐ Fiber Drum ☐ Glass Bottle ☐ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other. _____
☐ Tank Inside Building ☐ Carboy ☐ Box ☐ Tote Bin
☐ Steel Drum ☐ Silo ☑ Cylinder ☐ Tank Wagon

STORAGE PRESSURE: ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	97.00%	PROPANE	☐ Yes ☑ No	74-98-6
2	1.00%	ETHANE	☐ Yes ☑ No	74-84-0
3	1.00%	PROPYLENE	☐ Yes ☑ No	115-07-1
4	1.00%	BUTANE	☐ Yes ☑ No	106-97-8
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ACETYLENE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ACETYLENE

EHS* ☐ Yes ☑ No

CAS #
74-86-2

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER
130

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
200	390		0

UNITS* (Check one item only) ☐ GALLONS ☑ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b. ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	ACETYLENE	☐ Yes ☑ No	74-86-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
OXYGEN

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
OXYGEN

EHS* ☐ Yes ☑ No

CAS #
7782-44-7

If EHS is Yes, all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 249	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	350	MAXIMUM DAILY AMOUNT	747	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	OXYGEN	☐ Yes ☑ No	7782-44-7
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ARGON

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ARGON

EHS* ☐ Yes ☑ No

CAS #
7440-37-1

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER
250

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
150	250		0

UNITS* (Check one item only) ☐ GALLONS ☑ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a. AMBIENT ☑ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	ARGON	☐ Yes ☑ No	7440-37-1
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMOLD DEPARTMENT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME: MULTI GEAR OIL API GL-S SAE 85 W150

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME: MULTI GEAR OIL API GL-S SAE 85 W150

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	55		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	200	MAXIMUM DAILY AMOUNT	330	ANNUAL WASTE AMOUNT		STATE WASTE CODE	0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	95.00%	SOLV REF PETR BASE STOCK	☐ Yes ☑ No	64742-01-4
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION.

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMOLD

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID#: 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
NITROGEN

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
NITROGEN

EHS* ☐ Yes ☑ No

CAS #
7727-37-9

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER
304

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
2128	3648		0

UNITS* (Check one item only) ☐ GALLONS ☑ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE: 365

Storage Container (Check all that apply)
☐ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☐ Fiber Drum ☐ Glass Bottle ☐ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other. _____
☐ Tank Inside Building ☐ Carboy ☐ Box ☐ Tote Bin
☐ Steel Drum ☐ Silo ☑ Cylinder ☐ Tank Wagon

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	NITROGEN	☐ Yes ☑ No	7727-37-9
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM (BAG/DRUM STORAGE AREA)

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SODA ASH

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SODA ASH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only): ☑ PURE ☐ MIXTURE ☐ WASTE
RADIOACTIVE ☐ Yes ☑ No
CURIES

PHYSICAL STATE (Check one item only): ☑ SOLID ☐ LIQUID ☐ GAS
LARGEST CONTAINER: 55

FED HAZARD CATEGORIES (Check all that apply): ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
500	2000		0

UNITS* (Check one item only): ☐ GALLONS ☐ CUBIC FEET ☑ POUNDS ☐ TONS
DAYS ON SITE: 365

Storage Container (Check all that apply):
☐ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☑ Fiber Drum ☐ Glass Bottle ☐ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other
☐ Tank Inside Building ☐ Carboy ☐ Box ☐ Tote Bin
☐ Steel Drum ☐ Silo ☐ Cylinder ☐ Tank Wagon

STORAGE PRESSURE: ☑ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	99 80%	SODIUM CARBONATE	☐ Yes ☑ No	497-19-8
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMIND DEPARTMENT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ANTI-FREEZE & SUMMER COOLANT

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ANIT-FREEZE & SUMMER COOLANT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs *

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
33	55		0

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	95 00%	1 2 ETHANEDIOL	☐ Yes ☑ No	107-21-1
2	2.99%	BORAX	☐ Yes ☑ No	1303-96-4
3	0 99%	NITRIC ACID SODIUM SALT	☐ Yes ☑ No	7631-99-4
4	0.99%	NaOH	☐ Yes ☑ No	1310-73-2
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK #'s 1,2,3 & 5 AND WAREHOUSE

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SODIUM HYPOCHLORITE BLEACH

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SODIUM HYPOCHLORITE BLEACH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
22500

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
208000	208000		0

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☑ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS*	CAS#
1	14 00%	SODIUM HYPOCHLORITE	☐ Yes ☑ No	7681-52-9
2	0.50%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK SO-CAL INC (T-CHEM PRODUCTS)

CHEMICAL LOCATION
TANK FARM COMPRESSER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID#: 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
WASTE OIL

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
WASTE OIL

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☐ MIXTURE ☑ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
300

FED HAZARD CATEGORIES (Check all that apply) ☑ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
100	300	3000	221

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE: 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☑ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)

KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION

TANK FARM WASTE WATER TRETMENT DRUM STORAGE AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME

T-10FS HYDROCHLORIC ACID SOLUTION

TRADE SECRET ☐ Yes ☑ No

If Subject o EPCRA, refer to instructions

COMMON NAME

HYDROCHLORIC ACID

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER 55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
110	220		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	1 00%	HYDROCHLORIC ACID	☐ Yes ☑ No	7647-01-0
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM FLAMABLE STORAGE AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BLEACH & AMMONIA PRODUCT FRAGRANCES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
PERFUMES

EHS* ☐ Yes ☑ No

CAS #

*If EHS is 'Yes', all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
CLASS II

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
185	330		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS — DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION.

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
FLAMMABLE DRUM STORAGE AREA SITE SE LOT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BLEACH & AMMONIA FRAGRANCES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
PERFUMES

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
CLASS I

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	385	MAXIMUM DAILY AMOUNT	770	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car	
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.	
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin		
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon		

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT.	HAZARDOUS COMPONENT (For mixture or waste only)	EHS*	CAS #
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION:

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
FLAMABLE DRUM STORAGE AREA SITE SE LOT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME: PHOSPHORIC ACID

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME: PHOSPHORIC ACID

EHS* ☐ Yes ☑ No

CAS #: 7664-38-2

If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
45	55		

UNITS* (Check one item only): ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS — DAYS ON SITE: 365

Storage Container (Check all that apply):

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT.	HAZARDOUS COMPONENT (For mixture or waste only)	EHS*	CAS#
1	75.00%	PHOSPHORIC ACID	☐ Yes ☑ No	7664-38-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
BACK UP GENERATOR TANK

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DIESEL FUEL NO. 2

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DIESEL FUEL NO. 2

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only): ☑ PURE ☐ MIXTURE ☐ WASTE
RADIOACTIVE ☐ Yes ☑ No
CURIES

PHYSICAL STATE (Check one item only): ☐ SOLID ☑ LIQUID ☐ GAS
LARGEST CONTAINER: 110

FED HAZARD CATEGORIES (Check all that apply): ☑ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
75	110		

UNITS* (Check one item only): ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS
DAYS ON SITE: 365

Storage Container (Check all that apply):
☑ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☐ Fiber Drum ☐ Glass Bottle ☐ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other.
☐ Tank Inside Building ☐ Carboy ☐ Box ☐ Tote Bin
☐ Steel Drum ☐ Silo ☐ Cylinder ☐ Tank Wagon

STORAGE PRESSURE: ☑ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or an

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM BOILER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BWT-OD-PPSA CR3057

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
BOILER TREATMENT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes" all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☑ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
30	55		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	20.00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	1310-58-3
2	10 00%	DIETHYLAMINOETHANOL	☐ Yes ☑ No	100-37-8
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION.

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM BOILER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
POTASIUM HYDROXIDE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CAUSTIC POTASH- LIQUID 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	12000		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	8000	MAXIMUM DAILY AMOUNT	12000	ANNUAL WASTE AMOUNT		STATE WASTE CODE	
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☒ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☒ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50.00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	7732 -18- 5
2	50.00%	WATER	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK #45 IN TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 MAP# (optional) GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
POTASSIUM HYPOCHLORITE BLEACH 7-15%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
POTASSIUM HYPOCHLORITE BLEACH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes" all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	6000		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	2000	MAXIMUM DAILY AMOUNT	6000	ANNUAL WASTE AMOUNT			STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS			DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car	
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other*	
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin		
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon		

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT.	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
OPACIFIER 305

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
STYRENE/ACRYLIC EMULSION POLYMER

EHS* ☐ Yes ☑ No

CAS #
68649-55-8

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	55		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health		
AVERAGE DAILY AMOUNT	55	MAXIMUM DAILY AMOUNT	55	ANNUAL WASTE AMOUNT		STATE WASTE CODE	
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☑ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
N60 -SURFONIC N-60

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
NONIONIC SURFACTANT- ALKYIPHENOL ETHOXOYLATE

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health

AVERAGE DAILY AMOUNT	1100	MAXIMUM DAILY AMOUNT	1100	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	POLY -,APLPHA	☐ Yes ☑ No	9016-45-9
2	10 00%	GLYCOL ETHERS	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION.

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CHELATING LIQUID 100

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
VERSENE 100

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES		
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55					
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health				
AVERAGE DAILY AMOUNT 160	MAXIMUM DAILY AMOUNT 220	ANNUAL WASTE AMOUNT	STATE WASTE CODE						
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365				
Storage Container (Check all that apply)	☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car				
	☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.				
	☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin					
	☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon					
STORAGE PRESSURE	☑ a. AMBIENT	☐ b. ABOVE AMBIENT	☐ c BELOW AMBIENT						
STORAGE TEMPERATURE	☑ a AMBIENT	☐ b ABOVE AMBIENT	☐ c BELOW AMBIENT	☐ d CRYOGENIC					

	% WT.	HAZARDOUS COMPONENT (For mixture or waste only)*	EHS	CAS#
1	35.00%	ETHYLENEDIAMINE TETRAACETIC ACID SALT	☐ Yes ☑ No	64-02-08
2	1.00%	SODIUM GLYCOLATE	☐ Yes ☑ No	2836-32-0
3	1 00%	NITRILORTIACETIC ACID TRISODIUM SALT	☐ Yes ☑ No	5064-31-3
4	1 00%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
5	62.00%	WATER	☐ Yes ☑ No	7732-18-5

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 - 0 4 9 - 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DETERGENT AND AMMONIA DYES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DYES

EHS* ☐ Yes ☑ No

CAS #
81-88-9

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☑ SOLID ☐ LIQUID ☐ GAS

LARGEST CONTAINER
25

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☑ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
23	25		

UNITS* (Check one item only) ☐ GALLONS ☐ CUBIC FEET ☑ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☑ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DGC WinSurf

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
AQUEOUS SYNTHETIC DETERGENT/CHELATE

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☑ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
200	440		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	10.00%	AMINOCARBOXYLIC ACID	☐ Yes ☑ No	60-00-4
2	3.00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	1310-58-3
3	87 00%	WATER	☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 - 0 4 9 - 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DANTOGARD DMDMHYDANTION

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DMDM HYDANTION

EHS* ☐ Yes ☑ No

CAS #
NONE ESTABLISHED

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55 Ga	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
55	110	0	

UNITS* (Check one item only): ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS — DAYS ON SITE: 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE: ☒ a AMBIENT ☒ b. ABOVE AMBIENT ☒ c BELOW AMBIENT ☒ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	1.50%	FORMALDEHYDE	☑ Yes ☐ No	50-00-0
2	59.00%	WATER	☐ Yes ☑ No	7732-18-5
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION:

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
FMB 1210-8

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ACTIVES

EHS* ☐ Yes ☑ No

CAS #
MIXTURE

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
FLAMMBLE

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☑ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	55	MAXIMUM DAILY AMOUNT	110	ANNUAL WASTE AMOUNT	0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50.00%	N.N-DIECYL-N.N.- DIMETHYLAMMONIUM CHLORIDE	☐ Yes ☑ No	7173-51-5
2	30 00%	N-ALKYL-N N-DIMETHYLBENZYLAMMONIUMCHLORIDE	☐ Yes ☑ No	8001-54-5
3	12.50%	ETHANOL	☑ Yes ☐ No	64-17-5
4	7 50%	WATER	☐ Yes ☑ No	7732-18-5
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or ar

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
TRISODIUM ORTHOPHOSPHATE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
TRISODIUM PHOSPHATE

EHS* ☐ Yes ☑ No

CAS #

If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
NONE

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 50	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	1000	MAXIMUM DAILY AMOUNT	2000	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☑ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	98.00%	TRISODIUM PHOSPHATE DODECAHYDRATE	☐ Yes ☑ No	10101-89-0
2	2.00%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Hazardous Materials Business Plan - List of Chemicals

Permit No #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	20000	GAL	Liquid	10000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
HELIUM	HELIUM	300	CU FT	Gas	300	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
VERSONAL (R) 120 CLEANING AGENT	VERSONAL (R) 120 CLEANING AGENT	110	GAL	Liquid	55	
DIESEL FUEL NO 2	DIESEL FUEL NO 2	110	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
TEA	TRIETHANOLAMINE 85	55	GAL	Liquid	55	
NONIONIC SURFACTANT-ALKYIPHENOL ETHOXOYLATE	N60 -SURFONIC N-60	1100	GAL	Liquid	55	
VERSENE 100	CHELATING LIQUID 100	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	

Hazardous Materials Business Plan - List of Chemicals

Permit No #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	20000	GAL	Liquid	10000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
HELIUM	HELIUM	300	CU FT	Gas	300	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
VERSONAL (R) 120 CLEANING AGENT	VERSONAL (R) 120 CLEANING AGENT	110	GAL	Liquid	55	
DIESEL FUEL NO 2	DIESEL FUEL NO 2	110	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
TEA	TRIETHANOLAMINE 85	55	GAL	Liquid	55	
NONIONIC SURFACTANT-ALKYIPHENOL ETHOXOYLATE	N60 -SURFONIC N-60	1100	GAL	Liquid	55	
VERSENE 100	CHELATING LIQUID 100	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	

STOCK STATUS REPORT

Items: 60 Thru 6Z Location: 90 Thru 90 Product Category: All
Excluding: Zero Quantity On Hand Items
In Order By: Location/Item Cost Shown Is Standard Cost
Status: Reo = At Or Below Reorder Level O/S = Out Of Stock Inspection Locations Excluded MRB Locations Excluded

Item-Number	Item-Description-1 / Qty-On-Hand / Value-Of-Item	Qty-Allocated / Usage-Ytd	Item-Description-2 / Qty-Backordered / Order-Up-To	Product-Category / Qty-On-Order / Minimum-Order	Backorderable? / Cost / Price	Active-Code/Date / Reorder-Level / Vendor	Status / UOM
Location: 90 KIK-SoCal Inc.							
60010100002	Ing:Potassium Hydroxide 50%			CHE Chemicals	No	A	08/20/2002
	88,039.00	0.00	0.00	49,940.00	.168000	21,675.80	
	14,790.5500	466,269.65	50,914.00	0.00	.000000	OCCCHE	LB
60010100010	Ing:Acusol 820			CHE Chemicals	No	A	07/12/1999
	475.00	0.00	0.00	0.00	1.410000	0.00	
	669.7500	0.00	0.00	0.00	.000000	VAWA	LB
60010100015	Ing:Alcosperse 747			CHE Chemicals	No	A	07/12/1999
	525.00	0.00	0.00	0.00	.670000	0.00	
	351.7500	0.00	0.00	0.00	.000000	ALCCHE	LB
60010100016	Ing:Caustic Soda 50%			CHE Chemicals	No	A	07/12/1999
	25,071.88	0.00	0.00	3,072,340.00	.061300	0.00	
	1,536.9100	95,320,589.15	0.00	0.00	.000000	PIOAME	LB
60010100026	Ing:Rock Salt - Super Sack			CHE Chemicals	No	A	07/12/1999
	11,500.00	0.00	0.00	0.00	.025000	0.00	
	287.5000	0.00	0.00	0.00	.000000		LB
60010100027	Ing:Opacifier Acusol OP305			CHE Chemicals	No	A	07/12/1999
	504.00	0.00	0.00	0.00	1.170000	18.00	
	589.6800	1,444.42	35.00	0.00	.000000	UNIVAR	LB
60010100029	Ing:Tinopal CBS-X			CHE Chemicals	No	A	07/12/1999
	100.00	0.00	0.00	0.00	17.190000	3.00	
	1,719.0000	255.85	4.00	0.00	.000000	KEYSTO	LB
60010100030	Ing:Borax 5 MOL		Technical Grade	CHE Chemicals	No	A	07/12/1999
	50.00	0.00	0.00	0.00	.355000	0.00	
	17.7500	0.00	0.00	0.00	.000000	VAWA	LB
60010100036	Ing:Calcium Chloride 77% Flake			CHE Chemicals	No	A	07/12/1999
	50.00	0.00	0.00	0.00	.250000	0.00	
	12.5000	0.00	0.00	0.00	.000000	VAWA	LB
60010100044	Ing:N Clear Silicate			CHE Chemicals	No	A	07/12/1999
	1,320.00	0.00	0.00	0.00	.270000	0.00	
	356.4000	1,603.56	0.00	0.00	.000000		LB
60010100048	Ing:Ucarcide 250			CHE Chemicals	Yes	A	07/13/2000
	1,903.83	0.00	0.00	0.00	2.960000	85.00	
	5,635.3500	29,416.12	336.00	0.00	.000000	CHEPOI	LB
60010100049	Ing:Evaporated Salt			CHE Chemicals	No	A	07/12/1999
	1,300.00	0.00	0.00	2,000.00	.090000	1,000.00	
	117.0000	0.00	3,000.00	0.00	.000000	BREWES	LB

STOCK STATUS REPORT

60010100050	Ing:Anti-Foam AF9030		662507		CHE Chemicals	No	A	07/12/1999
	358.98	0.00	0.00	0.00	2.961000		1.00	
	1,062.9500	280.19	7.00	0.00	.000000	UNIVAR		LB
60010100051	Ing:Fabric Softener Base		Accosoft 550 PG		CHE Chemicals	No	A	07/12/1999
	22,483.20	0.00	0.00	0.00	.500000		3,477.00	
	11,241.6000	399,765.19	11,291.00	0.00	.000000	STEPAN		LB
60010100052	Ing:Soda Ash Grade 100				CHE Chemicals	No	A	07/12/1999
	2,964.67	0.00	0.00	0.00	.145000		500.00	
	429.8800	22,309.04	3,200.00	0.00	.000000	LACHEM		LB
60010100056	Ing:Ammonyx Lo (Surfact)				CHE Chemicals	No	A	07/12/1999
	850.00	0.00	0.00	0.00	1.080000		425.00	
	918.0000	66.90	850.00	0.00	.000000	STEPAN		LB
60010100057	Ing:Ammonia 29.4%				CHE Chemicals	No	A	07/12/1999
	2,762.85	0.00	0.00	37,000.00	.075000		6,500.00	Reo
	207.2100	2,954,996.97	43,500.00	0.00	.000000	LARIND		LB
60010100058	Ing:Citric Acid Granular				CHE Chemicals	No	A	07/12/1999
	322.29	0.00	0.00	0.00	.740000		33.00	
	238.5000	7,627.43	195.00	0.00	.000000	LACHEM		LB
60010100059	Ing:Blankophor Artic White Tx				CHE Chemicals	No	A	07/12/1999
	0.00	0.00	0.00	0.00	1.500000		0.00	
	.0100	410.43	0.00	0.00	.000000			LB
60010100060	Ing:Chlorine Liquid				CHE Chemicals	No	A	07/12/1999
	79,882.00	0.00	0.00	1,980,000.00	.125000		180,000.00	Reo
	9,985.2500	41,196,266.87	1,600,000.00	0.00	.000000	PIOAME		LB
60010100062	Ing:Lytron 2503-55 (C&D)				CHE Chemicals	No	A	07/12/1999
	399.00	0.00	0.00	0.00	.000000		0.00	
	.0000	43.98	0.00	0.00	.000000			LB
60010100063	Ing:T.E.A. 85% (C&D)				CHE Chemicals	No	A	07/12/1999
	430.00	0.00	0.00	0.00	.000000		0.00	
	.0000	11,096.22	0.00	0.00	.000000			LB
60010100064	Ing:Surfonic N-102				CHE Chemicals	No	A	07/12/1999
	5,987.90	0.00	0.00	0.00	.570000		887.00	
	3,413.1000	83,302.21	2,035.00	0.00	.000000	HUNPET		LB
60010100065	Ing:Versenol 120 (C&D)				CHE Chemicals	No	A	07/12/1999
	603.00	0.00	0.00	0.00	.000000		0.00	
	.0000	8,333.54	0.00	0.00	.000000			LB
60010100066	Ing:BIOSOFT D-40		# 0080066		CHE Chemicals	No	A	07/12/1999
	20,921.76	0.00	0.00	20,000.00	.452500		4,920.00	
	9,467.1000	307,422.92	13,093.00	0.00	.000000	STEPAN		LB
60010100067	Ing:Kathon CG				CHE Chemicals	No	A	07/12/1999
	336.00	0.00	0.00	0.00	12.400000		0.00	
	4,166.4000	0.00	0.00	0.00	.000000			LB
60010100068	Ing:Magnesium Chloride				CHE Chemicals	No	A	07/12/1999
	2,240.28	0.00	0.00	0.00	.217500		50.00	

	487.2600	10,543.55	2,450.00	0.00	.000000	LACHEM		LB
60010100069	Ing:Habor Lite HL-700/HI-Flow			CHE Chemicals	No	A	07/12/1999	
	3,891.96	0.00	0.00	0.00	.335333	1,800.00		
	1,305.1000	129,905.54	5,385.00	0.00	.000000	LOYCHE		LB
60010100077	Ing:Cellu-Flo Sl - 299/Nafco C			CHE Chemicals	No	A	07/12/1999	
	0.00	0.00	0.00	300.00	1.720000	100.00	Reo	
	.0100	12,831.46	400.00	0.00	.000000	LOYCHE		LB
60010100078	Ing:Versene 100			CHE Chemicals	No	A	01/10/2001	
	2,379.88	0.00	0.00	0.00	.455000	480.00		
	1,082.8500	83,972.28	1,959.00	0.00	.000000	ASHCHE		LB
60010100079	ING:Accosoft 550-90 HF			CHE Chemicals	Yes	A	11/04/1999	
	2,250.00	0.00	0.00	0.00	.660000	0.00		
	1,485.0000	0.00	0.00	0.00	.000000			LB
60010100110	Ing:Ninol 40-CO	Amide		CHE Chemicals	No	A	07/12/1999	
	457.00	0.00	0.00	0.00	1.270000	105.00		
	580.3900	0.00	945.00	0.00	.000000	STEPAN		LB
60010100120	Ing:Savinase-16L			CHE Chemicals	No	A	07/12/1999	
	55.00	0.00	0.00	0.00	8.470000	0.00		
	465.8500	0.00	0.00	0.00	.000000			LB
60010100130	Ing:Sodium Citrate			CHE Chemicals	No	A	07/12/1999	
	50.00	0.00	0.00	0.00	.650000	0.00		
	32.5000	0.00	0.00	0.00	.000000	VAWA		LB
60010100135	Ing:Sodium Gluconate			CHE Chemicals	No	A	07/12/1999	
	50.00	0.00	0.00	0.00	.690000	0.00		
	34.5000	0.00	0.00	0.00	.000000	VAWA		LB
60010100140	Ing:Termamyl 300L(D)			CHE Chemicals	No	A	07/12/1999	
	55.00	0.00	0.00	0.00	7.790000	0.00		
	428.4500	0.00	0.00	0.00	.000000			LB
60010100150	Ing:Varonic K-205	Textile Grade		CHE Chemicals	No	A	07/12/1999	
	400.00	0.00	0.00	0.00	1.950000	0.00		
	780.0000	0.00	0.00	0.00	.000000	SOCLYN		LB
60010100200	Ing:Steol CS-460	S.L.E.S.		CHE Chemicals	No	A	07/12/1999	
	2,517.00	0.00	0.00	0.00	1.090000	3,375.00	Reo	
	2,743.5300	0.00	8,775.00	0.00	.000000	STEPAN		LB
60010100210	Ing:Stepanate SXS	S.X.S.		CHE Chemicals	No	A	07/12/1999	
	308.00	0.00	0.00	0.00	.505000	315.00	Reo	
	155.5400	0.00	815.00	0.00	.000000	STEPAN		LB
60010100215	Ing:Surfonic N-60			CHE Chemicals	No	A	07/12/1999	
	14,486.00	0.00	0.00	0.00	.820000	258.00		
	11,878.5200	19,488.22	430.00	0.00	.000000	HUNPET		LB
60010100217	Ing:Ammonyx CDO Special			CHE Chemicals	No	A	07/12/1999	
	80.00	0.00	0.00	0.00	.000000	0.00		
	.0000	0.00	0.00	0.00	.000000			LB

STOCK STATUS REPORT

60010100219	Ing:Winsurf DGC			CHE Chemicals	No	A	09/18/2002	
	752.00	0.00	0.00	4,080.00	2.400000		2,040.00	Reo
	1,804.8000	23,899.57	4,080.00	0.00	.000000	WINCHE		LB
60010100222	Ing:Winsurf NLS-90			CHE Chemicals	No	A	07/12/1999	
	467.00	0.00	0.00	0.00	1.290000		0.00	
	602.4300	0.00	0.00	0.00	.000000	WINCHE		LB
60020200033	Fra:Floral #6137-77 Lemo			CHE Chemicals	No	A	07/12/1999	
	244.00	0.00	0.00	0.00	6.460000		0.00	
	1,576.2400	88.99	0.00	0.00	.000000			LB
60020200034	Fra:Pine Ammonia (C&D)			CHE Chemicals	No	A	07/12/1999	
	500.00	0.00	0.00	0.00	.000000		0.00	
	.0000	786.87	0.00	0.00	.000000			LB
60020200035	Fra:Clear Ammonia (C&D)			CHE Chemicals	No	A	07/12/1999	
	251.00	0.00	0.00	0.00	.000000		0.00	
	.0000	1,377.23	0.00	0.00	.000000			LB
60020200036	Fra:Lemon Ammonia Aroma 22658			CHE Chemicals	No	A	07/12/1999	
	1,331.76	0.00	0.00	0.00	3.550000		391.00	
	4,727.7500	19,385.94	828.00	0.00	.000000	FLAFRA		LB
60020200037	Fra:Lemon PF1227 Aroma C&D			CHE Chemicals	No	A	07/12/1999	
	857.00	0.00	0.00	0.00	.000000		0.00	
	.0000	10,692.60	0.00	0.00	.000000			LB
60020200088	Fra:FFS 500F21 FAB SOFT			CHE Chemicals	No	A	12/13/2000	
	353.83	0.00	0.00	0.00	5.250000		400.00	Reo
	1,857.6200	10,771.69	800.00	0.00	.000000	FLAFRA		LB
60020200089	FRA:FFS 7D0ZD0 GV Rain			CHE Chemicals	No	A	12/13/2000	
	1,108.00	0.00	0.00	0.00	4.250000		400.00	
	4,709.0000	0.00	1,200.00	0.00	.000000	FLAFRA		LB
60020200110	Fra:Lemon Scent Bleach 900K50			CHE Chemicals	No	A	07/12/1999	
	1,041.83	0.00	0.00	0.00	5.500000		400.00	
	5,730.0800	891.57	1,200.00	0.00	.000000	FLAFRA		LB
60020200111	Fra:Floral/Wildflower 900K72			CHE Chemicals	No	A	07/12/1999	
	725.01	0.00	0.00	0.00	6.000000		169.00	
	4,350.1000	5,636.25	323.00	0.00	.000000	FLAFRA		LB
60020200112	Fra:Rain/Fresh 109-404	DO NOT USE SEE GV RAIN		CHE Chemicals	No	A	07/12/1999	
	540.46	0.00	0.00	0.00	5.480000		0.00	
	2,961.7500	2,192.80	0.00	0.00	.000000			LB
60020200114	Fra:Perfume Reg. 8538-19647X			CHE Chemicals	No	A	07/12/1999	
	273.00	0.00	0.00	0.00	6.750000		3.00	
	1,842.7500	149.62	4.00	0.00	.000000	FLAFRA		LB
60020200115	Fra:Perfume Rain 900M77			CHE Chemicals	No	A	07/12/1999	
	982.00	0.00	0.00	0.00	3.650000		0.00	
	3,584.3000	191.90	0.00	0.00	.000000			LB
60020200118	Fra:Floral/Wildflower 300P47			CHE Chemicals	No	A	07/12/1999	
	300.00	0.00	0.00	0.00	5.750000		3.00	

	1,725.0000	20.36	4.00	0.00	.000000	FLAFRA		LB
60030300001	Dye:Keyacid Blue 201-080-50			CHE Chemicals	No	A	07/12/1999	
	34.00	0.00	0.00	0.00	17.120000		1.00	
	582.0800	49.10	1.00	0.00	.000000	KEYSTO		LB
60030300008	Dye:D & C Green (C&D)			CHE Chemicals	No	A	07/12/1999	
	53.50	0.00	0.00	0.00	.000000		0.00	
	.0000	52.39	0.00	0.00	.000000			LB
60030300012	Dye:Rhodamine B Conc.			CHE Chemicals	No	A	07/12/1999	
	9.00	0.00	0.00	0.00	16.020000		0.00	
	144.1800	0.00	0.00	0.00	.000000			LB
60030300015	Dye:Acramine Blue Gsn (C&D)			CHE Chemicals	No	A	07/12/1999	
	6.50	0.00	0.00	0.00	.000000		0.00	
	.0000	3.66	0.00	0.00	.000000			LB
60030300016	Dye:Special Blue CDFG-135			CHE Chemicals	No	A	07/12/1999	
	3.50	0.00	0.00	0.00	32.950000		0.00	
	115.3300	4.59	0.00	0.00	.000000			LB
60030300017	Dye:Ply. Olive Gr LX-5385 (C&D			CHE Chemicals	No	A	07/12/1999	
	10.00	0.00	0.00	0.00	.000000		0.00	
	.0000	9.52	0.00	0.00	.000000			LB
60030300019	Dye:Cibacron Brilliant Yellow			CHE Chemicals	No	A	07/12/1999	
	7.50	0.00	0.00	0.00	24.340000		0.00	
	182.5500	5.84	0.00	0.00	.000000			LB
60030300020	Dye:Fd & C Yellow #5 (C&D)			CHE Chemicals	No	A	07/12/1999	
	43.00	0.00	0.00	0.00	.000000		0.00	
	.0000	13.37	0.00	0.00	.000000			LB
60030300021	Dye:FD&C Yellow #5			CHE Chemicals	No	A	09/30/1999	
	0.00	0.00	0.00	0.00	14.420000		2.00	Reo
	.1200	190.76	7.00	0.00	.000000	KEYSTO		LB
60030300022	Dye:Dry Keyamine Tuquoise G			CHE Chemicals	No	A	07/12/1999	
	0.00	0.00	0.00	0.00	7.180000		0.00	
	.0400	119.34	0.00	0.00	.000000			LB
60030300023	Dye:Supramine 3BA Red601-035-6			CHE Chemicals	No	A	07/12/1999	
	0.00	0.00	0.00	0.00	10.300000		0.00	
	.1000	88.72	0.00	0.00	.000000			LB
60030300024	Dye:Supranol Yellow Dye 4GL			CHE Chemicals	No	A	07/12/1999	
	3.50	0.00	0.00	0.00	35.990000		0.00	
	125.9700	2.50	0.00	0.00	.000000			LB
60030300025	Dye:Liq Keyamine Turq#20508642			CHE Chemicals	Yes	A	09/26/2002	
	2.30	0.00	0.00	25.00	4.050000		8.00	Reo
	9.3200	86.04	17.00	0.00	.000000	KEYSTO		LB
60030300061	Dye:Uranine Conc.			CHE Chemicals	No	A	07/12/1999	
	4.40	0.00	0.00	0.00	9.820000		1.00	
	43.2900	17.85	1.00	0.00	.000000	KEYSTO		LB

STOCK STATUS REPORT

Totals:	308,264.66	0.00	0.00	5,165,685.00
	125,348.4400	141,144,971.02		

70 Items Printed

Total Value Of Inventory:

Including Negative Value(s): 125,348.44

Not Including Negative Value(s): 125,348.44

Hazardous Materials Business Plan - List of Chemicals

Permit No #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	230000	GAL	Liquid	180000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	*HOUSEHOLD AMMONIA*	*28000*	GAL	*Liquid*	*6200*	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
HELIUM	HELIUM	300	CU FT	Gas	300	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
VERSONAL (R) 120 CLEANING AGENT	VERSONAL (R) 120 CLEANING AGENT	110	GAL	Liquid	55	
DIESEL FUEL NO 2	DIESEL FUEL NO. 2	110	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
NONIONIC SURFACTANT-ALKYIPHENOL ETHOXOYLATE	N60 -SURFONIC N-60	1100	GAL	Liquid	55	
VERSENE 100	CHELATING LIQUID 100	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK #'s 6 & 7

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CAUSTIC SODA 50%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CAUSTIC SODA 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is Yes, all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 22000	
RED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 16000	MAXIMUM DAILY AMOUNT 32000	ANNUAL WASTE AMOUNT			STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Dru	☐ Fiber Drum	☐ Glass Bottle	☑ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.
☐ Tank Inside Buildin	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

No.	% WT	III. HAZARDOUS COMPONENT (for mixture or waste only)	EHS*	CAS #
1	50 00%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION.

If EPCRA, Please Sign Here

PED

				Reporting Period	Jan - Dec	2002		
1	1200	O&AB Pads	01	FILTER RECYC.	21701803	No	02/21/02	1
2	800	O&AB Pads	01	FILTER RECYC.	21709692	No	04/22/02	2
2	1000	O&AB Pads	01	FILTER RECYC	21702304	No	06/25/02	3
2	1000	O&AB Pads	01	FILTER RECYC.	21711101	No	09/12/02	4
1	2000	Oil & Water	02	WESTERN ENV.	21611602	No	09/12/02	5
8	**6000**	<<<

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

Instructions for Completing the 2003 Environmental Packet

Please read the instructions carefully, as your thoroughness will reduce our difficultly in assessing your facility for the 2004-reporting year.

In order to complete this packet, the Environmental Department offers the following advice:

1. **Review all pre-printed information for accuracy.** This is the information that United States Compliance has on your facility. Please make a single strike through any incorrect information and provide the updated information in that box.
2. **Complete all blank fields.** If a field is blank, please provide the requested information. If the field does not apply to your facility, enter N/A
3. **A majority of the packet can be completed prior to January 1, 2004.** Completing this information ahead of time will assist in returning the packet to U.S. Compliance on time.
4. **Call the Environmental Specialist that mailed this packet to you.** An Environmental Specialist can answer any question regarding the information requested.
5. **Complete this packet with your EH&S Advisor.** They are familiar with your facility and the information we are requesting

The Environmental Packet is due back to the Environmental Department by **January 9, 2004** This date insures we are able to process your information in a timely and accurate manner.

Thank you for taking the time to complete this packet

Packet Completed By:

A.	Individual Completing Packet:	Deborah Johnson
	Date:	1/19/04

1. General Information

1.1	**Client Name:**	KIK-SoCal Inc			
1.2	**Facility Address:**	9028 Dice Road Sante Fe Springs,CA 90670			
1.3	**Phone:**	(562) 946-6427	**Fax:**	(562) 946-5417	
1.4	**Environmental Contact:**	Derrell Johnson			
1.5	**Contact Title:**	SAFETY/ENVIRONMENTAL SUPV.			
1.6	**Contact Email:**	djohnson@kikcorp.com			
1.7	**Signing Official:**	Bob Brown			
1.8	**Signing Official Title:**	General Manager			
1.9	**Public Contact:**	☐U.S. Compliance ☒Other:			
1.10	**SIC Code:**	, 2841, 2841			
1.11	**Dun & Bradstreet Number:**	051482784			
1.12	**Number of Employees:**	74			
1.13	**Parent Company Name:**	KIK International, Inc.			
1.14	**Parent Company Address:**	33 Macintosh Boulevard Concord, ONT L4K 4L5			
1.15	**Parent Company Dun & Bradstreet Number:**				
1.16	**Owner Name:**	KIK INTERNATIONAL, INC.			
1.17	**Production Ratio:** (processed, produced)	**2003:**	**Units:**		
		2002:	**Units:**		
1.18	**Emergency Contact & Title:**	Bob Brown, General Manager			
1.19	**Contact 24 Hour Phone:**	310-612-2001			
1.20	**Emergency Contact 2 & Title:**	Jim Rissman, Plant Maintenance Supervisor			
1.21	**Contact 24 Hour Phone:**	301-702-7333			
1.22	**Fire Department Name & Address:**	Santa Fe Springs 11300 Greenstone Avenue Santa Fe Springs, CA 90670			
1.23	**Fire Department Phone:**	562-944-9713			

2. Usage/Storage Information

2.1	**Please provide the following information for the assessment of material usage and storage for the 2003 reporting period (January 1 – December 31, 2003):**
	1. Raw material usage and storage. Please submit one of the following. a) Updated 2002 SARA spreadsheet, or b) Monthly recordkeeping; or c) Purchase records of materials used for production in 2003 2. New material usage and storage. a) Complete and attach a MSDS Cover Sheet (located on the following page) for each material not listed on the 2002 SARA spreadsheet to the corresponding MSDS. 3 Actual Usage. a) Please supply actual material usage amounts for 2003 4. Forward all reporting forms to U.S Compliance.

2.2 **Complete the following table indicating the type of fuel used, the amount of fuel used, and the process the fuel was used in for the year 2003.**

Fuel Type	Amount (MCF, Btu, etc.)	How Fuel Was Used
		☐Comfort Heat ☐Process Related
		☐Comfort Heat ☐Process Related
		☐Comfort Heat ☐Process Related
		☐Comfort Heat ☐Process Related
		☐Comfort Heat ☐Process Related

3. MSDS Cover Sheet for All New Materials

(Please photocopy as necessary)

	Please complete and attach to the corresponding, most up-to-date, MSDS.		
3.1	**Material Name:**	N/A	
3.2	**Maximum Amount Stored On-Site During 2003:**		☐Pounds ☐Gallons ☐Other
3.3	**Average Daily Amount Stored On-Site During 2003:**		☐Pounds ☐Gallons ☐Other
3.4	**Amount Used During 2003:**		☐Pounds ☐Gallons ☐Other.
3.5	**Storage Location:** (Example, Southwest corner of plant in maintenance area)		
3.6	**Type of Container Material Stored in:** (Example, 55-gallon steel drum)		
3.7	**Describe the Process in which this Material is Used:**		

3.8	**This section for U. S. Compliance use only.**			
	Bulk density:		Specific gravity:	
	Physical state	Solid	Liquid	Gas
	SARA hazards: Acute	Chronic	Fire	
	Pressure	Reactive	SARA 302 EHS	
	SARA TRI Chemical			

4. Industrial Battery Information

The sulfuric acid found in electric industrial truck (e.g. forklift, pallet jack, etc.) batteries is reportable under SARA Section 312 (Tier II) Please provide the following information for the 2003 reporting period.

4.1	**Does your Facility Use Battery-Operated Industrial Trucks?**	☐Yes ☒No
	If yes, please provide the following information:	
4.2	If battery inventory has not changed since 2002, please check here ☐ (skip 4.3 if checked)	

4.3

Battery Manufacturer	Battery Model Number	Approximate weight of Battery	Total Number of Batteries Used/Stored in 2003
N/A			

Please include an MSDS for each type of battery listed.

KIK-SoCal Inc.
9028 Dice Road
Sante Fe Springs, CA 90670

5. Hazardous Waste

5.1	**Hazardous Waste Coordinator:**	DERRELL JOHNSON
5.2	**Generator Status:**	~~LQG~~ NON RCRA Check here if non-generator of hazardous waste ☐
5.3	**Waste Currently Stored On-Site**	
	Number of Drums	**Description of Waste**
	4 - 55 gal	OIL/WATER
	2 - Totes	OIL/RUST/AMMUNITION ABSORBENT PADS

5.4	**Please provide the following information when you submit your completed packet:** 1 ☑ **Copies of *all* hazardous waste manifests** for 2003 COVER SHEET 2. ☐ Copies of all straight bills of lading for non-hazardous and recycled waste shipments. 3. ☐ All Hazardous Waste Annual Report forms.
5.5	**Illinois Clients Only:** 1. ☐ Please submit Illinois Non-Hazardous Special Waste Annual Report Form.

Attention all Large Quantity Generators...This is a Biennial Reporting year. Please be sure to include all appropriate reporting forms and documents.

N/A

6. Storm Water

6.1	**General storm water permit applicable for your facility:** Yes
6.2	**Please submit the following, if not already submitted:** 1. Copies of all storm water inspections conducted during 2003 2. Copies of all storm water monitoring or testing conducted during 2003.

7. Industrial Discharge

7.1	**Public Waste Water Treatment Plant (POTW) Contact Information:**	*County Sanitation Districts of LA County* PO Box 4998 Whittier, CA 90607

7.2 **Complete the following Water Balance for your facility**
Input must equal output

Incoming Water Supply (Gallons)

	January – June	July – December
City Water Supply		
Private Wells(s)		
Other:		
Total Gallons		

Water NOT Disch- - -allons)

	July - December
To Storm Sewer	
Lawn Sprinkling	
Used in Production	
Evaporation	
Other.	
Total Gallons	

W

	– December
Cooling Water	
Domestic Waste	
Industrial Waste	
Other.	
Total Gallons	

G, LL- CTL ME ON THIS INFO- DARRELL

7.3	**Number of days of operation during the following time periods:**	**January – June / July - December**
7.4	**Describe any process changes, which would affect the wastewater discharged at your facility.**	
7.5	**Describe any expected changes (volume or content) to the current wastewater discharge at your facility.**	

Hazardous Materials Business Plan - List of Chemicals

Permit No #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	20000	GAL	Liquid	10000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
HELIUM	HELIUM	300	CU FT	Gas	300	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
VERSONAL (R) 120 CLEANING AGENT	VERSONAL (R) 120 CLEANING AGENT	110	GAL	Liquid	55	
DIESEL FUEL NO 2	DIESEL FUEL NO 2	110	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
TEA	TRIETHANOLAMINE 85	55	GAL	Liquid	55	
NONIONIC SURFACTANT-ALKYIPHENOL ETHOXOYLATE	N60 -SURFONIC N-60	1100	GAL	Liquid	55	
VERSENE 100	CHELATING LIQUID 100	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	

CYCLE COUNT WORKSHEET

Batch ID: 022103 Thru 022103
Sorted By Bin No.

Chemicals

Tag-No.	Bin-Number / Lot-Number	Pick-Seq	Item-Number	Item-Description	U/M / Cyc-Code	Last-Cnt	Actual-Count	Checked-By / Freeze Date
2268360			~~50100000000~~	~~Cor:Parson's Pine Amm. 28oz~~	M	01/25/2003		02/18/2003
2268361			~~50104000000~~	~~Cor: First Choice 2x174oz~~	~~M~~	~~01/25/2003~~		02/18/2003
2268362			50110000000	Cor:Reliance 8x64 Box	M	01/25/2003		~~02/~~18/2003
2268363			50111000000	~~Cor:Dividerless Box 6x96 CRC~~	~~M~~	~~01/25/2003~~		02/18/2003
2268364		✓	60010100001	Ing:Hydrogen Peroxide 50%	LB	01/25/2003	15616	02/18/2003
2268365		✓	60010100002	Ing:Potassium Hydroxide 50%	LB	01/25/2003	47343	02/18/2003
2268366			60010100005	Ing:Methanol 10.0%	LB	01/25/2003		02/18/2003
2268367			60010100006	Ing:Methanol 35.0%	LB	01/25/2003		02/18/2003
2268368			60010100008	Ing:Methanol 99.9%	LB	01/25/2003		02/18/2003
2268369		✓	60010100016	Ing:Caustic Soda 50%	LB	01/25/2003	15568	02/18/2003
2268370			60010100023	Ing:Isopropyl Alcohol	LB	01/25/2003		02/18/2003
2268371			60010100026	Ing:Rock Salt - Super Sack	LB	01/25/2003	9200	02/18/2003
2268372		✓	60010100027	Ing:Opacifier Acusol OP305	LB	01/25/2003	353	02/18/2003
2268373			60010100029	Ing:Tinopal CBS-X	LB	01/25/2003	129	02/18/2003
2268374			60010100038	Ing:Calfax DB-45	LB	01/25/2003		02/18/2003
2268375			60010100044	Ing:N Clear Silicate	LB	01/25/2003	1370	02/18/2003
2268376			60010100048	Ing:Ucarcide 250	LB	01/25/2003	1187	02/18/2003

CYCLE COUNT WORKSHEET

Batch ID: 022103 Thru 022103
Sorted By Bin No.

Tag-No.	Bin-Number / Lot-Number	Pick-Seq	Item-Number	Item-Description	U/M / Cyc-Code	Last-Cnt	Actual-Count	Checked-By / Freeze Date
2268377			60010100050	Ing:Anti-Foam AF9030 662507	LB	01/25/2003	170	02/18/2003
2268378			60010100051	Ing:Fabric Softener Base Accosoft 550 PG	LB	01/25/2003	56103	02/18/2003
2268379			60010100052	Ing:Soda Ash Grade 100	LB	01/25/2003	2600	02/18/2003
2268380			60010100053	Ing:Non Ionic Laundry NP-9	LB	01/25/2003		02/18/2003
2268381			60010100054	Ing:Phosphoric Acid 75%	LB	01/25/2003	399	02/18/2003
2268382			60010100055	Ing:Non Ionic AutoDish SLF-18	LB	01/25/2003		02/18/2003
2268383			60010100056	Ing:Ammonyx Lo (Surfact)	LB	01/25/2003	230	02/18/2003
2268384			60010100057	Ing:Ammonia 29.4%	LB	01/25/2003	35767	02/18/2003
2268385			60010100058	Ing:Citric Acid Granular	LB	01/25/2003	900	02/18/2003
2268386			60010100059	Ing:Blankophor Artic White Tx	LB	01/25/2003	69	02/18/2003
2268387			60010100060	Ing:Chlorine Liquid	LB	01/25/2003	407375	02/18/2003
2268388			60010100061	Ing:Opacifier Lytron 614	LB	01/25/2003		02/18/2003
2268389			60010100062	Ing:Lytron 2503-55 (C&D)	LB	01/25/2003	475	02/18/2003
2268390			60010100063	Ing:T.E.A. 85% (C&D)	LB	01/25/2003	372	02/18/2003
2268391			60010100064	Ing:Surfonic N-102	LB	01/25/2003	11891	02/18/2003
2268392			60010100065	Ing:Versenol 120 (C&D)	LB	01/25/2003	1309	02/18/2003
2268393			60010100066	Ing:BIOSOFT D-52 KSX	LB	01/25/2003	7449	

CYCLE COUNT WORKSHEET

Batch ID: 022103 Thru 022103
Sorted By Bin No.

Tag-No.	Bin-Number / Lot-Number	Pick-Seq	Item-Number	Item-Description	U/M	Last-Cnt / Cyc-Code	Actual-Count	Checked-By / Freeze Date
								02/18/2003
2268394			60010100067	Ing:Kathon CG	LB	01/25/2003	334	02/18/2003
2268395			60010100068	Ing:Magnesium Chloride	LB	01/25/2003	2080	02/18/2003
2268396			60010100069	Ing:Habor Lite HL-700/HI-Flow	LB	01/25/2003	2340	02/18/2003
2268397			60010100070	Ing:Giv Gard Dxn	LB	01/25/2003		02/18/2003
2268398			60010100072	Ing:Steol Cs-460 PB08190 (C&D)	LB	01/25/2003		02/18/2003
2268399			60010100073	Ing:Stepanate SXS PA00430 C&D	LB	01/25/2003		02/18/2003
2268400		✓	60010100074	✓ Ing:T10	LB	01/25/2003	190 CALC	02/18/2003
2268401			60010100075	Ing:T4	LB	01/25/2003		02/18/2003
2268402			60010100076	Ing:Aluminum Sulfate 50%	LB	01/25/2003		02/18/2003
2268403			60010100077	Ing:Cellu-Flo Sl - 299/Nafco C	LB	01/25/2003	160	02/18/2003
2268404		✓	60010100078	Ing:Versene 100	LB	01/25/2003	2540	02/18/2003
2268405			60010100079	ING:Accosoft 550-90 HF	LB	01/25/2003	2250	02/18/2003
2268406			60010100168	Ing:Glycol Ether EB (Butyl Cellosolve EGBE)	LB	01/25/2003		02/18/2003
2268407			60010100212	Ing:Varisoft 222 LM-90	LB	01/25/2003		02/18/2003
2268408			60010100213	Ing:Rewoteric AM CAS 15	LB	01/25/2003		02/18/2003
2268409		✓	60010100215	Ing:Surfonic N-60	LB	01/25/2003	17029	02/18/2003

CYCLE COUNT WORKSHEET

Batch ID: 022103 Thru 022103
Sorted By Bin No.

Tag-No.	Bin-Number / Lot-Number	Pick-Seq	Item-Number	Item-Description	U/M / Cyc-Code	Last-Cnt	Actual-Count	Checked-By / Freeze Date
2268410			60010100217	Ing:Ammonyx CDO Special	LB	01/25/2003	110	02/18/2003
2268411			60010100219	Winsurf DGC	LB	01/25/2003	1702	02/18/2003
2268412			60020200028	Fra:Lemon Scent Bl perf 3828	LB	01/25/2003	55	02/18/2003
2268413			60020200029	Fra:Spring Shower *Do Not Use* ********Do Note Use**********	LB	01/25/2003		02/18/2003
2268414			60020200030	Fra:Fresh Scent Bleach 3832	LB	01/25/2003		02/18/2003
2268415			60020200031	Fra:Floral Sct 3920/6689 TFLSB for Bleach products	LB	01/25/2003		02/18/2003
2268416			60020200032	Fra:Fab Rinse 4652-4347	LB	01/25/2003		02/18/2003
2268417			60020200033	Fra:Floral #6137-77 Lemo	LB	01/25/2003	244	02/18/2003
2268418			60020200034	Fra:Pine Ammonia (C&D)	LB	01/25/2003	402	02/18/2003
2268419			60020200035	Fra:Clear Ammonia (C&D)	LB	01/25/2003	355	02/18/2003
2268420			60020200036	Fra:Lemon Ammonia Aroma 22658	LB	01/25/2003	657	02/18/2003
2268421			60020200037	Fra:Lemon PF1227 Aroma C&D	LB	01/25/2003	1711	02/18/2003
2268422			60020200038	Fra:Dial Lemon Bleach	LB	01/25/2003		02/18/2003
2268423			60020200039	Fra:Perfume Lemon 301839	LB	01/25/2003	239	02/18/2003
2268424			60020200055	Fra:Wildflower Scent#7139	LB	01/25/2003		02/18/2003
2268425			60020200082	Fra:Rain Clean 5208-4950	LB	01/25/2003		02/18/2003
2268426			60020200083	Fra:Wildflower 2828/A	LB	01/25/2003		02/18/2003

CYCLE COUNT WORKSHEET

Batch ID: 022103 Thru 022103
Sorted By Bin No.

Tag-No.	Bin-Number / Lot-Number	Pick-Seq	Item-Number	Item-Description	U/M / Cyc-Code	Last-Cnt	Actual-Count	Checked-By / Freeze Date
2268427			60020200088	FRA:FFS 500F21 FAB SOFT	LB	01/25/2003	620	02/18/2003
2268428			60020200089	FRA:FFS 700Z00 GV Rain	LB	01/25/2003	40	02/18/2003
2268429			60020200110	Fra:Lemon Scent Bleach 900K50	LB	01/25/2003	464	02/18/2003
2268430			60020200111	Fra:Floral/Wildflower 900K72	LB	01/25/2003	624	02/18/2003
2268431			60020200112	Fra:Rain/Fresh 109-404	LB	01/25/2003	1140	02/18/2003
2268432			60020200114	Fra:Perfume Reg. 8538-19647X	LB	01/25/2003	297	02/18/2003
2268433			60020200115	Fra:Perfume Rain 900M77	LB	01/25/2003	982	02/18/2003
2268434			60020200118	Fra:Floral/Wildflower 300P47	LB	01/25/2003	340	619 (GAL) 02/18/2003
2268435			60030300001	Dye:Keyacid Blue 201-080-50	LB	01/25/2003	27	02/18/2003
2268436			60030300008	Dye:D & C Green (C&D)	LB	01/25/2003	58	02/18/2003
2268437			60030300012	Dye:Rhodamine B Conc.	LB	01/25/2003	6	02/18/2003
2268438			60030300015	Dye:Acramine Blue Gsn (C&D)	LB	01/25/2003	6	02/18/2003
2268439			60030300016	Dye:Special Blue CDFG-135	LB	01/25/2003	3.5	02/18/2003
2268440			60030300017	Dye:Ply. Olive Gr LX-5385 (C&D	LB	01/25/2003	11	02/18/2003
2268441			60030300018	Dye:Keyacid Yellow 3GL 125%	LB	01/25/2003		02/18/2003
2268442			60030300019	Dye:Cibacron Brilliant Yellow	LB	01/25/2003	7.5	02/18/2003
2268443			60030300020	Dye:Fd & C Yellow #5 (C&D)	LB	01/25/2003	48	

CYCLE COUNT WORKSHEET

Batch ID: 022103 Thru 022103
Sorted By Bin No.

Tag-No.	Bin-Number / Lot-Number	Pick-Seq	Item-Number	Item-Description	U/M / Cyc-Code	Last-Cnt	Actual-Count	Checked-By / Freeze Date
								02/18/2003
2268444			60030300021	Dye:FD&C Yellow #5	LB	01/25/2003	22	02/18/2003
2268445			60030300022	Dye:Dry Keyamine Tuquoise G	LB	01/25/2003		02/18/2003
2268446			60030300023	Dye:Supramine 3BA Red601-035-6	LB	01/25/2003		02/18/2003
2268447			60030300024	Dye:Supranol Yellow Dye 4GL	LB	01/25/2003	3.5	02/18/2003
2268448			60030300025	Dye:Liq Keyamine Turq#20508642	LB	01/25/2003	46	02/18/2003
2268449			60030300061	Dye:Uranine Conc.	LB	01/25/2003	7.5	02/18/2003
2268450			70000100000	Cap:28-400 White Foam	M	01/25/2003	246	02/18/2003
2268451			700001000000	**********DO NOT USE**********	M	01/25/2003	Pack	02/18/2003
2268452			700102000	**********DO NOT USE**********	M	01/25/2003		02/18/2003
2268453			70010200000	**********Do Not Use*********	M	01/25/2003		02/18/2003
2268454			70011402000	Cap:33-400 Metal-Parson's	M	01/25/2003		02/18/2003
2268455			70021520004	Cap:Blue/yellow Trig Sprayer	M	01/25/2003		02/18/2003
2268456			70022808003	Cap:Green/yellow Trig Sprayer	M	01/25/2003		02/18/2003
2268457			70030700000	Cap:33-400 Red-CRC	M	01/25/2003		02/18/2003
2268458			70030702000	Cap:33-400 Red-Parson's	M	01/25/2003		02/18/2003
2268459			70031500000	Cap:33-400 Purple	M	01/25/2003		02/18/2003

Hazardous Materials Business Plan - List of Chemicals

Permit No #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	20000	GAL	Liquid	10000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
HELIUM	HELIUM	300	CU FT	Gas	300	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
VERSONAL (R) 120 CLEANING AGENT	VERSONAL (R) 120 CLEANING AGENT	110	GAL	Liquid	55	
DIESEL FUEL NO. 2	DIESEL FUEL NO. 2	110	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
~~TEA~~ Out	~~TRIETHANOLAMINE 85~~	55	GAL	Liquid	55	
NONIONIC SURFACTANT-ALKYIPHENOL ETHOXOYLATE	N60 -SURFONIC N-60	1100	GAL	Liquid	55	
~~VERSENE 100~~	~~CHELATING LIQUID 100~~	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	

KIK INTERNATIONAL (SoCal #2041)

PARSON'S

BULK PRODUCT INVENTORY

ITEM #	DESCRIPTION	START QUANTITY	REC. QUANTITY	USED	ENDING QUANTITY
60020200037	Lemon Perfume PF-1227				857 lbs.
60020200034	Pine Ammonia Perfume				500 lbs.
60020200035	Clear Ammonia Perume				251 lbs.
60030300020	FD&C Yellow Dye				39.5 lbs.
60030300008	D&C Green Dye				53.5 lbs.
60030300017	Ply Olive Green LX-5385				10 lbs
60030300015	Acramine Blue GSN				6.5 lbs.
60010100062	Lytron 2503-55				399 lbs.
60010100066	Anionic Det. Solution (51%)				7820 lbs
60010100065	Trisodium HEDTA (50%)				603 lbs.
60010100063	Triethanolamine (85%)				430 lbs.
25700050000	Soln. Clear Ammonia				0
25710050000	Soln: Lemon Ammonia				0
25720050000	Soln: Sudsy Ammonia				0
25730050000	Soln Pine Ammonia				0

Date: 9/15/2003

Signature: Bob Brown _____

KIK INTERNATIONAL (SoCal #2041)

PARSON'S

BULK PRODUCT INVENTORY

ITEM #	DESCRIPTION	START QUANTITY	REC. QUANTITY	USED	ENDING QUANTITY
60020200037	Lemon Perfume PF-1227				857 lbs.
60020200034	Pine Ammonia Perfume				500 lbs.
60020200035	Clear Ammonia Perume				251 lbs.
60030300020	FD&C Yellow Dye				39 5 lbs.
60030300008	D&C Green Dye				53.5 lbs.
60030300017	Ply Olive Green LX-5385				10 lbs.
60030300015	Acramine Blue GSN				6.5 lbs.
60010100062	Lytron 2503-55				399 lbs.
60010100066	Anionic Det. Solution (51%)				7820 lbs.
60010100065	Trisodium HEDTA (50%)				603 lbs.
60010100063	Triethanolamine (85%)				430 lbs.
25700050000	Soln: Clear Ammonia				0
25710050000	Soln. Lemon Ammonia				0
25720050000	Soln: Sudsy Ammonia				0
25730050000	Soln· Pine Ammonia				0

Date: 9/15/2003

Signature· Bob Brown_____

STOCK STATUS REPORT

Items: 60 Thru 6Z Location: 90 Thru 90 Product Category: All
Excluding: Zero Quantity On Hand Items
In Order By: Location/Item Cost Shown Is Standard Cost
Status: Reo = At Or Below Reorder Level O/S = Out Of Stock Inspection Locations Excluded MRB Locations Excluded

Item-Number	Item-Description-1 / Item-Description-2 / Product-Category / Backorderable? / Active-Code/Date						
	Qty-On-Hand	Qty-Allocated	Qty-Backordered	Qty-On-Order	Cost	Reorder-Level	Status
	Value-Of-Item	Usage-Ytd	Order-Up-To	Minimum-Order	Price	Vendor	UOM
Location: 90 KIK-SoCal Inc.							
60010100002	Ing:Potassium Hydroxide 50%			CHE Chemicals	No	A	08/20/2002
	44,478.00	0.00	0.00	49,940.00	.168000	21,675.80	
	7,472.3000	495,275.89	50,914.00	0.00	.000000	OCCCHE	LB
60010100010	[redacted]			CHE Chemicals	No	A	07/12/1999
	478.00	0.00	0.00	0.00	1.410000	0.00	
	673.9800	[redacted]	0.00	0.00	.000000	VAWA	LB
60010100015	[redacted]			CHE Chemicals	No	A	07/12/1999
	525.00	0.00	0.00	0.00	.670000	0.00	
	351.7500	[redacted]	0.00	0.00	.000000	ALCCHE	LB
60010100016	Ing:Caustic Soda 50%			CHE Chemicals	No	A	07/12/1999
	39,039.42	0.00	0.00	4,501,740.00	.061300	0.00	
	2,393.1200	97,657,386.08	0.00	0.00	.000000	PIOAME	LB
60010100020	Ing:Dantogard			CHE Chemicals	No	A	07/12/1999
	410.00	0.00	0.00	0.00	2.270000	180,000.00	Reo
	930.7000	77.31	0.00	0.00	.000000		LB
60010100026	[redacted]			CHE Chemicals	No	A	07/12/1999
	11,500.00	0.00	0.00	0.00	.025000	0.00	
	287.5000	[redacted]	0.00	0.00	.000000		LB
60010100027	Ing:Opacifier Acusol OP305			CHE Chemicals	No	A	07/12/1999
	400.00	0.00	0.00	0.00	1.170000	18.00	
	468.0000	1,621.54	35.00	0.00	.000000	UNIVAR	LB
60010100029	Ing:Tinopal CBS-X			CHE Chemicals	No	A	07/12/1999
	83.00	0.00	0.00	0.00	17.190000	3.00	
	1,426.7700	255.85	4.00	0.00	.000000	KEYSTO	LB
60010100030	[redacted]	Technical Grade		CHE Chemicals	No	A	07/12/1999
	50.00	0.00	0.00	0.00	.355000	0.00	
	17.7500	[redacted]	0.00	0.00	.000000	VAWA	LB
60010100036	Ing:Calcium Chloride 77% Flake			CHE Chemicals	No	A	07/12/1999
	50.00	0.00	0.00	0.00	.250000	0.00	
	12.5000	[redacted]	0.00	0.00	.000000	VAWA	LB
60010100044	Ing:N Clear Silicate			CHE Chemicals	No	A	07/12/1999
	1,320.00	0.00	0.00	0.00	.270000	0.00	
	356.4000	1,603.56	0.00	0.00	.000000		LB
60010100048	Ing:Ucarcide 250			CHE Chemicals	Yes	A	07/13/2000
	1,688.83	0.00	0.00	0.00	2.960000	85.00	
	4,998.9500	29,600.79	336.00	0.00	.000000	CHEPOI	LB

60010100049	Ing:Evaporated Salt			CHE	Chemicals	No	A	07/12/1999
	600.00	0.00	0.00	2,000.00		.090000	1,000.00	Reo
	54.0000	1,548.62	3,000.00	0.00		.000000	BREWES	LB
60010100050	Ing:Anti-Foam XFO 30	#109652		CHE	Chemicals	No	A	07/12/1999
	0.00	0.00	0.00	450.00		2.961000	300.00	Reo
	.0100	284.26	750.00	0.00		.000000	LACHEM	LB
60010100051	Ing:Fabric Softener Base	Accosoft 550 PG		CHE	Chemicals	No	A	07/12/1999
	15,849.20	0.00	0.00	45,000.00		.500000	3,477.00	
	7,924.6000	405,508.36	11,291.00	0.00		.000000	STEPAN	LB
60010100052	Ing:Soda Ash Grade 100			CHE	Chemicals	No	A	07/12/1999
	2,815.03	0.00	0.00	0.00		.145000	500.00	
	408.1800	22,865.08	3,200.00	0.00		.000000	LACHEM	LB
60010100054	Ing:Phosphoric Acid 75%			CHE	Chemicals	No	A	07/12/1999
	1,385.00	0.00	0.00	0.00		.390000	3.00	
	540.1500	374.82	6.00	0.00		.000000	LACHEM	LB
60010100056	Ing:Ammonyx Lo (Surfact)			CHE	Chemicals	No	A	07/12/1999
	850.00	0.00	0.00	0.00		1.080000	425.00	
	918.0000	66.90	850.00	0.00		.000000	STEPAN	LB
60010100057	Ing:Ammonia 29.4%			CHE	Chemicals	No	A	07/12/1999
	34,792.50	0.00	0.00	0.00		.075000	6,500.00	
	2,609.4400	2,996,939.97	43,500.00	0.00		.000000	LARIND	LB
60010100058	Ing:Citric Acid Granular			CHE	Chemicals	No	A	07/12/1999
	242.29	0.00	0.00	0.00		.740000	33.00	
	179.3000	7,738.24	195.00	0.00		.000000	LACHEM	LB
60010100059	Ing:Blankophor Artic White Tx			CHE	Chemicals	No	A	07/12/1999
	0.00	0.00	0.00	0.00		1.500000	0.00	
	.0100	416.34	0.00	0.00		.000000		LB
60010100060	Ing:Chlorine Liquid			CHE	Chemicals	No	A	07/12/1999
	106,110.50	0.00	0.00	900,000.00		.125000	180,000.00	Reo
	13,263.8100	42,208,942.73	1,600,000.00	0.00		.000000	PIOAME	LB
60010100062	Ing:Lytron 2503-55 (C&D)			CHE	Chemicals	No	A	07/12/1999
	399.00	0.00	0.00	0.00		.000000	0.00	
	.0000	43.98	0.00	0.00		.000000		LB
60010100063	Ing:T.E.A. 85% (C&D)			CHE	Chemicals	No	A	07/12/1999
	430.00	0.00	0.00	0.00		.000000	0.00	
	.0000	11,096.22	0.00	0.00		.000000		LB
60010100064	Ing:Surfonic N-102			CHE	Chemicals	No	A	07/12/1999
	5,990.00	0.00	0.00	0.00		.570000	887.00	
	3,414.3000	83,302.21	2,035.00	0.00		.000000	HUNPET	LB
60010100065	Ing:Versenol 120 (C&D)			CHE	Chemicals	No	A	07/12/1999
	603.00	0.00	0.00	0.00		.000000	0.00	
	.0000	8,333.54	0.00	0.00		.000000		LB
60010100066	Ing:BIOSOFT D-40	# 0080066		CHE	Chemicals	No	A	07/12/1999
	17,418.00	0.00	0.00	0.00		.265000	4,920.00	

	4,615.7700	318,452.06	13,093.00	0.00	.000000	STEPAN	LB
60010100067	Ing:Kathon CG			CHE Chemicals	No	A	07/12/1999
	336.00	0.00	0.00	0.00	12.400000		0.00
	4,166.4000	[redacted]	0.00	0.00	.000000		LB
60010100068	Ing:Magnesium Chloride			CHE Chemicals	No	A	07/12/1999
	2,684.83	0.00	0.00	0.00	.217500		50.00
	583.9500	11,032.62	2,450.00	0.00	.000000	LACHEM	LB
60010100069	Ing:Habor Lite HL-700/HI-Flow			CHE Chemicals	No	A	07/12/1999
	6,915.21	0.00	0.00	0.00	.335333		1,800.00
	2,318.9000	133,143.59	5,385.00	0.00	.000000	LOYCHE	LB
60010100077	Ing:Cellu-Flo Sl - 299/Nafco C			CHE Chemicals	No	A	07/12/1999
	298.12	0.00	0.00	0.00	1.720000		100.00
	512.7800	13,151.29	400.00	0.00	.000000	LOYCHE	LB
60010100078	Ing:Versene 100			CHE Chemicals	No	A	01/10/2001
	1,534.00	0.00	0.00	0.00	.455000		480.00
	697.9700	85,422.52	1,959.00	0.00	.000000	ASHCHE	LB
60010100079	ING:Accosoft 550-90 HF			CHE Chemicals	Yes	A	11/04/1999
	2,750.00	0.00	0.00	0.00	.660000		0.00
	1,815.0000	[redacted]	0.00	0.00	.000000		LB
60010100110	Ing:Ninol 40-CO	Amide		CHE Chemicals	No	A	07/12/1999
	74.00	0.00	0.00	1,680.00	1.270000		105.00 Reo
	93.9800	657.95	945.00	0.00	.000000	STEPAN	LB
60010100120	Ing:Savinase-16L			CHE Chemicals	No	A	07/12/1999
	55.00	0.00	0.00	0.00	8.470000		0.00
	465.8500	[redacted]	0.00	0.00	.000000		LB
60010100130	Ing:Sodium Citrate			CHE Chemicals	No	A	07/12/1999
	50.00	0.00	0.00	0.00	.650000		0.00
	32.5000	[redacted]	0.00	0.00	.000000	VAWA	LB
60010100135	Ing:Sodium Gluconate			CHE Chemicals	No	A	07/12/1999
	50.00	0.00	0.00	0.00	.690000		0.00
	34.5000	[redacted]	0.00	0.00	.000000	VAWA	LB
60010100140	Ing:Termamyl 300L(D)			CHE Chemicals	No	A	07/12/1999
	55.00	0.00	0.00	0.00	7.790000		0.00
	428.4500	[redacted]	0.00	0.00	.000000		LB
60010100150	Ing:Varonic K-205	Textile Grade		CHE Chemicals	No	A	07/12/1999
	400.00	0.00	0.00	0.00	1.950000		0.00
	780.0000	[redacted]	0.00	0.00	.000000	SOCLYN	LB
60010100200	Ing:Steol CS-460	S.L.E.S.		CHE Chemicals	No	A	07/12/1999
	534.00	0.00	0.00	9,000.00	1.090000		3,375.00 Reo
	582.0600	[redacted]	8,775.00	0.00	.000000	STEPAN	LB
60010100210	Ing:SXS			CHE Chemicals	No	A	07/12/1999
	112.00	0.00	0.00	2,000.00	.505000		315.00 Reo
	56.5600	[redacted]	815.00	0.00	.000000	STEPAN	LB

60010100215	Ing:Surfonic N-60			CHE	Chemicals	No	A	07/12/1999
	14,480.00	0.00	0.00	0.00		.820000	258.00	
	11,873.6000	19,488.22	430.00	0.00		.000000	HUNPET	LB
60010100217	Ing:Ammonyx CDO Special			CHE	Chemicals	No	A	07/12/1999
	80.00	0.00	0.00	0.00		.000000	0.00	
	.0000	[redacted]	0.00	0.00		.000000		LB
60010100219	Ing:Winsurf DGC			CHE	Chemicals	No	A	09/18/2002
	3,412.00	0.00	0.00	0.00		2.400000	2,040.00	
	8,188.8000	25,235.57	4,080.00	0.00		.000000	WINCHE	LB
60010100222	Ing:Winsurf NLS-90			CHE	Chemicals	No	A	07/12/1999
	467.00	0.00	0.00	0.00		1.290000	0.00	
	602.4300	[redacted]	0.00	0.00		.000000	WINCHE	LB
60020200033	Fra:Floral #6137-77 Lemo			CHE	Chemicals	No	A	07/12/1999
	244.00	0.00	0.00	0.00		6.460000	0.00	
	1,576.2400	88.99	0.00	0.00		.000000		LB
60020200034	Fra:Pine Ammonia (C&D)			CHE	Chemicals	No	A	07/12/1999
	500.00	0.00	0.00	0.00		.000000	0.00	
	.0000	786.87	0.00	0.00		.000000		LB
60020200035	Fra:Clear Ammonia (C&D)			CHE	Chemicals	No	A	07/12/1999
	251.00	0.00	0.00	0.00		.000000	0.00	
	.0000	1,377.23	0.00	0.00		.000000		LB
60020200036	Fra:Lemon Ammonia Aroma 22658			CHE	Chemicals	No	A	07/12/1999
	1,127.00	0.00	0.00	0.00		3.550000	391.00	
	4,000.8500	19,775.30	828.00	0.00		.000000	FLAFRA	LB
60020200037	Fra:Lemon PF1227 Aroma C&D			CHE	Chemicals	No	A	07/12/1999
	257.00	0.00	0.00	0.00		.000000	0.00	
	.0000	10,692.60	0.00	0.00		.000000		LB
60020200055	Fra:Wildflower Scent#7139			CHE	Chemicals	No	A	07/12/1999
	239.00	0.00	0.00	0.00		7.950000	0.00	
	1,900.0500	[redacted]	0.00	0.00		.000000		LB
60020200088	Fra:FFS 500F21 FAB SOFT			CHE	Chemicals	No	A	12/13/2000
	188.83	0.00	0.00	400.00		5.250000	400.00	Reo
	991.3700	10,956.36	800.00	0.00		.000000	FLAFRA	LB
60020200089	FRA:FFS 700200 GV Rain			CHE	Chemicals	No	A	12/13/2000
	966.00	0.00	0.00	0.00		4.250000	400.00	
	4,105.5000	[redacted]	1,200.00	0.00		.000000	FLAFRA	LB
60020200098	Fra:Rose Scent			CHE	Chemicals	No	A	07/12/1999
	324.00	0.00	0.00	0.00		3.750000	0.00	
	1,215.0000	64.94	0.00	0.00		.000000		LB
60020200110	Fra:Lemon Scent Bleach 900K50			CHE	Chemicals	No	A	07/12/1999
	1,011.82	0.00	0.00	0.00		5.500000	400.00	
	5,565.0100	1,021.16	1,200.00	0.00		.000000	FLAFRA	LB
60020200111	Fra:Floral/Wildflower 900K72			CHE	Chemicals	No	A	07/12/1999
	521.29	[redacted]	0.00	0.00		6.000000	169.00	

	3,127.7800	5,701.42	323.00	0.00	.000000	FLAFRA		LB
60020200112	Fra:Rain/Fresh 109-404		DO NOT USE SEE GV RAIN	CHE Chemicals	No		A	07/12/1999
	322.90	0.00	0.00	0.00	5.480000		0.00	
	1,769.5300	2,288.76	0.00	0.00	.000000			LB
60020200114	Fra:Perfume Reg. 8538-19647X			CHE Chemicals	No		A	07/12/1999
	273.00	0.00	0.00	0.00	6.750000		3.00	
	1,842.7500	149.62	4.00	0.00	.000000	FLAFRA		LB
60020200115	Fra:Perfume Rain 900M77			CHE Chemicals	No		A	07/12/1999
	982.00	0.00	0.00	0.00	3.650000		0.00	
	3,584.3000	191.90	0.00	0.00	.000000			LB
60020200118	Fra:Floral/Wildflower 300P47			CHE Chemicals	No		A	07/12/1999
	300.00	0.00	0.00	0.00	5.750000		3.00	
	1,725.0000	20.36	4.00	0.00	.000000	FLAFRA		LB
60030300001	Dye:Keyacid Blue 201-080-50			CHE Chemicals	No		A	07/12/1999
	34.00	0.00	0.00	0.00	17.120000		1.00	
	582.0800	49.10	1.00	0.00	.000000	KEYSTO		LB
60030300008	Dye:D & C Green (C&D)			CHE Chemicals	No		A	07/12/1999
	53.50	0.00	0.00	0.00	.000000		0.00	
	.0000	52.39	0.00	0.00	.000000			LB
60030300012	Dye:Rhodamine B Conc.			CHE Chemicals	No		A	07/12/1999
	7.50	0.00	0.00	0.00	16.020000		0.00	
	120.1500	0.15	0.00	0.00	.000000			LB
60030300015	Dye:Acramine Blue Gsn (C&D)			CHE Chemicals	No		A	07/12/1999
	9.00	0.00	0.00	0.00	.000000		0.00	
	.0000	3.66	0.00	0.00	.000000			LB
60030300016	Dye:Special Blue CDFG-135			CHE Chemicals	No		A	07/12/1999
	3.50	0.00	0.00	0.00	32.950000		0.00	
	115.3300	4.59	0.00	0.00	.000000			LB
60030300017	Dye:Ply. Olive Gr LX-5385 (C&D			CHE Chemicals	No		A	07/12/1999
	10.00	0.00	0.00	0.00	.000000		0.00	
	.0000	9.52	0.00	0.00	.000000			LB
60030300019	Dye:Cibacron Brilliant Yellow			CHE Chemicals	No		A	07/12/1999
	7.50	0.00	0.00	0.00	24.340000		0.00	
	182.5500	5.84	0.00	0.00	.000000			LB
60030300020	Dye:Fd & C Yellow #5 (C&D)			CHE Chemicals	No		A	07/12/1999
	43.00	0.00	0.00	0.00	.000000		0.00	
	.0000	13.37	0.00	0.00	.000000			LB
60030300023	Dye:Supramine 3BA Red601-035-6			CHE Chemicals	No		A	07/12/1999
	0.32-	0.00	0.00	0.00	10.300000		0.00	O/S
	3.3000-	90.01	0.00	0.00	.000000			LB
60030300024	Dye:Supranol Yellow Dye 4GL			CHE Chemicals	No		A	07/12/1999
	3.50	0.00	0.00	0.00	35.990000		0.00	
	125.9700	2.50	0.00	0.00	.000000			LB

STOCK STATUS REPORT

60030300025	Dye:Liq Keyamine Turq#20508642			CHE Chemicals	Yes	A	09/26/2002	
	18.90	0.00	0.00	0.00	4.050000		8.00	
	76.5500	92.44	17.00	0.00	.000000	KEYSTO		LB
60030300061	Dye:Uranine Conc.			CHE Chemicals	No	A	07/12/1999	
	3.00	0.00	0.00	0.00	9.820000		1.00	
	29.4600	18.22	1.00	0.00	.000000	KEYSTO		LB
Totals:	329,494.91	0.00	0.00	5,512,210.00				
	119,183.1900	144,593,323.68						

72 Items Printed

Total Value Of Inventory:

Including Negative Value(s): 119,183.19

Not Including Negative Value(s): 119,186.49

STOCK STATUS REPORT

Items: 60 Thru 6Z Location: 90 Thru 90 Product Category: All
Excluding: Zero Quantity On Hand Items
In Order By: Location/Item Cost Shown Is Standard Cost
Status: Reo = At Or Below Reorder Level O/S = Out Of Stock Inspection Locations Excluded MRB Locations Excluded

Item-Number	Item-Description-1 / Qty-On-Hand / Value-Of-Item	Qty-Allocated / Usage-Ytd	Item-Description-2 / Qty-Backordered / Order-Up-To	Product-Category / Qty-On-Order / Minimum-Order	Backorderable? / Cost / Price	Active-Code/Date / Reorder-Level / Vendor	Status / UOM
ocation: 90	KIK-SoCal Inc.						
60010100002	Ing:Potassium Hydroxide 50%			CHE Chemicals	No	A 08/20/2002	
	88,039.00	0.00	0.00	49,940.00	.168000	21,675.80	
	14,790.5500	466,269.65	50,914.00	0.00	.000000	OCCCHE	LB
60010100010	X Ing:Acusol 820			CHE Chemicals	No	A 07/12/1999	
	475.00	0.00	0.00	0.00	1.410000	0.00	
	669.7500	0.00	0.00	0.00	.000000	VAWA	LB
60010100015	X Ing:Alcosperse 747			CHE Chemicals	No	A 07/12/1999	
	525.00	0.00	0.00	0.00	.670000	0.00	
	351.7500	0.00	0.00	0.00	.000000	ALCCHE	LB
60010100016	Ing:Caustic Soda 50%			CHE Chemicals	No	A 07/12/1999	
	25,071.88	0.00	0.00	3,072,340.00	.061300	0.00	
	1,536.9100	95,320,589.15	0.00	0.00	.000000	PIOAME	LB
60010100026	X Ing:Rock Salt - Super Sack			CHE Chemicals	No	A 07/12/1999	
	11,500.00	0.00	0.00	0.00	.025000	0.00	
	287.5000	0.00	0.00	0.00	.000000		LB
60010100027	Ing:Opacifier Acusol OP305			CHE Chemicals	No	A 07/12/1999	
	504.00	0.00	0.00	0.00	1.170000	18.00	
	589.6800	1,444.42	35.00	0.00	.000000	UNIVAR	LB
60010100029	Ing:Tinopal CBS-X			CHE Chemicals	No	A 07/12/1999	
	100.00	0.00	0.00	0.00	17.190000	3.00	
	1,719.0000	255.85	4.00	0.00	.000000	KEYSTO	LB
60010100030	X Ing:Borax 5 MOL		Technical Grade	CHE Chemicals	No	A 07/12/1999	
	50.00	0.00	0.00	0.00	.355000	0.00	
	17.7500	0.00	0.00	0.00	.000000	VAWA	LB
60010100036	Ing:Calcium Chloride 77% Flake			CHE Chemicals	No	A 07/12/1999	
	50.00	0.00	0.00	0.00	.250000	0.00	
	12.5000	0.00	0.00	0.00	.000000	VAWA	LB
60010100044	Ing:N Clear Silicate			CHE Chemicals	No	A 07/12/1999	
	1,320.00	0.00	0.00	0.00	.270000	0.00	
	356.4000	1,603.56	0.00	0.00	.000000		LB
60010100048	Ing:Ucarcide 250			CHE Chemicals	Yes	A 07/13/2000	
	1,903.83	0.00	0.00	0.00	2.960000	85.00	
	5,635.3500	29,416.12	336.00	0.00	.000000	CHEPOI	LB
60010100049	Ing:Evaporated Salt			CHE Chemicals	No	A 07/12/1999	
	1,300.00	0.00	0.00	2,000.00	.090000	1,000.00	
	117.0000	0.00	3,000.00	0.00	.000000	BREWES	LB

Hazardous Materials Business Plan - List of Chemicals

Permit No #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	20000	GAL	Liquid	10000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
HELIUM	HELIUM	300	CU FT	Gas	300	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
VERSONAL (R) 120 CLEANING AGENT	VERSONAL (R) 120 CLEANING AGENT	110	GAL	Liquid	55	
DIESEL FUEL NO 2	DIESEL FUEL NO. 2	110	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
TEA	TRIETHANOLAMINE 85	55	GAL	Liquid	55	
NONIONIC SURFACTANT-ALKYIPHENOL ETHOXOYLATE	N60 -SURFONIC N-60	1100	GAL	Liquid	55	
VERSENE 100	CHELATING LIQUID 100	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK #'s 6 & 7

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CAUSTIC SODA 50%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CAUSTIC SODA 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 10000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	10000	MAXIMUM DAILY AMOUNT	20000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50 00%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, NORTHEAST SIDE OF BUILDING

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 MAP# (optional) GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CHLORINE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CHLORINE

EHS* ☑ Yes ☐ No

CAS #
7782-50-5

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER
180000

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☑ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
540000	900000		0

UNITS* (Check one item only) ☐ GALLONS ☐ CUBIC FEET ☑ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☑ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	CHLORINE	☑ Yes ☐ No	7782-50-5
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK#27

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
AMMONIA AQUAEOUS

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
AMMONIA AQUAEOUS

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
6000

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
4000	6000		0

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)
☑ Aboveground Tank ☐ Underground Tank ☐ Tank Inside Building ☐ Steel Drum ☐ Plastic/Nonmetallic Drum ☐ Can ☐ Carboy ☐ Silo ☐ Fiber Drum ☐ Bag ☐ Box ☐ Cylinder ☐ Glass Bottle ☐ Plastic Bottle ☐ Tote Bin ☐ Tank Wagon ☐ Rail Car ☐ Other

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	29 00%	AMMONIA	☑ Yes ☐ No	7664-41-7
2		AQUA AMMONIA	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM TANK #'s 23,25,26,33 &48 AND WAREHOUSE

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
HOUSEHOLD AMMONIA

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HOUSEHOLD AMMONIA

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	6200		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	20000	MAXIMUM DAILY AMOUNT	28000	ANNUAL WASTE AMOUNT		STATE WASTE CODE	0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☑ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	8 00%	AMMONIA	☐ Yes ☑ No	1336-21-6
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, WW & TANK# 13

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
HYDROGEN PEROXIDE 50%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HYDROGEN PEROXIDE 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	10000		

FED HAZARD CATEGORIES (Check all that apply): ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	5000	MAXIMUM DAILY AMOUNT	10000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50 00%	HYDROGEN PEROXIDE	☐ Yes ☑ No	7722-84-1
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK 15

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SURFONIC N-102

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SURFONIC N-102

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	12000		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	5000	MAXIMUM DAILY AMOUNT	12000	ANNUAL WASTE AMOUNT		STATE WASTE CODE	0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1		POLY(OXY-1 2 ETHANEDIYL) ALPH	☐ Yes ☑ No	9016-45-9
2		SULFURIC ACID	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, NORTHEAST END OF BUILDING

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
PROPANE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
PROPANE

EHS* ☐ Yes ☑ No

CAS #
74-98-6

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER
18231

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
10950	18231		0

UNITS* (Check one item only) ☐ GALLONS ☑ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE: 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	97 00%	PROPANE	☐ Yes ☑ No	74-98-6
2	1 00%	ETHANE	☐ Yes ☑ No	74-84-0
3	1 00%	PROPYLENE	☐ Yes ☑ No	115-07-1
4	1 00%	BUTANE	☐ Yes ☑ No	106-97-8
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ACETYLENE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ACETYLENE

EHS* ☐ Yes ☑ No

CAS #
74-86-2

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER
130

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
200	390		0

UNITS* (Check one item only) ☐ GALLONS ☑ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☐ Fiber Drum ☐ Glass Bottle ☐ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other
☐ Tank Inside Building ☐ Carboy ☐ Box ☐ Tote Bin
☐ Steel Drum ☐ Silo ☑ Cylinder ☐ Tank Wagon

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	ACETYLENE	☐ Yes ☑ No	74-86-2
2			☐ Yes ☑ No	
3		□	☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 . 0 4 9 . 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
OXYGEN

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
OXYGEN

EHS* ☐ Yes ☑ No

CAS #
7782-44-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 249	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☐ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 350	MAXIMUM DAILY AMOUNT 747	ANNUAL WASTE AMOUNT		STATE WASTE CODE 0	
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	OXYGEN	☐ Yes ☑ No	7782-44-7
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ARGON

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ARGON

EHS* ☐ Yes ☑ No

CAS #
7440-37-1

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 250	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	150	MAXIMUM DAILY AMOUNT	250	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	ARGON	☐ Yes ☑ No	7440-37-1
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMOLD DEPARTMENT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
MULTI GEAR OIL API GL-S SAE 85 W150

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
MULTI GEAR OIL API GL-S SAE 85 W150

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
200	330		0

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☐ Fiber Drum ☐ Glass Bottle ☐ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other
☐ Tank Inside Building ☐ Carboy ☐ Box ☐ Tote Bin
☑ Steel Drum ☐ Silo ☐ Cylinder ☐ Tank Wagon

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	95 00%	SOLV REF PETR BASE STOCK	☐ Yes ☑ No	64742-01-4
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
LAB

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
HELIUM

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HELIUM

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 300	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☐ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 200	MAXIMUM DAILY AMOUNT 300	ANNUAL WASTE AMOUNT		STATE WASTE CODE 0	
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	HELIUM	☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMOLD

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
NITROGEN

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
NITROGEN

EHS* ☐ Yes ☑ No

CAS #
7727-37-9

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☐ LIQUID ☑ GAS

LARGEST CONTAINER
304

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
2128	3648		0

UNITS* (Check one item only) ☐ GALLONS ☑ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	NITROGEN	☐ Yes ☑ No	7727-37-9
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM (BAG/DRUM STORAGE AREA)

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SODA ASH

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SODA ASH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☑ SOLID ☐ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
500	2000		0

UNITS* (Check one item only) ☐ GALLONS ☐ CUBIC FEET ☑ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☑ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	99 80%	SODIUM CARBONATE	☐ Yes ☑ No	497-19-8
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMIND DEPARTMENT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 . 0 4 9 . 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ANTI-FREEZE & SUMMER COOLANT

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ANIT-FREEZE & SUMMER COOLANT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	33	MAXIMUM DAILY AMOUNT	55	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	95 00%	1 2 ETHANEDIOL	☐ Yes ☑ No	107-21-1
2	2 99%	BORAX	☐ Yes ☑ No	1303-96-4
3	0 99%	NITRIC ACID SODIUM SALT	☐ Yes ☑ No	7631-99-4
4	0 99%	NaOH	☐ Yes ☑ No	1310-73-2
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK #'s 1,2,3 & 5 AND WAREHOUSE

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SODIUM HYPOCHLORITE BLEACH

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SODIUM HYPOCHLORITE BLEACH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 22500	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	208000	MAXIMUM DAILY AMOUNT	208000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☑ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ *a AMBIENT* ☐ *b ABOVE AMBIENT* ☐ *c BELOW AMBIENT*

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	14 00%	SODIUM HYPOCHLORITE	☐ Yes ☑ No	7681-52-9
2	0 50%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION.

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK SO-CAL INC (T-CHEM PRODUCTS)

CHEMICAL LOCATION
TANK FARM COMPRESSER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
WASTE OIL

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
WASTE OIL

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☐ MIXTURE ☑ WASTE | RADIOACTIVE ☐ Yes ☑ No | CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS | LARGEST CONTAINER 300

FED HAZARD CATEGORIES (Check all that apply) ☑ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
100	300	3000	221

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS | DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☑ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM WASTE WATER TRETMENT DRUM STORAGE AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
T-10FS HYDROCHLORIC ACID SOLUTION

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HYDROCHLORIC ACID

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
110	220		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	1 00%	HYDROCHLORIC ACID	☐ Yes ☑ No	7647-01-0
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM FLAMABLE STORAGE AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BLEACH & AMMONIA PRODUCT FRAGRANCES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
PERFUMES

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
CLASS II

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	55		
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	185	MAXIMUM DAILY AMOUNT	330	ANNUAL WASTE AMOUNT		STATE WASTE CODE	
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
FLAMMABLE DRUM STORAGE AREA SITE SE LOT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BLEACH & AMMONIA FRAGRANCES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
PERFUMES

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
CLASS I

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
385	770		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS — DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
FLAMABLE DRUM STORAGE AREA SITE SE LOT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME: PHOSPHORIC ACID

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME: PHOSPHORIC ACID

EHS* ☐ Yes ☑ No

CAS #: 7664-38-2

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	55		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	45	MAXIMUM DAILY AMOUNT	55	ANNUAL WASTE AMOUNT		STATE WASTE CODE	
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	75 00%	PHOSPHORIC ACID	☐ Yes ☑ No	7664-38-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM TANK #

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
VERSONAL (R) 120 CLEANING AGENT

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
VERSONAL (R) 120 CLEANING AGENT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
55	110		

UNITS* (Check one item only)					DAYS ON SITE
	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	38 00%	TRISODIUM	☐ Yes ☑ No	139-89-9
2	2 00%	DISODIUM	☐ Yes ☑ No	62099-15-4
3	1 00%	TRIDOSIUM NITRILOTRIACETATE	☐ Yes ☑ No	1310-73-2
4	2 00%	SODIUM HYDROXIDE	☐ Yes ☑ No	2836-32-0
5	56 00%	SODIUM GLYCOLATE	☐ Yes ☑ No	7732-18-5

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
BACK UP GENERATOR TANK

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 - 0 4 9 - 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DIESEL FUEL NO 2

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DIESEL FUEL NO. 2

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 110	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	75	MAXIMUM DAILY AMOUNT	110	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM BOILER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BWT-OD-PPSA CR3057

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
BOILER TREATMENT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☑ Chronic Health

AVERAGE DAILY AMOUNT	30	MAXIMUM DAILY AMOUNT	55	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car	
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other	
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin		
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon		

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT.	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	20 00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	1310-58-3
2	10 00%	DIETHYLAMINOETHANOL	☐ Yes ☑ No	100-37-8
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM BOILER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
POTASIUM HYDROXIDE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CAUSTIC POTASH- LIQUID 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 12000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	8000	MAXIMUM DAILY AMOUNT	12000	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☐ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50 00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	7732 -18- 5
2	50 00%	WATER	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK #45 IN TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
POTASSIUM HYPOCHLORITE BLEACH 7-15%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
POTASSIUM HYPOCHLORITE BLEACH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
6000

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
2000	6000		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT.	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 MAP# (optional) GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
OPACIFIER 305

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
STYRENE/ACRYLIC EMULSION POLYMER

EHS* ☐ Yes ☑ No

CAS #
68649-55-8

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES	
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	55			
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health			
AVERAGE DAILY AMOUNT	55	MAXIMUM DAILY AMOUNT	55	ANNUAL WASTE AMOUNT			STATE WASTE CODE	
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS			DAYS ON SITE	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car	
☐ Underground Tank	☐ Can	☑ Bag	☐ Plastic Bottle	☐ Other	
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin		
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon		

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
TRIETHANOLAMINE 85

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
TEA

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health

AVERAGE DAILY AMOUNT	55	MAXIMUM DAILY AMOUNT	55	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	88 00%	TRIETHANOLAMINE	☐ Yes ☑ No	000102-71-6
2	12 00%	DIETHANOLAMINE	☐ Yes ☑ No	000111-42-2
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
N60 -SURFONIC N-60

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
NONIONIC SURFACTANT- ALKYIPHENOL ETHOXYLATE

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☑ PURE ☐ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☑ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
1100	1100		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	POLY -,APLPHA	☐ Yes ☑ No	9016-45-9
2	10.00%	GLYCOL ETHERS	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CHELATING LIQUID 100

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
VERSENE 100

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	55		
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health		
AVERAGE DAILY AMOUNT	160	MAXIMUM DAILY AMOUNT	220	ANNUAL WASTE AMOUNT		STATE WASTE CODE	
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car	
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other	
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin		
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon		

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	35 00%	ETHYLENEDIAMINE TETRAACETIC ACID SALT	☐ Yes ☑ No	64-02-08
2	1 00%	SODIUM GLYCOLATE	☐ Yes ☑ No	2836-32-0
3	1 00%	NITRILORTIACETIC ACID TRISODIUM SALT	☐ Yes ☑ No	5064-31-3
4	1 00%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
5	62 00%	WATER	☐ Yes ☑ No	7732-18-5

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DETERGENT AND AMMONIA DYES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DYES

EHS* ☐ Yes ☑ No

CAS #
81-88-9

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 25	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health
AVERAGE DAILY AMOUNT 23	MAXIMUM DAILY AMOUNT 25	ANNUAL WASTE AMOUNT			STATE WASTE CODE
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☑ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 MAP# (optional) GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DGC WinSurf

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
AQUEOUS SYNTHETIC DETERGENT/CHELATE

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☑ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
200	440		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	10 00%	AMINOCARBOXYLIC ACID	☐ Yes ☑ No	60-00-4
2	3 00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	1310-58-3
3	87 00%	WATER	☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Hazardous Materials Business Plan - List of Chemicals

Permit No: #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	230000	GAL	Liquid	180000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
DIESEL FUEL NO 2	DIESEL FUEL NO 2	110	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
NONIONIC SURFACTANT-ALKYIPHENOL ETHOXOYLATE	N60 -SURFONIC N-60	1100	GAL	Liquid	55	
VERSENE 100	CHELATING LIQUID 100	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	
DMDM HYDANTION	DANTOGARD DMDMHYDANTION	110	GAL	Liquid	55 Ga	
ACTIVES	FMB 1210-8	110	GAL	Liquid	55	
TRISODIUM PHOSPHATE	TRISODIUM ORTHOPHOSPHATE	2000	LBS	Solid	50	

PRODUCTS TO ENTER ON BUSINESS PLAN

MSDS	CHEMICAL	CONTAINER #'s Per	MAX	AVG	CA P 65
Y	Accosoft 550-PG	Bulk Tank	~~20954#~~	15000#	Y
Y	Ammonyx Lo	55Ga	1000#	500#	
Y	Dantogard DMDMHydantion	55 Ga (500)	1000#	500#	Y
Y	Bio-Terge AS-40 ??	55Ga	~~3200#~~	1500#	Y
Y	Uniflo(R)-26 Sodium Metasilicate Pentahydrate	50# Bag	NListd	2000#	
Y	FMB 1210-8 Quat 80%	55Ga ~~(400)~~	~~1200#~~	600#	Y
Y	NORFOX 91-6	55Ga (420)	4200#	2100#	
Y	BIO-SOFT D-40	Bulk		10000#	
	Noninonic Surfacatant-9				
Y	Trisodium Phosphate	Bag ~~(50)~~	~~2000#~~	1500#?	
	Ethoxynated Linear Alchohol 91-6*				
	Sodium Xylenesulfonate 40%	55Ga. (500)	5000#?	2500#	
	Glycol Ether DB				
Y	Sodium Lauryl Ether Sulfate	Bag ( )			
	(CALFOAM ES-603) Coconut Diethanolamide				
	Alpha Olephlin Sulfonate 40%				

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, TANK #'s 6 & 7
Map No: | Grid No:
Chemical Name: CAUSTIC SODA 50% ☐ Trade Secret
Common Name: OCCIDENTAL CHEMICAL ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ Radioactive Curies:
Physical State: Liquid
Fed Hazard Categories: ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 10000
Units: GAL Max Daily Amt: 20000 Avg Daily Amt: 10000 Annual Waste Amt:
Storage Container: (A) Above Ground Tank Pressure Storage Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
50.00%	SODIUM HYDROXIDE	☐	1310-73-2
		☐	
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, NORTHEAST SIDE OF BUILDING
Map No: | Grid No:
Chemical Name: CHLORINE ☐ Trade Secret
Common Name: OCCIDENTAL CHEMICAL ☑ EHS
CAS No: 7782-50-5
Fire Code Haz Class:
Type: Pure ☐ Radioactive Curies:
Physical State: Gas
Fed Hazard Categories: ☐ Fire ☐ Reactive ☑ Pressure Release ☑ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 968400
Units: CU FT Max Daily Amt. 1936800 Avg Daily Amt: 150640 Annual Waste Amt:
Storage Container. (Q) Railcar Pressure Storage Above Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
100.00%	CHLORINE	☑	7782-50-5
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, TANK#27
Map No: | Grid No:
Chemical Name: AMMONIA AQUAEOUS ☐ Trade Secret
Common Name: HILL BROTHERS CHEMICAL CO, ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ Radioactive Curies:
Physical State: Liquid
Fed Hazard Categories: ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 6000
Units: GAL Max Daily Amt: 6000 Avg Daily Amt: 4000 Annual Waste Amt:
Storage Container: (A) Above Ground Tank Pressure Storage Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
29.00%	AMMONIA	☑	7664-41-7
	AQUA AMMONIA	☐	
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM TANK #'s 23,25,26,33 &48 AND WAREHOUSE
Map No: | Grid No:
Chemical Name: HOUSEHOLD AMMONIA ☐ Trade Secret
Common Name: T-CHEM PRODUCTS, INC. ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ Radioactive Curies:
Physical State: Liquid
Fed Hazard Categories: ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 6200
Units: GAL Max Daily Amt: 28000 Avg Daily Amt: 20000 Annual Waste Amt:
Storage Container: (A) Above Ground Tank&(N) Pressure Storage Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
8.00%	AMMONIA	☐	1336-21-6
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, WW & TANK# 13
Map No: | Grid No:
Chemical Name: HYDROGEN PEROXIDE 50% ☐ Trade Secret
Common Name: INTEROX AMERICA ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ Radioactive Curies:
Physical State: Liquid
Fed Hazard Categories: ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 10000
Units: GAL Max Daily Amt: 10000 Avg Daily Amt: 5000 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
50.00%	HYDROGEN PEROXIDE	☐	7722-84-1
		☐	
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, TANK 15
Map No: | Grid No:
Chemical Name: SURFONIC N-102 ☐ Trade Secret
Common Name: ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ Radioactive Curies:
Physical State: Liquid
Fed Hazard Categories: ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 12000
Units: GAL Max Daily Amt: 7000 Avg Daily Amt: 5000 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
	POLY(OXY-1 2 ETHANEDIYL) ALPH	☐	9016-45-9
		☐	
	SULFURIC ACID	☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, NORTHEAST END OF BUILDING
Map No: | Grid No:
Chemical Name: PROPANE ☐ Trade Secret
Common Name: PETROLANE ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ Radioactive Curies:
Physical State: Gas
Fed Hazard Categories: ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 18231
Units: CU FT Max Daily Amt: 18231 Avg Daily Amt: 10950 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage Above Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
97.00%	PROPANE	☐	74-98-6
1.00%	ETHANE	☐	74-84-0
1.00%	PROPYLENE	☐	115-07-1
1.00%	BUTANE	☐	106-97-8
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: MAINTENANCE SHOP
Map No: | Grid No:
Chemical Name: ACETYLENE ☐ Trade Secret
Common Name: PRAXAIR,INC. ☐ EHS
CAS No: 74-86-2
Fire Code Haz Class:
Type: Pure ☐ Radioactive Curies:
Physical State:
Fed Hazard Categories: ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 130
Units: CU FT Max Daily Amt: 390 Avg Daily Amt: 200 Annual Waste Amt:
Storage Container: (L) Cylinder Pressure Storage Above Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
100.00%	ACETYLENE	☐	74-86-2
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	MAINTENANCE SHOP
Map No:	Grid No:
Chemical Name:	OXYGEN ☐ Trade Secret
Common Name:	UNION CARBIDE ☐ EHS
CAS No:	7782-44-7
Fire Code Haz Class:	
Type:	Pure ☐ Radioactive Curies:
Physical State:	Gas
Fed Hazard Categories:	☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 249
Units: CU FT	Max Daily Amt: 747 Avg Daily Amt: 350 Annual Waste Amt:
Storage Container:	Cylinder Pressure Storage Above Ambient
Storage Temperature:	Ambient

W	Hazardous Component	EHS	CAS#
100.00%	OXYGEN	☐	7782-44-7
		☐	
		☐	
		☐	
		☐	

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	MAINTENANCE SHOP
Map No:	Grid No:
Chemical Name:	ARGON ☐ Trade Secret
Common Name:	PRAXAIR,INC, ☐ EHS
CAS No:	7440-37-1
Fire Code Haz Class:	
Type:	Pure ☐ Radioactive Curies:
Physical State:	Gas
Fed Hazard Categories:	☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 250
Units: CU FT	Max Daily Amt: 250 Avg Daily Amt: 150 Annual Waste Amt:
Storage Container:	(L) Cylinder Pressure Storage Above Ambient
Storage Temperature:	Ambient

W	Hazardous Component	EHS	CAS#
100.00%	ARGON	☐	7440-37-1
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	BLOWMOLD DEPARTMENT
Map No:	Grid No:
Chemical Name:	MULTI GEAR OIL API GL-S SAE 85 W150 ☐ Trade Secret
Common Name:	LUBRICATING SPECIALTIES CO. ☐ EHS
CAS No:	
Fire Code Haz Class:	
Type:	Mixture ☐ Radioactive Curies:
Physical State:	Liquid
Fed Hazard Categories:	☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 55
Units: GAL	Max Daily Amt: 55 Avg Daily Amt: 55 Annual Waste Amt:
Storage Container:	Steel Drum Pressure Storage Ambient
Storage Temperature:	Ambient

W	Hazardous Component	EHS	CAS#
95.00%	SOLV REF PETR BASE STOCK	☐	64742-01-4
		☐	
		☐	
		☐	
		☐	

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	LAB
Map No:	Grid No:
Chemical Name:	HELIUM ☐ Trade Secret
Common Name:	☐ EHS
CAS No:	
Fire Code Haz Class:	
Type:	Pure ☐ Radioactive Curies:
Physical State:	Gas
Fed Hazard Categories:	☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container 300
Units:	Max Daily Amt: 300 Avg Daily Amt: 200 Annual Waste Amt:
Storage Container:	Pressure Storage
Storage Temperature:	

W	Hazardous Component	EHS	CAS#
	HELIUM	☐	
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: BLOWMOLD
Map No: | Grid No:
Chemical Name: NITROGEN ☐ Trade Secret
Common Name: UNION CARBIDE ☐ EHS
CAS No: 7727-37-9
Fire Code Haz Class:
Type: Pure ☐ Radioactive Curies:
Physical State: Gas
Fed Hazard Categories: ☐ Fire ☐ Reactive ☑ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 304
Units: CU FT Max Daily Amt: 3648 Avg Daily Amt: 2128 Annual Waste Amt:
Storage Container: Cylinder Pressure Storage Above Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
100.00%	NITROGEN	☐	7727-37-9
		☐	
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM (BAG/DRUM STORAGE AREA)
Map No. | Grid No:
Chemical Name: SODA ASH ☐ Trade Secret
Common Name: EMC ☐ EHS
CAS No.
Fire Code Haz Class:
Type: Pure ☐ Radioactive Curies:
Physical State. Solid
Fed Hazard Categories: ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 55
Units: LBS Max Daily Amt: 2000 Avg Daily Amt: 500 Annual Waste Amt:
Storage Container: Fiber Drum Pressure Storage Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
99.80%	SODIUM CARBONATE	☐	497-19-8
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: BLOWMIND DEPARTMENT
Map No: | Grid No:
Chemical Name: ANTI-FREEZE AND SUMMER COOLANT ☐ Trade Secret
Common Name: TEXACO INC. ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ Radioactive Curies:
Physical State: Liquid
Fed Hazard Categories: ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 55
Units: GAL Max Daily Amt: 55 Avg Daily Amt: 33 Annual Waste Amt:
Storage Container: (D) Steel Drum Pressure Storage Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
95.00%	1 2 ETHANEDIOL	☐	107-21-1
2.99%	BORAX	☐	1303-96-4
0.99%	NITRIC ACID SODIUM SALT	☐	7631-99-4
0.99%	NaOH	☐	1310-73-2
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, TANK #'s 1,2,3 & 5 AND WAREHOUSE
Map No: | Grid No:
Chemical Name: SODIUM HYPOCHLORITE BLEACH ☐ Trade Secret
Common Name: SAME AS ABOVE ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ Radioactive Curies:
Physical State: Liquid
Fed Hazard Categories: ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 22500
Units: GAL Max Daily Amt: 208000 Avg Daily Amt: 208000 Annual Waste Amt:
Storage Container: Above Ground Tank & N Pressure Storage Ambient
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
14.00%	SODIUM HYPOCHLORITE	☐	7681-52-9
0.50%	SODIUM HYDROXIDE	☐	1310-73-2
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK SO-CAL INC. (T-CHEM

Business Name: KIK SO-CAL INC. (T-CHEM PRODUCTS)
Chemical Location: TANK FARM TANK # 18
Map No: Grid No:
Chemical Name: ACCOSOFT 501 ☐ Trade Secret
Common Name: STEPAN FABRIC SOFTNER BASE ☐ EHS
CAS No:
Fire Code Haz Class:
Type: ☐ Radioactive Curies:
Physical State:
Fed Hazard Categories: ☑ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: Days on Site: 365 Largest Container:
Units: GAL Max Daily Amt: 7000 Avg Daily Amt: 3500 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
12.00%	ISOPROPYL ALCOHOL	☐	57 - 63 - 0
		☐	
		☐	
		☐	
		☐	

Business Name: KIK SO-CAL INC. (T-CHEM PRODUCTS)
Chemical Location: TANK FARM TANK # 30 & 31
Map No: Grid No:
Chemical Name: METHANOL ☐ Trade Secret
Common Name: WINDSHIELD WASH ☐ EHS
CAS No:
Fire Code Haz Class:
Type: ☐ Radioactive Curies:
Physical State:
Fed Hazard Categories: ☑ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health
State Waste Code: Days on Site: 365 Largest Container: 12000
Units: GAL Max Daily Amt: 12000 Avg Daily Amt: 3000 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage
Storage Temperature: Ambient

W	Hazardous Component	EHS	CAS#
88.00%	WATER	☐	
12.00%	METYL ALCOHOL	☐	67-56-1
		☐	
		☐	
		☐	

United States
Environmental Protection Agency
Washington, DC 20460

FORM APPROVED OMB NO. 2070-0078
APPROVAL EXPIRES 04-30-99

Pesticide Report for Pesticide-Producing Establishments

(Section 7, Federal Insecticide, Fungicide, and Rodenticide Act, as Amended, 7 U.S.C. 136e)

Note *Read all instructions before completing. Production and distribution/sales volumes information reported on this form is treated as business confidential.*

1 EPA Est No.

Site Address

2. Establishment Name	3. Street Address		
T-CHEM PRODUCTS, INC	9028 DICE ROAD		
4. City		5 State or Country	6. Zip Code
SANTA FE SPRINGS		CA	90670

Mailing Address

7. Mailing Address	8. City	9 State or Country	10. Zip Code
9028 DICE ROAD	SANTA FE SPRINGS	CA	90670
11 Name of Establishment Officer: M. RICHARD WADLEY	12. Title: C.E.O	13. Date *(Mo., Day, Year)*: 02/23/99	14 Telephone Number: (562) 906-2210

15 Signature of Establishment Officer: M. Richard Wadley

PESTICIDE PRODUCTION INFORMATION

16. Product Code: X *(If "4" attach chemical formulation per instructions)*			17. EPA Product Registration Number: 11321-11-AA	
18 Product Name: PURE BRIGHT 10% SODIUM HYPOCHLORITE SOLUTION			19. Product Classification: 0 9	
20 Product Type: 2	21. Market Produced For: 1	22. Use/Classification: 2	23. Unit of measure: P = Pound G = Gallons K = Kilograms L = Liters T = Tons U = Units: G	
24. Amount Produced/Repackaged/Relabeled Last Year	[1998]	0		
25. Amount Sold/Distributed Last Year - US	[1998]	0		
26 Amount Sold/Distributed Last Year - Foreign	[1998]	0		
27 Amount To Be Produced/Repackaged/Relabeled This Year	[1999]	0		

16 Product Code: 1 *(If "4" attach chemical formulation per instructions)*			17 EPA Product Registration Number: 11321-7-ZA	
18 Product Name: PURE BRIGHT GERMICIDAL BLEACH			19. Product Classification: 0 9	
20 Product Type: 2	21. Market Produced For: 1	22 Use/Classification: 2	23. Unit of measure: P = Pound G = Gallons K = Kilograms L = Liters T = Tons U = Units: G	
24 Amount Produced/Repackaged/Relabeled Last Year	[1998]	161,782		
25 Amount Sold/Distributed Last Year - US	[1998]	161,782		
26 Amount Sold/Distributed Last Year - Foreign	[1998]	0		
27 Amount To Be Produced/Repackaged/Relabeled This Year	[1999]	175,000		

16 Product Code: 1 *(If "4" attach chemical formulation per instructions)*			17. EPA Product Registration Number: 11321-10-AA	
18 Product Name: PURE BRIGHT INDUSTRIAL SANTIZER/DISINFECTANT			19. Product Classification: 0 9	
20 Product Type: 2	21. Market Produced For: 1	22. Use/Classification: 2	23. Unit of measure: P = Pound G = Gallons K = Kilograms L = Liters T = Tons U = Units: G	
24 Amount Produced/Repackaged/Relabeled Last Year	[1998]	1,100		
25 Amount Sold/Distributed Last Year - US	[1998]	1,100		
26 Amount Sold/Distributed Last Year - Foreign	[1998]	0		
27 Amount To Be Produced/Repackaged/Relabeled This Year	[1999]	900		

CONTINUED ON ATTACHED SHEET [X] THIS IS PAGE 1 OF 2

(EPA Use Only)

28. EPA Reviewer	29. EPA Ins. #	30. Routine/Data Collection Received	31. Date Reviewed	32. Reporting Year
				1998

United States
Environmental Protection Agency
Washington, DC 20460

FORM APPROVED OMB NO. 2070-0078
APPROVAL EXPIRES 04-30-99

Pesticide Report for Pesticide-Producing Establishments

(Section 7, Federal Insecticide, Fungicide, and Rodenticide Act, as Amended, 7 U.S.C. 136e)

Note: *Read all instructions before completing. Production and distribution/sales volumes information reported on this form is treated as business confidential.*

(EPA Use Only) Latitude / Longitude

1. EPA Est. No.

Site Address

2. Establishment Name	3. Street Address		
T-CHEM PRODUCTS, INC	9028 DICE ROAD		
4. City		**5. State or Country**	**6. Zip Code**
SANTA FE SPRINGS		CA	90670

Mailing Address

7. Mailing Address	8. City	9. State or Country	10. Zip Code
9028 DICE ROAD	SANTA FE SPRINGS	CA	90670
11. Name of Establishment Officer	**12. Title**	**13. Date (Mo., Day, Year)**	**14. Telephone Number**
M. RICHARD WADLEY	C.E.O	02/23/99	(562) 906-2210

15. Signature of Establishment Officer: M R Wadley

PESTICIDE PRODUCTION INFORMATION

16. Product Code: 1 (If "4" attach chemical formulation per instructions)			17. EPA Product Registration Number: 11321-20001-AA	
18. Product Name: PURE BRIGHT INDUSTRIAL SODIUM HYPOCHLORITE			19. Product Classification: 0 9	
20. Product Type: 2	21. Market Produced For: 1	22. Use/Classification: 2	23. Unit of measure: P=Pound G=Gallons K=Kilograms L=Liters T=Tons U=Units: G	
24. Amount Produced/Repackaged/Relabeled Last Year	[1998]	0		
25. Amount Sold/Distributed Last Year - US	[1998]	0		
26. Amount Sold/Distributed Last Year - Foreign	[1998]	0		
27. Amount To Be Produced/Repackaged/Relabeled This Year	[1999]	0		

16. Product Code: 1 (If "4" attach chemical formulation per instructions)			17. EPA Product Registration Number: 11321-6-AA	
18. Product Name: PURE BRIGHT INSTITUTIONAL SANITIZER			19. Product Classification: 0 9	
20. Product Type: 2	21. Market Produced For: 1	22. Use/Classification: 2	23. Unit of measure: P=Pound G=Gallons K=Kilograms L=Liters T=Tons U=Units: G	
24. Amount Produced/Repackaged/Relabeled Last Year	[1998]	470		
25. Amount Sold/Distributed Last Year - US	[1998]	470		
26. Amount Sold/Distributed Last Year - Foreign	[1998]	0		
27. Amount To Be Produced/Repackaged/Relabeled This Year	[1999]	500		

16. Product Code: 1 (If "4" attach chemical formulation per instructions)			17. EPA Product Registration Number: 11321-12-AA	
18. Product Name: PURE BRIGHT LIQUID CHLORINATOR			19. Product Classification: 0 9	
20. Product Type: 2	21. Market Produced For: 1	22. Use/Classification: 2	23. Unit of measure: P=Pound G=Gallons K=Kilograms L=Liters T=Tons U=Units: G	
24. Amount Produced/Repackaged/Relabeled Last Year	[1998]	0		
25. Amount Sold/Distributed Last Year - US	[1998]	0		
26. Amount Sold/Distributed Last Year - Foreign	[1998]	0		
27. Amount To Be Produced/Repackaged/Relabeled This Year	[1999]	0		

CONTINUED ON ATTACHED SHEET ☐ THIS IS PAGE 2 OF 2

(EPA Use Only)

28. EPA Reviewer	29. EPA Office	30. Preliminary Date Application Received	31. Date Reviewed	32. Reporting Year
				1998

Hazardous Materials Business Plan - List of Chemicals

Permit No #Name? **Facility:** #Name?

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
CAUSTIC SODA 50%	CAUSTIC SODA 50%	230000	GAL	Liquid	200000	
CHLORINE	CHLORINE	900000	LBS	Gas	180000	
AMMONIA AQUAEOUS	AMMONIA AQUAEOUS	6000	GAL	Liquid	6000	
HOUSEHOLD AMMONIA	HOUSEHOLD AMMONIA	28000	GAL	Liquid	6200	
HYDROGEN PEROXIDE 50%	HYDROGEN PEROXIDE 50%	10000	GAL	Liquid	10000	
SURFONIC N-102	SURFONIC N-102	12000	GAL	Liquid	12000	
PROPANE	PROPANE	18231	CU FT	Gas	18231	
ACETYLENE	ACETYLENE	390	CU FT	Gas	130	
OXYGEN	OXYGEN	747	CU FT	Gas	249	
ARGON	ARGON	250	CU FT	Gas	250	
MULTI GEAR OIL API GL-S SAE 85 W150	MULTI GEAR OIL API GL-S SAE 85 W150	330	GAL	Liquid	55	
NITROGEN	NITROGEN	3648	CU FT	Gas	304	
SODA ASH	SODA ASH	2000	LBS	Solid	55	
ANIT-FREEZE & SUMMER COOLANT	ANTI-FREEZE & SUMMER COOLANT	55	GAL	Liquid	55	
SODIUM HYPOCHLORITE BLEACH	SODIUM HYPOCHLORITE BLEACH	208000	GAL	Liquid	22500	
WASTE OIL	WASTE OIL	300	GAL	Liquid	300	
HYDROCHLORIC ACID	T-10FS HYDROCHLORIC ACID SOLUTION	220	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA PRODUCT FRAGRANCES	330	GAL	Liquid	55	
PERFUMES	BLEACH & AMMONIA FRAGRANCES	770	GAL	Liquid	55	
PHOSPHORIC ACID	PHOSPHORIC ACID	55	GAL	Liquid	55	
DIESEL FUEL NO. 2	DIESEL FUEL NO. 2	220	GAL	Liquid	110	
BOILER TREATMENT	BWT-OD-PPSA CR3057	55	GAL	Liquid	55	
CAUSTIC POTASH- LIQUID 50%	POTASIUM HYDROXIDE	12000	GAL	Liquid	12000	
POTASSIUM HYPOCHLORITE BLEACH	POTASSIUM HYPOCHLORITE BLEACH 7-15%	6000	GAL	Liquid	6000	
STYRENE/ACRYLIC EMULSION POLYMER	OPACIFIER 305	55	LBS	Liquid	55	
VERSENE 100	CHELATING LIQUID 100	220	GAL	Liquid	55	
DYES	DETERGENT AND AMMONIA DYES	25	LBS	Solid	25	
AQUEOUS SYNTHETIC DETERGENT/CHELATE	DGC WinSurf	440	GAL	Liquid	55	
DMDM HYDANTION	DANTOGARD DMDMHYDANTION	110	GAL	Liquid	55 Ga	
ACTIVES	FMB 1210-8	110	GAL	Liquid	55	
ANIONIC SURFACTANT	CALFOAM ES-603	660	GAL	Liquid	55	
HYDROTROPE	STEPANATE SXS	440	GAL	Liquid	55	

Common Name	Chemical Name	Maximum Daily Amt	Units	Physical State	Largest Container	Grid No
GLYCOL ETHER	GLYCOL ETHER DB	440	GAL	Liquid	55	

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
STEPANATE SXS

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HYDROTROPE

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
NFPA 1

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☑ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☑ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
220	440		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Dru	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other*
☐ Tank Inside Buildin	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% Wt	HAZARDOUS COMPONENT (For mixture or waste only)	EHS*	CAS#
1	42.00%	SODIUM XYLENESULPHONATE	☐ Yes ☑ No	1300-72-7
2	2.00%	SODIUM SULFATE	☐ Yes ☑ No	7757-82-6
3	56.00%	WATER	☐ Yes ☑ No	7732-18-5
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
GLYCOL ETHER DB

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
GLYCOL ETHER

EHS* ☐ Yes ☑ No

CAS #
112-34-5

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☑ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health

AVERAGE DAILY AMOUNT	440	MAXIMUM DAILY AMOUNT	440	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Dru	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Buildin	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	99.00%	DIETHYLENE GLYCOL	☐ Yes ☑ No	112-34-5
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION·

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CALFOAM ES-603

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ANIONIC SURFACTANT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
FLAMMABLE NFPA 3

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 220	MAXIMUM DAILY AMOUNT 440	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Dru	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Buildin	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS*	CAS#
1	60.00%	SODIUM LAURYL ETHER SULFATE	☐ Yes ☑ No	9004-82-4
2	28 00%	WATER	☐ Yes ☑ No	7732-18-5
3	12 00%	ETHYL ALCOHOL	☐ Yes ☑ No	64-17-5
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

City of Santa Fe Springs Fire Department

Environmental Protection Division ■ Certified Unified Program Agency
11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

CERTIFICATION OF COMPLIANCE

cc: GW BB PM

BUSINESS KIK	SITE ADDRESS 9028 DICE Rd.
INSPECTOR Richard Kellman	DATE OF INSPECTION 10/19/2005

This form must be completed and returned to the issuing inspector within 30 days of your facility's inspection unless otherwise noted. Send this form and any supporting documentation to the address listed above. Failure to return this certification may result in a re-inspection of your facility and may require re-inspection fees pursuant to City of Santa Fe Springs Municipal Code Section 97.104.

The violation(s) cited have been corrected by the following actions:

39. Attached updated Chemical Inventory 11/10/05
A. KIK Calarp Related SOP's were updated 10/27 Phone 11/3/05
B. Pumps to pump flammable liquid have been purchased and in use.

Classes of violations: I = Class I violation, II = class II violation, M = Minor, and O – other violation

- I certify that the violations cited on the Notice of Violation & Inspection Report have been corrected.
- I have personally examined any attached documentation submitted as proof of compliance and I believe the information to be true and accurate.
- Based on my examination of any attached documentation and inquiry of the individual(s) who prepared or obtained them, I believe the information to be true, accurate, and complete.
- I am authorized to file this certification on behalf of the responsible party.
- I am aware that there are significant penalties for submitting false information and/or for non-compliance and declare that the foregoing certification is true and correct.

Executed at: Santa Fe Springs, *California* *Date:* 11/16/2005

Signature: [signature] *Printed Name:* Deborah Johnson

Position/Title: Safety/Environmental Supv

City of Santa Fe Springs Fire Department

Environmental Protection Division ■ Certified Unified Program Agency

11300 Greenstone Ave ■ Santa Fe Springs ■ CA 90670 (562) 944-9713 FAX (562) 941-1817

INSPECTION REPORT & NOTICE OF VIOLATION

Page 1 of ___

K-K
9028 Dice
SFS, CA 90670

HMBP UFC
HWG CalARP
TW SW
SIC 2841

The following items, if applicable, have been inspected. This document constitutes a Summary of Violations and Notice to Comply if the violation (V) column is checked

Reference Titles 19 and 22 of the California Code of Regulations (CCR), Chapters 6.5, 6.67, and 6.95 of the Health and Safety Code (HSC), and Chapter 97 of the City Code

Inspector(s) Richard Kallman — **Inspection date** 10/19/05

Inspection consent given by Derrell Johnson — **Contact phone number** (562) 946-6427

HAZARDOUS WASTE GENERATOR				HAZARDOUS WASTE GENERATOR			
	V	SUBJECT	REFERENCE		V	SUBJECT	REFERENCE
1		Hazardous waste generator permit	City Ordinance 97 400	27		Hazardous waste analysis retained for 3 yrs	CCR 66262 40(c)
2		EPA ID number (call DTSC 800-618-6942)	CCR 66262 12(a)	28		Personnel training for LQG	CCR 66265 16
3		Hazardous waste determination	CCR 66262 11	29		Personnel training for generators of waste	CCR 66262 34(d), CFR
4		Proper disposal of hazardous waste	HSC 25189 5(a)	30		Contingency plan for LQG	CCR 66265 51
5		Reckless management of hazardous waste	HSC 25189 6	31		Emergency preparedness/prevention	CCR 66265 30
6		Hazardous waste labeling	CCR 66262 34(f)	32		SB14 requirements for LQGs	CCR 67100 3
7		Hazardous waste accumulation time	CCR 66262 34(a-d)	33		Biennial report for RCRA LQGs	CCR 66262 40
8		Retrograde/speculative accumulation	CCR 66262 10	34		Excluded recyclable material management	HSC 25143 2-9
9		Satellite accumulation	CCR 66262 34(e)	35		Recyclable material report	HSC 25143 10
10		Containers leaking or not in good condition	CCR 66265 171	36		Proper management of Universal Waste	CCR 66273
11		Hazardous waste container closed	CCR 66265 173(a)	37		Other hazardous waste violation(s)	
12		Separation of incompatibles	CCR 66265 177			**HAZARDOUS MATERIALS BUSINESS PLAN**	
13		Management of empty containers	CCR 66261 7	38		HMBP established and filed	HSC 25503 5
14		Used oil management	CHSC 25250 4	39	O	Inventory and plot plan accurate	HSC 25509
15		Used oil filter management	CCR 66266 130	40		Owner/operator information accurate	Ch 6 95, HSC
17		Contaminated textile management	HSC 25144 6			**INDUSTRIAL WASTE**	
18		Container storage inspection – weekly	CCR 66265 174	42		Discharging industrial waste w/o a permit	City Ordinance, Ch 97
19		Tank inspection – daily	CCR 66265 195	43		Other violation(s)	
20		Tank operating requirements	CCR 66265 194			**STORM WATER**	
21		Hazardous waste transported w/o manifest	CCR 66262 20-23	44		Storm water permit required (GIASP)	City Ordinance, Ch 52
22		Hazardous waste manifest complete	CCR 66262 23(a)	45		Failure to implement BMPs	City Ordinance, Ch. 52
23		Manifest copies to DTSC	CCR 66262 23(a)(4)			**ABOVE GROUND PETROLEUM STORAGE**	
24		Manifest copies retained for 3 years	CCR 66262 40(a)	46		SPCC plan complete per requirements	CHSC 25270 5(c)
25		Consolidated manifest requirements	HSC 25160 2			**UNIFORM FIRE CODE**	
26		LDR documents retained onsite	CCR 66268 7(a)(6)	47		Uniform Fire Code	Uniform Fire Code

☒ **No hazardous waste violation(s) observed on date of inspection**

☒ **Notice to Comply: The violation(s) must be corrected by** 11-19-05 .

☒ **Return "Certificate of Compliance"** **$** **Fee after this date**

Attention: The item(s) checked are in violation. A re-inspection may occur at any time to verify compliance. Non-compliance could result in re-inspection fees, permit revocation, and/or administrative/civil/criminal penalties. Any time granted for correction of the violation(s) does not preclude any enforcement action by this Department or other agencies. The giving of this notice and recent inspection of your facility is not a representation by the City of Santa Fe Springs that no other violations exist on your premises.

Program(s) inspected ☒ HMBP ☒ HWG ☐ TP ☐ PBR ☐ RECYCLER ☐ UST ☒ CAL ARP ☐ SPCC ☒ SW ☒ TW ☒ UFC

Inspection type ☒ Routine ☐ Other | HWG Status ☐ RCRA LQG ☐ RCRA SQG ☒ CA ONLY ☐ RECYCLER ☐ CESQG Silver ☐ SPG

Inspection Category ☐ Single Program ☒ Combined ☐ Joint ☒ Integrated/Multi-Media | Number of Employees 78

Notes K-K was inspected on 10-19-05. Facility manufactures bleach from Chlorine + Caustic. Hazardous Waste Records were not reviewed.

39. K-K violated H+SC 25509 by not having an accurate inventory on File. CalFoam ES-600, Glycol Ether, + Stepanate-SXS were not on their inventory. K-K must update their inventory.

A. K-K violated Title 19 by not having the CalARP related SOPs certified annually. K-K must have their CalARP related SOPs certified annually.

B. K-K violated UFC 79 by pumping Flammable Liquid with a non-rated pump. K-K must only transfer the flammable liquid through a listed pump. Violations must be corrected by 11-19-05

I have read and understand the above stated violations. After these violations have been corrected, I will sign and return the "Certification of Compliance" form and submit any other required or requested information.

Signature of responsible party	Print name	Date
	Derrell Johnson	10/19/05

KIK
SOCAL

9028 DICE ROAD
SANTA FE SPRINGS
CA 90670

TELEPHONE:
562-946-6427
FAX
562-941-9780

October 2, 2000

Chief Neal Welland
Santa Fe Springs Fire Department
11300 Greenstone Ave.
Santa Fe Springs, CA 90670-4619

Subject: Notice of Violation & Order to Comply dated 9/6/00

Dear Chief Welland:

The status of the violations that were noted during an inspection by Richard Kallman on the above date, are as follows:

#1. The Hazardous Materials, stored outside, that were of concern, have been removed and we so not foresee in the future to have amounts that would require local containment. If in the future the need does arise, we will provide plans to meet the requirements of UFC 8003.1.2.2. The drums of flammable fragrances, that are over the UFC amount requirements, will be stored in the approved IPA drum storage area, upon completion.

#2. A revised Hazardous Materials Disclosure Inventory, updated to include items addressed, with exception of Rodasurf (which has been removed from the property) is attached.

#3. The Anti Freeze drums were properly labeled on 9/7/00, to meet the requirements requested.

#4. A signed copy of manifest # 98769569 dated 4/27/00 is attached.

Thank you and if you have any questions feel free to call me at 562/906-2240.

Sincerely,

Derrell Johnson/pp

Derrell Johnson
Safety & Environmental Supvr.

DJ:pp
Attachments

cc: Richard Kallman
Greg Wiese
File

CITY OF SANTA FE SPRINGS FIRE DEPARTMENT

Fire Protection Division • Environmental Protection Division
11300 Greenstone Avenue • Santa Fe Springs, CA 90670-4619 • (562) 944-9713 • FAX (562) 941-1817 • fire@santafesprings.org

NOTICE OF VIOLATION & ORDER TO COMPLY

Business Name: K-K Contact: Derrell Johnson
Site Address: 9028 Dice Unit # ____ Telephone: 946-6427
Business Owner: ____ Inspected by: Richard Kallman

☒ FIRST NOTICE 9-6-00 (DATE) Compliance Due Date 10-6-00
☐ SECOND NOTICE ____ (DATE) Compliance Due Date ____
☐ THIRD NOTICE ____ (DATE) Compliance Due Date ____

1st Notice NO CHARGE
2nd Notice ~~$50 Fine~~ 100
3rd Notice $100 Fine
Office Meeting $500 Fine

CORRECT THE BELOW STATED VIOLATIONS, SIGN AND RETURN FORM TO AVOID LATE FINES ____ INT.

ITEM	DESCRIPTION OF VIOLATIONS:
1.	Provide plans for local containment for outside storage of hazardous materials + implementation time frame (UFC 8003.1.3.3)
2.	Add materials to disclosure: CO_2, Fragrances, Rhodasurf, hydrochloric acid (H+SC 6.95) REV - Disc + Hard Copy Enclosed
3.	Provide proper labeling for waste antifreeze (22CCR 66262.34(e)) Complete 9/7/00
4.	Send copy of signed manifest # 95769569 (22CCR 66262.42(a)).

The above conditions or practices represent a violation of the referenced code for which there are civil and or criminal penalties. Failure to correct the above violations by the specified due date may result in legal action being taken against the above parties. The giving of this notice and recent inspection of your facility is not a representation by the City of Santa Fe Springs that no other violations exist on your premises. After you have corrected the violation, please sign and print your name along with the date and return this notice with any required documentation to the Santa Fe Springs Fire Department at the above address.

I HEREBY CERTIFY THAT THE ABOVE SPECIFIED VIOLATIONS HAVE BEEN CORRECTED.

Derrell Johnson / DP — DERRELL JOHNSON — 10/3/00
Signature of Responsible Party — Name - Printed — Date

WHITE - OWNER/OCCUPANT COPY CANARY - FIRE DEPARTMENT COPY PINK FPB/EPD COPY

State of California—Environmental Protection Agency
Form Approve I OMB No 2050-0039 (Expires 9-30-99)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

IN CASE OF 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. CAD055148278 | 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
[illegible]

4 Generator's Phone (562) 806 2240

A State Manifest Document Number 98769569

B State Generator's ID

5 Transporter 1 Company Name: WESTERN ENVIRONMENTAL | 6 US EPA ID Number: CAODOOO9O4540

C State Transporter's ID

D Transporter's Phone (951) 360-2311

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
INDUSTRIAL DISPOSAL CO.
1550 SOUTH SOTO STREET
LOS ANGELES CA 90023 | 10 US EPA ID Number: CAD099452708

G State Facility's ID: CAD099452708

H Facility's Phone (323) 268-1171

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 Number
a [illegible]	001		0300		State 223 / EPA/Other
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J Additional Descriptions for Materials Listed Above
WASTEWATER & OIL
ERG NO: NONE

K Handling Codes for Wastes Listed Above
a. D-1 b.
c. d.

15 Special Handling Instructions and Additional Information
24 HOUR EMERGENCY CONTACT: JOHN HAMMOND
WEAR APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT

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	Signature	Month	Day	Year
[illegible]	[signature]	04	27	00

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
TIM TICE	[signature]	04	27	00

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	Signature	Month	Day	Year
John Vigil	[signature]	04	27	00

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (4/97)
EPA 8700—22

White TSDF RETAINS

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	TANK FARM, TANK #'s 6 & 7
Map No:	Grid No:
Chemical Name:	CAUSTIC SODA 50% ☐ Trade Secre
Common Name:	OCCIDENTAL CHEMICAL ☐ EHS
CAS No:	
Fire Code Haz Class:	
Type:	Mixture ☐ RadioactiveCuries
Physical State:	Liquid
Fed Hazard Categories:	☐ Fir ☐ Reactive ☐ Pressure Releas ☑ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 10000
Units: GAL	Max Daily Amt: 20000 Avg Daily Amt: 10000 Annual Waste Amt:
Storage Container:	(A) Above Ground Tank Pressure Storage Ambient
Storage Temperature:	Ambient

% WT	Hazardous Component	EHS	CAS#
50.00%	SODIUM HYDROXIDE	☐	1310-73-2
		☐	
		☐	
		☐	
		☐	

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	TANK FARM, NORTHEAST SIDE OF BUILDING
Map No:	Grid No:
Chemical Name:	CHLORINE ☐ Trade Secre
Common Name:	OCCIDENTAL CHEMICAL ☑ EHS
CAS No:	7782-50-5
Fire Code Haz Class:	
Type:	Pure ☐ RadioactiveCuries
Physical State:	Gas
Fed Hazard Categories:	☐ Fir ☐ Reactive ☑ Pressure Releas ☑ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 968400
Units: CU FT	Max Daily Amt: 1936800 Avg Daily Amt: 150640 Annual Waste Amt:
Storage Container:	(Q) Railcar Pressure Storage Above Ambient
Storage Temperature:	Ambient

% WT	Hazardous Component	EHS	CAS#
100.00%	CHLORINE	☑	7782-50-5
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	TANK FARM, TANK#27
Map No:	Grid No:
Chemical Name:	AMMONIA AQUAEOUS ☐ Trade Secre
Common Name:	HILL BROTHERS CHEMICAL CO, ☐ EHS
CAS No:	
Fire Code Haz Class:	
Type:	Mixture ☐ RadioactiveCuries
Physical State:	Liquid
Fed Hazard Categories:	☐ Fir ☐ Reactive ☐ Pressure Releas ☑ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 6000
Units: GAL	Max Daily Amt: 6000 Avg Daily Amt: 4000 Annual Waste Amt:
Storage Container:	(A) Above Ground Tank Pressure Storage Ambient
Storage Temperature:	Ambient

% WT	Hazardous Component	EHS	CAS#
29.00%	AMMONIA	☑	7664-41-7
	AQUA AMMONIA	☐	
		☐	
		☐	
		☐	

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	TANK FARM TANK #'s 23,25,26,33 &48 AND WAREHOUSE
Map No:	Grid No:
Chemical Name:	HOUSEHOLD AMMONIA ☐ Trade Secre
Common Name:	T-CHEM PRODUCTS, INC. ☐ EHS
CAS No:	
Fire Code Haz Class:	
Type:	Mixture ☐ RadioactiveCuries
Physical State:	Liquid
Fed Hazard Categories:	☐ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 6200
Units: GAL	Max Daily Amt: 28000 Avg Daily Amt: 20000 Annual Waste Amt:
Storage Container:	(A) Above Ground Tank&(N) Pressure Storage Ambient
Storage Temperature:	Ambient

% WT	Hazardous Component	EHS	CAS#
8.00%	AMMONIA	☐	1336-21-6
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, WW & TANK# 13
Map No: | Grid No:
Chemical Name: HYDROGEN PEROXIDE 50% ☐ Trade Secre
Common Name: INTEROX AMERICA ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ RadioactiveCuries
Physical State: Liquid
Fed Hazard Categories: ☐ Fir ☐ Reactive ☐ Pressure Releas ☑ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 10000
Units GAL Max Daily Amt: 10000 Avg Daily Amt: 5000 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage Ambient
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
50.00%	HYDROGEN PEROXIDE	☐	7722-84-1
		☐	
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, TANK 15
Map No: | Grid No:
Chemical Name: SURFONIC N-102 ☐ Trade Secre
Common Name: ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ RadioactiveCuries
Physical State: Liquid
Fed Hazard Categories: ☐ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 12000
Units GAL Max Daily Amt: 7000 Avg Daily Amt: 5000 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage Ambient
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
	POLY(OXY-1 2 ETHANEDIYL) ALPH	☐	9016-45-9
		☐	
	SULFURIC ACID	☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, NORTHEAST END OF BUILDING
Map No: Grid No:
Chemical Name: PROPANE ☐ Trade Secre
Common Name: PETROLANE ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ RadioactiveCuries
Physical State: Gas
Fed Hazard Categories: ☐ Fir ☐ Reactive ☑ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 18231
Units CU FT Max Daily Amt: 18231 Avg Daily Amt: 10950 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage Above Ambient
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
97.00%	PROPANE	☐	74-98-6
1.00%	ETHANE	☐	74-84-0
1.00%	PROPYLENE	☐	115-07-1
1.00%	BUTANE	☐	106-97-8
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: MAINTENANCE SHOP
Map No: Grid No:
Chemical Name: ACETYLENE ☐ Trade Secre
Common Name: PRAXAIR,INC. ☐ EHS
CAS No: 74-86-2
Fire Code Haz Class:
Type: Pure ☐ RadioactiveCuries
Physical State:
Fed Hazard Categories: ☐ Fir ☐ Reactive ☑ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 130
Units CU FT Max Daily Amt: 390 Avg Daily Amt: 200 Annual Waste Amt:
Storage Container: (L) Cylinder Pressure Storage Above Ambient
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
100.00%	ACETYLENE	☐	74-86-2
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	MAINTENANCE SHOP
Map No:	Grid No:
Chemical Name:	OXYGEN ☐ Trade Secre
Common Name:	UNION CARBIDE ☐ EHS
CAS No:	7782-44-7
Fire Code Haz Class:	
Type:	Pure ☐ RadioactiveCuries
Physical State:	Gas
Fed Hazard Categories:	☐ Fir ☐ Reactive ☑ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 249
Units: CU FT	Max Daily Amt: 747 Avg Daily Amt: 350 Annual Waste Amt:
Storage Container:	Cylinder Pressure Storage: Above Ambient
Storage Temperature:	Ambient

% WT	Hazardous Component	EHS	CAS#
100.00%	OXYGEN	☐	7782-44-7
		☐	
		☐	
		☐	
		☐	

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	MAINTENANCE SHOP
Map No:	Grid No:
Chemical Name:	ARGON ☐ Trade Secre
Common Name:	PRAXAIR,INC, ☐ EHS
CAS No:	7440-37-1
Fire Code Haz Class:	
Type:	Pure ☐ RadioactiveCuries
Physical State:	Gas
Fed Hazard Categories:	☐ Fir ☐ Reactive ☑ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 250
Units: CU FT	Max Daily Amt: 250 Avg Daily Amt: 150 Annual Waste Amt:
Storage Container:	(D Cylinder Pressure Storage: Above Ambient
Storage Temperature:	Ambient

% WT	Hazardous Component	EHS	CAS#
100.00%	ARGON	☐	7440-37-1
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	BLOWMOLD DEPARTMENT
Map No:	Grid No:
Chemical Name:	MULTI GEAR OIL API GL-5 SAE 85 W150 ☐ Trade Secre
Common Name:	LUBRICATING SPECIALTIES CO. ☐ EHS
CAS No:	
Fire Code Haz Class:	
Type:	Mixture ☐ RadioactiveCuries
Physical State:	Liquid
Fed Hazard Categories:	☐ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 55
Units: GAL	Max Daily Amt: 55 Avg Daily Amt: 55 Annual Waste Amt:
Storage Container:	Steel Drum Pressure Storage Ambient
Storage Temperature:	Ambient

% WT	Hazardous Component	EHS	CAS#
95.00%	SOLV REF PETR BASE STOCK	☐	64742-01-4
		☐	
		☐	
		☐	
		☐	

Business Name:	KIK INTERNATIONAL SOCAL
Chemical Location:	LAB
Map No:	Grid No:
Chemical Name:	HELIUM ☐ Trade Secre
Common Name:	☐ EHS
CAS No:	
Fire Code Haz Class:	
Type:	Pure ☐ RadioactiveCuries
Physical State:	Gas
Fed Hazard Categories:	☐ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code:	0 Days on Site: 365 Largest Container: 300
Units:	Max Daily Amt: 300 Avg Daily Amt: 200 Annual Waste Amt:
Storage Container:	Pressure Storage
Storage Temperature:	

% WT	Hazardous Component	EHS	CAS#
	HELIUM	☐	
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: BLOWMOLD
Map No: | Grid No:
Chemical Name: NITROGEN ☐ Trade Secre
Common Name: UNION CARBIDE ☐ EHS
CAS No: 7727-37-9
Fire Code Haz Class:
Type: Pure ☐ RadioactiveCuries
Physical State: Gas
Fed Hazard Categories: ☐ Flr ☐ Reactive ☑ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 304
Units: CU FT Max Daily Amt: 3648 Avg Daily Amt: 2128 Annual Waste Amt:
Storage Container: Cylinder Pressure Storage: Above Ambient
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
100.00%	NITROGEN	☐	7727-37-9
		☐	
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM (BAG/DRUM STORAGE AREA)
Map No: | Grid No:
Chemical Name: SODA ASH ☐ Trade Secre
Common Name: EMC ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Pure ☐ RadioactiveCuries
Physical State: Solid
Fed Hazard Categories: ☐ Flr ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 55
Units: LBS Max Daily Amt: 2000 Avg Daily Amt: 500 Annual Waste Amt:
Storage Container: Fiber Drum Pressure Storage: Ambient
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
99.80%	SODIUM CARBONATE	☐	497-19-8
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: BLOWMIND DEPARTMENT
Map No: | Grid No:
Chemical Name: ANTI-FREEZE AND SUMMER COOLANT ☐ Trade Secre
Common Name: TEXACO INC. ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ RadioactiveCuries
Physical State: Liquid
Fed Hazard Categories: ☐ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 55
Units GAL Max Daily Amt: 55 Avg Daily Amt: 33 Annual Waste Amt:
Storage Container: (D) Steel Drum Pressure Storage Ambient
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
95.00%	1 2 ETHANEDIOL	☐	107-21-1
2.99%	BORAX	☐	1303-96-4
0.99%	NITRIC ACID SODIUM SALT	☐	7631-99-4
0.99%	NaOH	☐	1310-73-2
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM, TANK #'s 1,2,3 & 5 AND WAREHOUSE
Map No: | Grid No:
Chemical Name: SODIUM HYPOCHLORITE BLEACH ☐ Trade Secre
Common Name: SAME AS ABOVE ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ RadioactiveCuries
Physical State: Liquid
Fed Hazard Categories: ☐ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: 0 Days on Site: 365 Largest Container: 22500
Units GAL Max Daily Amt: 208000 Avg Daily Amt: 208000 Annual Waste Amt:
Storage Container: Above Ground Tank & N Pressure Storage Ambient
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
14.00%	SODIUM HYPOCHLORITE	☐	7681-52-9
0.50%	SODIUM HYDROXIDE	☐	1310-73-2
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK SO-CAL INC. (T-CHEM

Business Name: KIK SO-CAL INC. (T-CHEM PRODUCTS)
Chemical Location: TANK FARM TANK # 18
Map No: Grid No:
Chemical Name: ACCOSOFT 501 ☐ Trade Secre
Common Name: STEPAN FABRIC SOFTNER BASE ☐ EHS
CAS No:
Fire Code Haz Class:
Type: ☐ RadioactiveCuries
Physical State:
Fed Hazard Categories: ☑ Fir ☑ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: Days on Site: 365 Largest Container:
Units GAL Max Daily Amt: 7000 Avg Daily Amt: 3500 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
12.00%	ISOPROPYL ALCOHOL	☐	57 - 63 - 0
		☐	
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM/WASTE WATER TREATMENT AREA
Map No: Grid No:
Chemical Name: CARBON DIOXIDE, CARBONIC ANHYDRIDE ☐ Trade Secre
Common Name: ☐ EHS
CAS No: 124-38-9
Fire Code Haz Class:
Type: Pure ☐ RadioactiveCuries
Physical State: Gas
Fed Hazard Categories: ☐ Fir ☐ Reactive ☑ Pressure Releas ☑ Acute Health ☐ Chronic Health
State Waste Code: Days on Site: 365 Largest Container: 12000
Units LBS Max Daily Amt: 12000 Avg Daily Amt: 6000 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
		☐	
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK SO-CAL INC. (T-CHEM

Business Name: KIK SO-CAL INC. (T-CHEM PRODUCTS)
Chemical Location: TANK FARM TANK # 30 & 31
Map No: Grid No:
Chemical Name: METHANOL ☐ Trade Secre
Common Name: WINDSHIELD WASH ☐ EHS
CAS No:
Fire Code Haz Class:
Type: ☐ RadioactiveCuries
Physical State:
Fed Hazard Categories: ☑ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Healt
State Waste Code: Days on Site: 365 Largest Container: 12000
Units GAL Max Daily Amt: 12000 Avg Daily Amt: 3000 Annual Waste Amt:
Storage Container: Above Ground Tank Pressure Storage
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
88.00%	WATER	☐	
12.00%	METYL ALCOHOL	☐	67-56-1
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM DRUM STORAGE AREA
Map No: Grid No:
Chemical Name: ETHOXYLATED C-12-15 ALCOHOLS ☐ Trade Secre
Common Name: RODASURF LA-9 ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ RadioactiveCuries
Physical State: Liquid
Fed Hazard Categories: ☐ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☑ Chronic Healt
State Waste Code: Days on Site: 365 Largest Container: 55
Units GAL Max Daily Amt: 1320 Avg Daily Amt: Annual Waste Amt:
Storage Container: Steel Drum Pressure Storage
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
99.70%	ETHOXYLATED ALCOHOLS	☐	68131-39-5
0.03%	WATER	☐	7732-18-5
0.00%	ETHYLENE OXIDE	☐	75-21-8
0.00%	DIOXANE	☐	123-91-1
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM WASTE WATER TRETMENT DRUM STORAGE AREA
Map No: Grid No:
Chemical Name: T-10FS HYDROCHLORIC ACID SOLUTION ☐ Trade Secre
Common Name: HYDROCHLORIC ACID ☐ EHS
CAS No:
Fire Code Haz Class:
Type: Mixture ☐ RadioactiveCuries
Physical State: Liquid
Fed Hazard Categories: ☐ Fir ☐ Reactive ☐ Pressure Releas ☐ Acute Health ☐ Chronic Health
State Waste Code: Days on Site: 365 Largest Container: 55
Units GAL Max Daily Amt: 220 Avg Daily Amt: 110 Annual Waste Amt:
Storage Container: Steel Drum Pressure Storage
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
1.00%	HYDROCHLORIC ACID	☐	7647-01-0
		☐	
		☐	
		☐	
		☐	

Business Name: KIK INTERNATIONAL SOCAL
Chemical Location: TANK FARM FLAMABLE STORAGE AREA
Map No: Grid No:
Chemical Name: BLEACH & AMMONIA PRODUCT FRAGRANCES ☐ Trade Secre
Common Name: PERFUMES ☐ EHS
CAS No: N/AP
Fire Code Haz Class: CLASS II
Type: Mixture ☐ RadioactiveCuries
Physical State: Liquid
Fed Hazard Categories: ☑ Fir ☐ Reactive ☐ Pressure Releas ☑ Acute Health ☐ Chronic Health
State Waste Code: Days on Site: 365 Largest Container: 55
Units GAL Max Daily Amt: 330 Avg Daily Amt: 185 Annual Waste Amt:
Storage Container: Steel Drum Pressure Storage
Storage Temperature: Ambient

% WT	Hazardous Component	EHS	CAS#
		☐	
		☐	
		☐	
		☐	
		☐	

Hazardous Materials Inventory

KIK INTERNATIONAL SOC

Business Name:	KIK INTERNATIONAL SOCAL		
Chemical Location:	TANK FARM DRUM STORAGE AREA		
Map No:		Grid No:	
Chemical Name:	BLEACH & AMMONIA FRAGRANCES	☐ Trade Secre	
Common Name:	PERFUMES	☐ EHS	
CAS No:	N/AP		
Fire Code Haz Class:	CIASS I		
Type:	Mixture	☐ RadioactiveCuries	
Physical State:	Liquid		
Fed Hazard Categories:	☑ Fir ☐ Reactive ☐ Pressure Releas ☑ Acute Health ☐ Chronic Health		
State Waste Code:		Days on Site: 365	Largest Container: 55
Units: GAL	Max Daily Amt: 770	Avg Daily Amt: 385	Annual Waste Amt:
Storage Container:	Steel Drum	Pressure Storage	
Storage Temperature:	Ambient		

% WT	Hazardous Component	EHS	CAS#
		☐	
		☐	
		☐	
		☐	
		☐	

CDM

Linda
cc: Ray
DCT
Nita
SW

FINAL REPORT
ENVIRONMENTAL COMPLIANCE
AUDIT
T-CHEM PRODUCTS FACILITY
SANTA FE SPRINGS, CA

Camp Dresser & McKee

FINAL REPORT
ENVIRONMENTAL COMPLIANCE AUDIT
T-CHEM PRODUCTS FACILITY
SANTA FE SPRINGS, CA

Prepared for:

Western States Chemical Supply
1122 East Lincoln Avenue, Suite 207
Orange, California 92665

Prepared by:

CAMP DRESSER & McKEE INC.
18881 Von Karman, Suite 650
Irvine, California 92715

June 23, 1992

(714) 263-9600

TABLE OF CONTENTS

1.0 INTRODUCTION 1
1.1 Scope of Work 1
1.2 Facility Operations 1
1.3 Report Organization 1

2.0 HAZARDOUS MATERIAL MANAGEMENT 2
2.1 Underground Storage Tank (UST) 3
2.2 Waters Bill (AB2185) 4
2.3 La Follette Bill (AB3777) 5
2.4 SARA Title III 7
2.5 Uniform Fire Code 9

3.0 HAZARDOUS WASTE MANAGEMENT 11
3.1 General Requirements 11
3.2 Storage Requirements 13
3.3 SB14 Compliance 14
3.4 Permit by Rule 15

4.0 AIR QUALITY 16
4.1 Emission Sources 17
4.2 Air Toxics Hot Spots Information and Assessment Act (AB2588) 19
4.3 Trip Reduction Program 19

5.0 WATER QUALITY 20
5.1 Discharge of Industrial Waste to Public Sewers 21
5.2 Industrial Stormwater Discharges 23

6.0 WORKER SAFETY 25
6.1 Control of Harmful Exposure to Employees 25
6.2 Hazard Communication 26
6.3 Hazardous Waste Operations and Emergency Response 28
6.4 Injury and Illness Prevention Program (SB198) 30
6.5 Occupational Carcinogens Control Act 31
6.6 OSHA Recordkeeping and Reporting 32
6.7 Asbestos 33

7.0 CONSUMER PROTECTION LAWS 34
7.1 Toxic Substances and Control Act (TSCA) 35
7.2 Safe Drinking Water and Toxic Enforcement Act (Proposition 65) 36

1.0 INTRODUCTION

1.1 Scope of Work

Camp Dresser & McKee (CDM) was contracted by Western States Chemical Company to perform an environmental compliance audit for the T-Chem Products facility located at 9028 Dice Road in Santa Fe Springs, California. The objective of the audit was to determine the state of compliance of the facility with applicable federal, state, and local environmental laws. This report summarizes the applicable regulations, audit findings and recommendations.

CDM conducted the site visit portion of the audit at the T-Chem facility on March 30 and 31, 1992. The audit focused on the following environmental areas: Hazardous Materials Management, Hazardous Waste Management, Air Quality, Water Quality, Worker Safety, and Consumer Protection. Data was obtained during the audit process via review of available records, interviews with applicable agency and on-site personnel, and visual inspection of the facility. This information was then used to assess compliance of the facility with applicable federal, state and local environmental laws.

1.2 Facility Operations

T-Chem Products manufactures and warehouses household cleaning products on an approximately 7.5 acre site. Processes such as product mixing, container fabricating, filling operations, and product packaging are located in the main building. Located north of this building are about 50 above ground storage tanks containing raw materials and materials related to wastewater treatment. Also located on-site (west of the main building) are a drum storage area and an underground storage tank containing diesel fuel. Warehouse operations involving truck staging and loading are performed on the west side of the main building. A section of open space north of the truck staging area is used to store equipment for spare parts and salvage.

1.3 Report Organization

This report presents the applicable environmental regulations to the T-Chem facility, the results of the audit and recommendations to achieve compliance. The report is organized by section for each of the environmental areas audited as follows:

Section 2	Hazardous Materials Management
Section 3	Hazardous Waste Management
Section 4	Air Quality
Section 5	Water Quality
Section 6	Worker Safety
Section 7	Consumer Protection

2.0 HAZARDOUS MATERIAL MANAGEMENT

Description of Law

In 1983, Santa Clara County, California, created and adopted the state's first major hazardous materials handling program known as the Hazardous Materials Storage Ordinance (HMSO). During that same year, several other local jurisdictions voluntarily adopted the HMSO. As a result of the HMSO, several other state laws were created to regulate specific aspects of hazardous material handling.

The Sher and Cortese bills, adopted in 1983, regulate the storage of hazardous materials in underground storage tanks; the Waters bill, adopted in 1985, requires hazardous materials inventory and emergency response planning; the La Follette bill, adopted in 1986, requires risk planning and accident prevention provisions for "Acutely Hazardous Materials;" and aboveground storage tank regulations were developed in 1989. In addition to the state laws, the federal government's Superfund Amendments and Reauthorization Act (SARA) was amended to include the "Emergency Planning and Community Right-to-Know Act of 1986," or Title III. Section 313 of SARA Title III requires that facilities which handle "Extremely Hazardous Substances" submit a "Toxic Chemical Release Inventory Form," or Form R. In addition to aboveground and underground storage requirements, additional requirements are set forth in the Uniform Fire Code.

Agency Responsibility

Form R of SARA Title III is administered by the federal Environmental Protection Agency (EPA). The State of California has the given authority to local agencies to administer the requirements of the state laws mentioned above.

Applicable Programs

The type, quantity, and/or use of materials will determine if one or more of the laws mentioned are applicable to a particular facility. T-Chem uses hazardous materials in quantities which require compliance with the following regulatory programs:

- Underground Storage Tank
- Waters Bill (AB2185)
- La Follette (AB3777)
- SARA Title III
- Uniform Fire Code

Because there are no aboveground storage tanks at T-Chem which contain greater than 10,000 gallons of petroleum, the aboveground storage tank regulatory program does not apply.

2.1 Underground Storage Tank (UST)

The regulation of USTs is intended to protect the waters of the state from unauthorized releases of hazardous substances and is set forth in 23 CCR §§ 2610 through 2714. The regulations govern:

- New UST construction and monitoring standards;
- Existing UST monitoring standards;
- Release Reporting and Initial Abatement Requirements;
- Repair and Upgrade Requirements;
- Closure Requirements
- Permit Application, Quarterly Report, and Trade Secret Requirements.

Implementing Agency

The Los Angeles County Department of Public Works, Waste Management Division implements the UST regulations for the City of Santa Fe Springs.

Applicability

If a facility owns or operates a UST storing a hazardous substance, has had an unauthorized leak from a UST, or has closed or removed a UST, then the facility must comply with the UST regulations. T-Chem owns and operates one 12,000-gallon UST used for diesel fuel and must comply with the UST regulations.

Compliance Requirements

T-Chem must comply with the following UST regulations:

1) USTs installed prior to August 1991 shall implement a monitoring program which includes (§ 2640):

   - Daily visual monitoring, if possible;
   - If visual monitoring is not possible, a quantitative release detection method shall be used and monitoring shall be done monthly.
   - Records of monitoring activities shall be kept.

2) Release reporting and initial abatement requirements include (§ 2650):

   - A full report of an unauthorized release shall be submitted to administrating agency within 5 days of detection.
   - Until cleanup is completed, the owner or operator shall submit quarterly progress reports to the administrating agency.

3) Closure of a UST requires that the owner submit a proposal describing the removal within 30 days prior to closure (§ 2670).

Findings

The UST was installed in 1976. According to facility staff, the tank is of double-walled fiberglass construction. Staff indicated the distribution piping is composed of single-walled suction-type piping of unknown construction. The tank is monitored monthly by ALT (Active Leak Testing) using a quantitative release detection method approved by the City and County of Los Angeles. No non-compliance findings were noted pertaining to UST regulations.

USTs installed on or before January 1, 1984 will be required to be replaced, or upgraded to prevent releases due to corrosion, spills, or overfills by December 22, 1998.

2.2 Waters Bill (AB2185)

Local agencies are required to regulate the storage of hazardous substances by businesses and to prepare a hazardous material release emergency response plan. The requirements of the Waters bill are set forth in California Health and Safety Code §§ 25500-25520.

Implementing Agency

The State Office of Emergency Services has given authorization to local agencies to administer the Waters bill. The administrating agency (AA) for Santa Fe Springs is the City of Santa Fe Springs Fire Department.

Applicability

The reporting threshold of hazardous material for the Waters bill is:

- 55 gallons of a liquid;
- 500 pounds of a solid;
- 200 cubic feet of a compressed gas measured at standard temperature and pressure;
- For radioactives, the quantity for which an emergency plan is required under Federal or State regulations.

Any facility that meets these minimum reporting requirements must file a Business Emergency Plan.

T-Chem handles hazardous materials in excess of the reporting quantities and is subject to requirements of the Waters Bill. These hazardous materials are as follows: (liquids) chlorine bleach, caustic soda, hydrogen peroxide, various forms of ammonia, sulfonic acid,

diethanolamine, ammonium ether sulfate, various forms of isopropyl alcohol, phosphoric acid, sulfuric acid, diesel fuel no. 2, formaldehyde, 2-butoxyethanol, and triethanolamine; (solids) dry chlorinating compound; and (gases) chlorine. According to the Plant Manager formaldehyde has been used at the facility in the past, but its use is being discontinued. Quantities remaining on site will be used and not replaced.

Compliance Requirements

T-Chem must comply with the following:

1) Prepare and submit a Business Emergency Plan which includes (§§ 25504-25505):

- Facility description;
- Hazardous materials inventory;
- Site map;
- Procedures for mitigating actual or threatened releases;
- Employee training and annual refresher courses in safety procedures to follow in response to actual or threatened releases;
- Biannual recertification.

2) Report any release or threatened release of hazardous material (§ 25507).

3) Report quantity changes of or greater than a 100 percent increase, handling of new material, and changes in address, ownership or name, within 30 days (§ 25510).

Findings

T-Chem's January, 1992 submittal of a certified Hazardous Materials Business Emergency Plan to the local AA, the City of Santa Fe Springs Fire Department, fulfilled compliance requirements for Business Emergency Plan requirements.

No non-compliance findings were noted pertaining to Waters Bill (AB2185) regulations.

2.3 La Follette Bill (AB3777)

The La Follette Bill expands the requirements of the Waters Bill to include an additional set of substances called "Acutely Hazardous Materials" or AHMs. The requirements of the La Follette Bill are set forth in Health and Safety Code §§ 25531-25541.

Implementing Agency

The implementing agency for the La Follette Bill is the same as that for the Waters Bill. For Santa Fe Springs, it is the Santa Fe Springs Fire Department.

Applicability

The applicability of the La Follette Bill is dependent on the threshold planning quantity (TPQ) as developed by the EPA under SARA. The TPQ can vary from 1 pound to 10,000 pounds depending on the particular AHM.

The AHMs used and stored at the T-Chem facility and their Threshold Planning Quantities (TPQs) are:

ACUTELY HAZARDOUS MATERIALS (AHMs)		
Chemical Name	**TPQ (pounds)**	**On-site Quantity**
Aqua Ammonia	500	6,000 gal @ 29% concentration
Chlorine	100	360,000 pounds
Formaldehyde	500	220 gal @ 37% concentration
Dodecylbenzene Sulfonic Acid	1,000	18,000 gal @ 97% concentration
Sulfuric Acid	1,000	1,500 gal @ 93% concentration

Hydrogen peroxide (50% solution) is used at T-Chem in large quantities (average daily amount on site - 5,000 gallons). Although hydrogen peroxide is considered to be an AHM with a TPQ of 1,000 pounds, it is directly regulated under the La Follette bill only at concentrations greater than 52%. The quantity of formaldehyde solution stored at T-Chem (220 gallons at 37% concentration by weight) is equivalent to approximately 660 pounds of formaldehyde. The TPQ of formaldehyde is 500 pounds. Because the use of formaldehyde is being discontinued and the total quantity stored is close to the TPQ, it is probably that La Follette Bill compliance for formaldehyde will not be required in the future.

Compliance Requirements

T-Chem is required to comply with:

- Submission of the AHM registration form (§ 25533), and
- The submission of an RMPP if requested by the AA (§ 25534).

Findings

T-Chem has submitted the required AHM registration forms for the chemicals listed in the table above to the local AA, the City of Santa Fe Springs Fire Department. This documentation is located in the Hazardous Materials Business Emergency Plan.

T-Chem management has not been requested to submit a Risk Management and Prevention Program (RMPP) by the local AA but is in the process of evaluating the requirements of the program.

No non-compliance findings were noted pertaining to La Follette Bill requirements.

2.4 SARA Title III

Title III of SARA creates inventory reporting requirements to give agencies and the public information about the types and quantities of hazardous materials used and stored at facilities. It also requires agencies to prepare emergency response plans for the release of extremely hazardous substances (EHSs). There are three sets of requirements under SARA Title III which must be satisfied by facilities which use hazardous materials:

- Chemical inventory reporting (Section 311 and 312)
- Annual toxic chemical releases (Section 313); and
- Reporting of leaks and spills (Section 304)

Implementing Agency

Implementation of SARA Title III requirements with the exception of Section 313 are coordinated on a statewide basis by the Office of Emergency Services (OES). Local Administering Agencies (AAs) implement the program, however. In Santa Fe Springs, the AA is the City of Santa Fe Springs Fire Department. For Section 313, the implementing agencies are the federal and California EPA.

Applicability

Facilities which annually use 10,000 pounds or greater of a material requiring an MSDS under OSHA or greater than 500 pounds or the federal TPQ of an EHS must comply with the requirements of Sections 311 and 312. As of January 1, 1989, Waters Bill reporting requirements should satisfy these requirements in California. As a facility using hazardous materials in quantities greater than these thresholds, T-Chem is subject to the reporting requirements of Sections 311 and 312.

Facilities which employ greater than 10 people, are classified as SIC code numbers 20 through 39 and annually use greater than 10,000 pounds or manufacture or process greater than 25,000 pounds of an EHS must comply with Section 313 of Title III. T-Chem is

subject to Section 313 of SARA Title III regulatory status due to the following: SIC Code of 2841, greater than ten full-time employees, and the exceedance of the reporting threshold standards listed above.

Facilities which release hazardous materials or AHMs in amounts greater than the reportable quantities determined by the EPA are subject to the reporting requirements of Section 304 under Title III. Because T-Chem uses hazardous materials and has the potential to release, the facility is subject to Section 304 requirements.

Compliance Requirements

T-Chem must comply with the following:

1) Submit a hazardous material list to the local fire department which lists the hazardous materials stored on site according to the following categories: (Section 311)

- acute health hazard
- chronic health hazard
- fire hazard
- reactivity hazard
- sudden release of pressure hazard

The list must be revised within three months if chemicals which are used on site become subject to the applicability requirements.

2) Submit a report of the annual handling of hazardous materials for the previous year by March 1 of each year. (Section 312)

3) Submit Form R to the federal and state EPA by July 1 of each year (SARA sec. 313)

4) Provide a written notice of releases of hazardous materials above the reporting quantity to the fire department and the State Warning Center which includes: (Section 304)

- chemical name of substances
- whether the material was an EHS
- quantity released
- time and duration of release
- media to which the release occurred
- known or expected health effects
- proper precautions to be taken
- contact person for further information

The OES Emergency Release Follow-up Notice Reporting Form must be completed within 30 days of the release and submitted to the AA and to the CEPRC.

Findings

T-Chem provides itemized lists of chemicals used on-site in the business emergency response plan developed to comply with Waters Bill regulations. This reporting satisfies the requirements of Sections 311 and 312.

T-Chem has had minor releases of chlorine which have been below the reportable quantity of ten pounds. Automatic shutdown of processes upon detection of chlorine limit the spill quantities. There have been no other releases of EHS materials at T-Chem. T-Chem is in compliance with Section 304.

T-Chem has submitted a Form R for sulfuric acid and chlorine during 1990 and 1991 respectively. No record of a Form R for aqua ammonia, formaldehyde, and dodecylbenzene sulfonic acid were available for review. According to the plant engineer, T-Chem has not submitted Form R for other compounds. T-Chem must submit Form R for these compounds annually.

2.5 Uniform Fire Code

The Uniform Fire Code (UFC) prevents, controls and mitigates dangerous conditions related to the storage of hazardous materials. Article 80 of the UFC specifically addresses aspects of hazardous material storage, such as labeling, primary and secondary containment, and storage area requirements.

Implementing Agency

The implementing agency is the Hazardous Material Unit of the City of Santa Fe Springs Fire Department.

Applicability

Any facility that stores hazardous materials on site must comply with the regulations of the UFC.

T-Chem owns and operates approximately 50 above ground storage tanks (ASTs) in the tank farm area, some of which contain hazardous materials, and must comply with the hazardous material storage regulations of the UFC. None of the tanks are used to store petroleum products.

Compliance Requirements

T-Chem must comply with the following storage requirements:

1) Label requirements (§ 80.107)

- Identity of the hazardous chemical(s);
- Appropriate hazard warnings;
- Name and address of the manufacturer, importer, or other responsible party.

2) Secondary containment with a volume of 110 percent of the largest container (§ 80.301).

3) Distance from storage to exposures (§ 80.315):

- Exterior storage of hazardous materials shall not be within 20 feet of buildings, property lines, streets, alleys, public ways or exits to a public way.

4) Storage cabinets (§ 79.202):

- Flammable and combustible liquids in quantities exceeding 10 gallons which are used for maintenance purposes should be stored in cabinets constructed according to requirements of the UFC:
- Cabinets shall be conspicuously labeled in red letters on contrasting background, "FLAMMABLE--KEEP FIRE AWAY."
- Doors shall be will fitted, self-closing, and equipped with a latch.
- The bottom of the cabinet shall be liquid tight to a height of at least 2 inches.
- Cabinets shall be constructed of wood or metal approved by the Chief.

Findings

Hazardous materials are stored according to the distance requirements of the UFC. Appropriate flammable materials storage cabinets are provided and properly labeled for materials required under the UFC. Secondary containment should be provided for the formaldehyde drums and hazardous materials in the drum storage area. Several chemical tote bins are not labeled according to UFC regulations.

No non-compliance findings were noted pertaining to ASTs.

3.0 HAZARDOUS WASTE MANAGEMENT

In 1976, the federal government adopted the Resource Conservation and Recovery Act (RCRA) in order to control the generation, transportation, treatment, storage and disposal of hazardous waste. RCRA allows individual states to develop their own program for the regulation of hazardous waste as long as it is at least as stringent as RCRA. The state of California has developed the California Hazardous Waste Control Law (HWCL) which is modeled closely after RCRA.Currently, the federal EPA has granted tentative authorization to California and therefore hazardous waste facilities must comply with both federal and state hazardous waste management laws until final authorization is granted.

Agency Responsibility

In an agreement between the federal EPA and the State Department of Health Services (DHS), the EPA recognizes DHS's authority to enforce the requirements of the HWCL in California. Since this agreement, the DHS was transferred to the California EPA and redesignated the Department of Toxic Substance Control (DTSC). The DTSC has delegated some elements of the HWCL to local health departments.

Applicable Programs

The requirements of the HWCL applicable to T-Chem pertain to hazardous waste generation activities and possibly treatment activities where wastewater generated by T-Chem is hazardous. These activities must comply with general requirements, the Uniform Fire Code, SB14, and Permit by Rule.

3.1 General Requirements

Hazardous waste generators must satisfy certain basic requirements such as record keeping and registration, in order to comply with the HWCL. The HWCL is set forth in 22 CCR §§ 66260-66272.

Implementing Agency

The implementing agency for generator requirements of the HWCL is the DTSC.

Applicability

Any facility that generates an RCRA hazardous waste and/or a California non-RCRA hazardous waste must comply with HWCL generator requirements.

T-Chem generates hazardous waste which is regulated under California HWCL. Annual hazardous waste quantities are small - usually several drums. Typical sources of T-Chem hazardous waste include waste oil, antifreeze, and parts washing solvent. Occasional

hazardous waste sources have included paint wastes and clean up materials from a truck parking lot spill of diesel fuel.

Compliance Requirements

T-Chem must comply with the following hazardous waste generator requirements:

1) The generator must file a hazardous waste notification statement with the DTSC (22 CCR § 66262.12);

2) The generator must have an EPA identification number (22 CCR § 66262.12);

3) The generator must keep copies of hazardous waste manifests for three years (22 CCR § 66262.40);

4) The generator must keep copies of hazardous profiles for three years (22 CCR § 66262.40);

5) The generator must submit a biennial report to DTSC and keep the reports on file for three years (22 CCR § 66262.41);

Findings

The facility has filed a hazardous waste notification statement with the DTSC and has been issued federal and state generator numbers (CAL 0000 28326 and 99906 respectively). Records (the last three years of manifests and waste profiles) are kept on file at T-Chem.

T-Chem properly maintains hazardous waste profiles. T-Chem has not submitted biennial reports to the DTSC. These reports are due by March 1 of each even-numbered year. A copy of the biennial report must be retained for three years from its filing due date. Requirements of the biennial report include:

1) The generator's name, address, and EPA identification number.
2) The calendar year covered by the report.
3) The name, address, and EPA identification number of each off-site hazardous waste facility to which waste was shipped during the year.
4) The name and EPA identification number of each transporter used during the year.
5) A description of each hazardous waste shipped off-site.
6) A description of efforts to reduce volume and toxicity of wastes.
7) A description of changes in the volume and toxicity of waste compared to the previous year.
8) Certification signed by the generator or designated person.

Weekly inspections of hazardous waste containers are not currently performed. The results of these weekly inspections must be recorded in an inspection log or summary.

3.2 Storage Requirements

The storage of hazardous waste is regulated by the Uniform Fire Code and by a set of regulations which pertain specifically to hazardous waste storage. These regulations are set forth in 22 CCR § 66262 and 22 CCR § 66265.

Implementing Agencies

The implementing agency for the Uniform Fire Code is the local fire department and the DTSC implements the HWCL regulations related to storage.

Applicability

Any facility that stores hazardous waste on site must comply with the storage requirements.

Hazardous waste (waste oil) is accumulated on-site in a drum. There was no other waste being stored on-site at the time of the audit.

Compliance Requirements

T-Chem must comply with the following storage requirements:

1) Labeling requirements:

   - Generator's ID number
   - Waste type
   - Waste hazard
   - Beginning accumulation date

2) Weekly hazardous waste container inspections (22 CCR § 66262.34)

3) Keep containers covered during storage and transfer (22 CCR § 66262.34)

4) Wastes may not be stored on-site for longer than 90 days unless satellite generation requirements are followed (22CFR § 66262.34),

5) Secondary containment with a volume of 110 percent of the largest container (§ 80.301)

6) Distance from storage to exposures (§ 80.315):

- Exterior storage of hazardous materials shall not be within 20 feet of buildings, property lines, streets, alleys, public ways, or exits or a public way.

Findings

Labeling of hazardous waste containers was found to be deficient in two areas. The EPA generator number and the accumulation date were not indicated on the label. The accumulation date is the date when the first aliquot of waste is introduced to the container. From this point the generator has 90 days to accumulate and properly manifest the hazardous waste out for disposal.

Weekly inspections of hazardous waste containers are not currently performed. The results of these weekly inspections must be recorded in an inspection log or summary.

Secondary containment is not provided for the waste oil drum. Secondary containment for the drum must be provided.

3.3 SB14 Compliance

California Hazardous Waste Source Reduction and Management Review Act of 1989 (SB14) requires that hazardous waste generators implement the following hierarchy of waste minimization:

- Reduction of hazardous waste
- Recycling of hazardous waste
- Treatment of hazardous waste
- Disposal

The requirements of SB14 are set forth in Health and Safety Code 25244.12.

Implementing Agency

The implementing agency is the DTSC.

Applicability

Facilities that generate greater than 12,000 kilograms of hazardous waste or 12 kilograms of extremely hazardous waste must comply with SB14. Disposal records indicate that T-Chem disposed of approximately 65 gallons of hazardous waste (waste oil) and no quantities of extremely hazardous waste in 1990. T-Chem therefore is not required to comply with SB14 regulations.

3.4 Permit by Rule

To facilitate the permitting process for facilities that treat certain non RCRA hazardous wastes by certain processes on site, the DTSC has developed the Permit by Rule program. This avoids requiring generators who treat hazardous waste related to wastewater to obtain the more complex and expensive hazardous waste facility permit. The requirements for Permit by Rule are set forth in 22 CCR § 67450.2.

Implementing Agency

The implementing agency is the DTSC.

Applicability

The Permit by Rule is limited to hazardous waste treatment for:

- facilities that are not required to obtain federal RCRA permits for treatment;
- a limited set of waste streams and treatment system;
- the waste must be treated on site;
- the waste cannot be reactive or extremely hazardous;
- the treatment must be done in tanks or containers;
- air discharges must be kept in compliance with all regulations;
- waste must be treated only for specific contaminants.

T-Chem's current wastewater treatment system utilizes a pH neutralization process to adjust the properties of the waste to meet sanitary sewer disposal permit conditions. The characteristics of the waste fall under Permit by Rule regulation. The new wastewater treatment system would treat flows from essentially the same sources (i.e. the characteristics of the waste would be similar).

Compliance Requirements

T-Chem must comply with the following requirements:

1) Maintain on-site compliance documentation (22 CCR § 67450.3):

- waste analysis plan
- written inspection schedule
- training documents
- contingency plan
- closure plan
- environmental enforcement history disclosure statements
- tank and container certifications
- PBR permit documentation

2) Facility Specific Notification and Unit Specific Notification to the DTSC 60 days prior to first treatment (22 CCR § 67450.2) or by August 1, 1992

3) Post a public notice within 7 days prior to item 2 (22 CCR § 66450) by October 1, 1992

4) Evaluate the potential for past releases at the site (22 CCR § 67450.7)

5) Submit a Certification of Financial Responsibility for PBR operations by October 1, 1992 (22 CCR § 67450.13)

6) Prepare and submit a Facility Specific Notification annually by March 1 (22 CCR § 67450.3)

Findings

The modifications to the T-Chem wastewater treatment process will result in a semi-closed system where most wastewater is recycled. Because some wastewater will be discharged, characterization of the raw waste stream will need to be performed to determine if the wastewater discharged is hazardous waste. Characteristics of the existing waste stream indicate the Permit by Rule regulations would most likely apply. Compliance with the above listed requirements would then be necessary.

4.0 AIR QUALITY

The federal government first enacted air quality legislation in 1955 and expanded it with the Clean Air Act (CAA) of 1970. Since 1970, the CAA was amended and expanded in 1977 and 1990. Typically the air quality measures in California are more stringent than federal measures, and therefore take precedence. The Mulford-Carrell Air Resources Act was enacted in 1967 in California to provide comprehensive air pollution control. This legislation was repealed in 1975, but replaced with similar statutory provisions. The California Clean Air Act was then enacted in 1988 to strengthen the state program. California's CAA is set forth in Health and Safety Code 39000.

Implementing Agency

The air quality regulations are implemented by the California Air Resources Board, and local Air Pollution Control Districts (APCD) and regional Air Quality Management Districts (AQMD).

Applicable Programs

Any facility which builds, erects, alters, replaces, operates, or uses a source of air emissions must comply with state and local air quality regulations. These include general requirements for emission sources, the Air Toxics Hot Spot Act Program, and the Indirect Source Control Program.

4.1 Emission Sources

Permits must be obtained by facilities that build, erect, install, alter, or replace any equipment that may emit air contaminants or reduce or control the emission of air contaminants. Permit requirements are set forth in SCAQMD's Regulation II.

Implementing Agency

The implementing agency for Santa Fe Springs Park is the South Coast Air Quality Management District (SCAQMD).

Applicability

Facilities which emit or control air contaminants are subject to Regulation II. T-Chem operates and maintains fourteen separate processes, tanks, and boiler units which require air permits.

Compliance Requirements

T-Chem shall comply with the following:

1) Obtain Permit to Construct if any changes are planned in processes that would alter (increase or decrease) air emissions. The Permit to Construct remains in effect until the permit to operate is issued. (Rule 201)

2) Obtain a permit to operate for any equipment that may emit or reduce air contaminants. (Rule 203)

3) The permit to operate shall be posted within 8 meters (26 feet) of the equipment. (Rule 206)

Findings

The table below lists the permit number, permitted item and permit application number.

T-CHEM AIR PERMITS		
Permit Number	**Permitted Item**	**Application Number**
M52662	Fabric Softener Mfg System	145160
D01111	Detergents and Cleaning Cmpds Drying Baghouse	151031
D24739	Boiler	212171
M12608	Inorganic Chemical Storage Tank	C11243
M12610	Inorganic Chemical Storage Tank	C11245
M12612	Inorganic Chemical Storage Tank	C11247
M12614	Inorganic Chemical Storage Tank Absorber	C11249
M20188	Bleach Packaging	C15662
M18151	Soda Ash Storage Tank	C22910
M15044	Inorganic Chemical Storage Tank	C22911
M18120	Inorganic Chemical Storage Tank	C22912
M19629	Scrubber	C22914
M19776	Inorganic Chemical Storage Tank Absorber	C35397
M38130	Detergents and Cleaning Cmpds Blending	C37309

Existing air permits at T-Chem were found to be current and displayed properly. T-Chem's current wastewater treatment system is currently regulated under an air permit. Modifications in the wastewater system will most likely require securing an additional air permit(s).

4.2 Air Toxics Hot Spots Information and Assessment Act (AB2588)

AB2588 was implemented in order to determine the concentration and localization of air toxics that may expose individuals to adverse health effects. AB2588 is set forth in Health and Safety Code § 44301.

Implementing Agency

The implementing agency for Santa Fe Springs is the South Coast Air Quality Management District (SCAQMD).

Applicability

A facility that manufactures, formulates, uses or releases any substance listed by the Air Resources Board must comply. T-Chem uses the following chemicals on-site which are listed by the Air Resources Board as Toxic Air Contaminants: ammonia, caustic soda (sodium hydroxide), chlorine, and formaldehyde. T-Chem is therefore subject to Air Toxics Hot Spots Information and Assessment Act regulations.

Compliance Requirements

T-Chem must comply with the following requirements:

1) Prepare and submit a comprehensive emissions inventory plan if requested by the implementing agency. (Health and Safety Code 44340)

Findings

T-Chem has not received notification from the SCAQMD requesting comprehensive emissions inventory plans for ammonia, caustic soda (sodium hydroxide), chlorine, and formaldehyde. T-Chem is in compliance with AB2588 regulations at this time.

4.3 Indirect Source Control

The Trip Reduction Program was designed to reduce the number of automobiles on the highways and streets during peak traffic hours. The requirements are set forth in SCAQMD's Regulation XV.

Implementing Agency

The implementing agency for Santa Fe Springs is the South Coast Air Quality Management District (SCAQMD).

Applicability

Employers that employ 100 or more employees must prepare a Trip Reduction Plan. T-Chem employs over the trigger amount of employees (100) and must comply.

Compliance Requirements

T-Chem must comply with the following requirements:

1) Prepare and submit a Trip Reduction Plan which includes (Rule 1503):

- the name of the transportation coordinator;
- an inventory of current measures intended to increase the Average Vehicle Ridership (AVR);
- the existing AVR;
- employee survey;
- list of employee incentives;
- zip code list of employee residences;
- list of public transit services;
- list of the percentage of employees by job category;
- management commitment cover letter signed by the highest-ranking official on site;
- general description of business.

Findings

T-Chem has not submitted a Trip Reduction Plan. T-Chem management is aware of the SCAQMD Trip Reduction Plan requirements and is in the process of preparing a plan.

5.0 WATER QUALITY

The federal Clean Water Act (CWA) provides the basic national framework regulating discharge of pollutants in the navigable waters. In the state of California, the Porter-Cologne Water Quality Act (the Porter-Cologne Act) protects ground water as well as navigable waters. Together, the CWA and the Porter-Cologne Act are the principal environmental laws protecting the waters of California. Local municipalities establish regulations in order to comply with state and federal laws, and to provide for maximum public benefit from use of their facilities.

Agency Responsibility

California has the authorization from the EPA to implement the requirements of the CWA under the Porter-Cologne Act. The State Water Resources Control Board (SWRCB) delegates implementation to the nine Regional Water Quality Control Boards (RWQCB), and the local municipalities.

Applicable Programs

The CWA and the Porter-Cologne Act are applicable to facilities that discharge pollutants, either directly or indirectly, to navigable waters and ground water.

The CWA established the National Pollution Discharge Elimination System (NPDES) permitting program. The Porter-Cologne Act established the Waste Discharge Requirement (WDR) permitting program. Local regulations typically establish an Industrial Discharge Permit program. The purpose of these permit programs is to establish the level of performance that the discharger must maintain as well as conditions for monitoring, inspection, reporting, and compliance schedules.

Discharge of pollutants typically falls into one of three categories:

- direct discharge to surface or ground water;
- discharge to municipal treatment facilities; or
- discharge to storm water systems.

Since T-Chem does not directly discharge any wastewater to receiving waters, the permit requirements for direct discharge to surface and ground waters under the NPDES and WDR programs are not applicable to this facility. Discharge requirements for municipal treatment facilities and storm water systems are described below.

5.1 Discharge of Industrial Waste to Public Sewers

Discharges of treated wastewater from Publicly Owned Treatment Works (POTWs) to surface water or ground water require NPDES/WDR permits. These permits restrict the quantity and quality of POTW discharges. To meet these permit requirements, individual POTWs place restrictions on industrial users subject to selective federal, state, and regional oversight.

The Sanitation Districts of Los Angeles County, California (Districts), enacted an ordinance which established wastewater discharge regulations. The Ordinance contains four Parts which include details on general requirements, permit requirements, reporting requirements, and enforcement provisions. The Ordinance's goals are to ensure compliance of the Districts' facilities with various regulatory agencies and NPDES requirements. The Ordinance also enforces Federal Categorical Pretreatment Standards for the industrial users.

Implementing Agencies

The Sanitation Districts of Los Angeles County are composed of twenty-seven individual sanitation districts, with each district responsible for enforcing the wastewater discharge regulations for its area. The implementing district for the T-Chem facility is District No. 18.

Applicability

Facilities which discharge wastewater to POTWs must comply with the Districts' requirements. Since T-Chem discharges wastewater to the District No. 18 facilities, it is subject to the Districts' Ordinance requirements.

Compliance Requirements

T-Chem must comply with the following requirements:

1) The following restrictions on wastewater discharge must be met:

- No person shall discharge wastewater in excess of the permitted mass emission rates or local discharge limits for specific pollutants as required by the Districts' Ordinance Part IV, Section 406.
- No person shall discharge wastewater having a pH less than 6.0 or having any corrosive or detrimental characteristics which can cause injury to the Districts' facilities, structures, equipment, or wastewater treatment and maintenance personnel as required by the Districts' Ordinance Part IV, Section 406(C).
- No person shall discharge wastewater containing high pH material which causes adverse effects to the sewerage system as required by the Districts' Ordinance Part IV, Section 406(O).
- No person shall discharge wastewater containing excessive flow or other materials, including (but not limited to) ammonia, priority pollutants, suspended solids, detergents, surface active agents, oil and grease released in a discharge at a flow rate or concentration which will cause problems, pass through, or interference with the sewerage facilities as required by the Districts' Ordinance Part IV, Sections 406(A-FF).

2) All users of the District facilities shall provide spill containment for protection against discharge of prohibited materials or other wastes as required by the Districts' Ordinance Part IV, Section 412.

3) Reporting in accordance with the following is required:

- All users are required to make available for inspection and copying by the District all notices, self-monitoring reports, and records as required by the Districts' Ordinance Part IV, Section 414(C).
- The discharger is required to notify the District if the discharge will exceed or has exceeded permit and/or local discharge limits as specified in the Districts' Ordinance Part IV, Section 406.

- Dischargers must submit monitoring reports and other documents required by the District on a timely basis as specified in the Districts' Ordinance Part IV, Section 414(A).

- The discharger must notify the Districts, EPA, and the Hazardous Waste Authorities in writing within 180 days of any discharge into the POTW of a substance, which, if otherwise disposed of, would be a hazardous waste under 40 CFR Part 261. This notification requirement is specific in 40 CFR Part 403.12. If no hazardous waste is discharged, the report must still be completed and filed with the Districts at such times specified by the Chief Engineer as required in the Districts' Ordinance Part IV, Section 414(B).

Findings

T-Chem's wastewater flows undergo on-site pre-treatment before discharge to the public sanitary sewer system. The treated wastewater is held on-site and then discharged to the Los Coyotes Water Reclamation Plant during the low flow hours of 10 pm to 5 am. The facility has installed an automatic sampler to collect effluent from the wastewater clarifier before discharge to the sanitary sewer. The pH of the effluent is also monitored near this point with results recorded in strip chart form. T-Chem's wastewater fees are based on total suspended solids (TSS) and chemical oxygen demand (COD) loadings to the sanitary sewer system.

T-Chem is converting its present wastewater treatment system to a semi-closed recycling system which will result in greatly decreased discharges of industrial waste to the sanitary sewer system. Improvements in the wastewater treatment system will provide for removal of suspended solids thereby reducing the billable discharges of TSS and COD to the sanitary sewer. Upon completion of the wastewater treatment system modifications, T-Chem's discharges will consist of reduced volumes of non-softened water flows which can not be recycled due to incompatibility with T-Chem processes and equipment.

T-Chem currently collects and recycles the rinse water from the filling lines. This is a good management practice which cuts down on waste volume.

T-Chem is currently in compliance with the provisions of its wastewater discharge permit and the reporting conditions listed above. Change in ownership of the facility will require seeking a new discharge permit. Existing waste discharge permits are not transferable.

5.2 Industrial Stormwater Discharges

Amendments to the Clean Water Act require that any stormwater discharge related to manufacturing, processing, or storage, at certain categories of SIC code industrial facilities, must be permitted. California has implemented a General Permit for Industries which must be permitted under this program. Facilities must have filed a (NOI) and follow the provisions of the general permit if they are to be covered under this program.

Implementing Agency

The EPA published the regulations for the stormwater permitted program and have authorized certain states to implement their own program. California is an authorized state and the State Water Resources Control Board (SWRCB) is the agency responsible for NOI submittals. Regional Water Quality Control Boards will be implementing the requirements of the general permit. For Santa Fe Springs, the RWQCB is the Los Angeles RWQCB.

Applicability

"Hard code" facilities require permits whether industrial materials are exposed to rainfall or not. "Soft code" facilities only require a permit if industrial materials are exposed to rainfall, however. The T-Chem SIC code is 2841. Industrial facilities falling under this classification are required to submit an NOI and implement the programs called for under the General Permit.

Compliance Requirements

T-Chem must comply with the following requirements:

1) File an NOI by March 31, 1992,

2) Eliminate non-storm water discharges, including illicit connections, to the storm water system,

3) Develop and implement a storm water pollution prevention plan (SWPPP) by October 1, 1992,

4) Perform monitoring of discharges to storm water systems starting October 1, 1992. *As of June 23, 1992 the SWRCB is considering eliminating the monitoring requirements.*

Findings

The facility has submitted an NOI to the SWRCB. The proximity of the drum storage area to storm drains would be among the logical runoff/spill liabilities to address in an SWPPP. The SWPPP has not yet been developed but is not required until October 1, 1992. T-Chem is in compliance with the General Permit at this time.

6.0 WORKER SAFETY

The federal Occupational Safety and Health Act (OSHA) established laws to identify and address workplace hazards, train workers in safe practices and the use of worker safety equipment, and to inform workers of the risks inherent in their workplaces (29 USC §§ 651-678). In California, Federal OSHA requirements are implemented along with the provisions of the California Occupational Safety and Health Act (Cal OSHA) (Labor Code §§ 6300-6711).

Agency Responsibility

The State Department of Industrial Relations Division of Occupational Safety and Health (Cal OSHA) is authorized to enforce federal as well as state worker safety laws.

Applicable Programs

The Federal OSHA and Cal OSHA regulations are applicable to all employers, including facilities that manufacture, process, store or use hazardous substances on site or in the workplace. Compliance with the federal and Cal OSHA regulations for the following areas of worker safety are required:

- Control of harmful exposure to employees;
- Hazard communication;
- Hazardous waste operations and emergency response;
- Injury and Illness Prevention Program (SB198)
- Occupational Carcinogens Control Act
- Asbestos Notification
- Record keeping and reporting of occupational injuries and illnesses.

6.1 Control of Harmful Exposure to Employees

Employee exposure to hazardous chemical and physical agents are regulated by General Industry Safety Order (GISO) Sections 5095-5223. These sections include regulations on control of exposure, exposure monitoring, and respiratory protective equipment. GISO Sections 3380-3400 provide regulations for personal protective equipment.

Implementing Agency

Cal/OSHA is the implementing agency for these regulations.

Applicability

These regulations are applicable to the T-Chem because employees are exposed to chemical and physical hazards in the workplace.

Compliance Requirements

The T-Chem must comply with the following requirements:

1) Employers must evaluate their operations and determine if employees may be potentially exposed to airborne contaminants in excess of permissible exposure limits required by GISO Section 5155(C)(1)(A). If exposure may exceed PELs, the employer shall monitor the work environment in order to measure the exposure levels as required by GISO Section 5155(e).

2) If engineering controls, such as mechanical ventilation systems, are used to control work exposure, they must be monitored and tested according to requirements in GISO Section 5143 and/or requirements in regulations for specific hazardous substances in GISO Sections 5195-5220.

3) If workers are required to wear protective equipment in their work place, employers must provide the equipment, ensure that it meets OSHA standards, and provide training on use and care of the equipment as required by GISO Sections 3380-3400.

4) If respirators are used in the workplace to reduce exposure level and/or in emergency response, employers are required to establish a formal, written respirator training program which includes fit testing as required by GISO Section 5144.

5) Plumbed or self-contained emergency eyewash and shower equipment shall be provided at all work areas where, during routine operations or foreseeable emergencies, the eyes of an employee may come into contact with a substance which can cause damage to the eyes. Personal eyewash units (kits) may support plumbed or self-contained unit but shall not be used in lieu of them as required by GISO Section 5162.

Findings

T-Chem employees utilize protective equipment including respirators when handling formaldehyde solution. Employees are trained in the use of respirators under a written program with training conducted through a contracted vendor. Eye wash stations are located in applicable work areas. The use of formaldehyde is being discontinued at the facility.

T-Chem's operations are in compliance with General Industry Safety Order (GISO) Sections 5095-5223.

6.2 Hazard Communication

The Federal Hazard Communication Standard (CFR 29 Section 1910.1200) and California Hazardous Substances Information and Training Act Hazard Communications Standard

(GISO Section 5194) require that all employers using hazardous chemicals must inform employees of the existence of hazardous substances in the work place and risks from exposure to these chemicals.

Implementing Agency

Cal/OSHA is the enforcing agency for both the federal and state Hazard Communication Standards.

Applicability

Because the T-Chem uses hazardous chemicals, the Hazard Communication Standards are applicable.

Compliance Requirements

T-Chem must comply with the following requirements:

1) Employers shall have an MSDS for each hazardous substance which they use as required by GISO Section 5194(g).

2) Employers shall ensure that each container of hazardous substances in the work place is labeled, tagged, or marked with the identity of the hazardous substances contained therein, and appropriate hazard warnings as required by GISO Section 5194(f).

3) Employers shall provide employees with information and training on hazardous substances in their work area at the time of their initial assignment, and whenever a new hazard is introduced into their work area. The training shall include details of the hazard communication program developed by the employer, including an explanation of the labeling system and MSDSs and how employees can obtain and use the appropriate hazard information. These training requirements are specified in GISO Section 5194(h).

4) Employers shall develop and implement a written hazard communication program which at least describes how the criteria for labels and other forms of warning, MSDSs, and employee information and training will be met. The written program should also include a list of the hazardous substances known to be present in the work place, the methods the employer will use to inform employees of the hazards of non-routine tasks and hazards associated with substances contained in unlabeled pipes in their work areas, and methods employers will use for communications with and obtaining information from contractors. These requirements are specified in GISO Section 5194(e).

Findings

T-Chem maintains complete and up to date MSDSs for each hazardous substance used. Copies of the MSDSs are compiled in binders and located in the office area and each area where chemicals are used.

Generally, hazardous substance containers were labeled properly. The exceptions to this were the absence of labels from several chemical tote bins and an unlabeled drum near the fuel station.

T-Chem provides training to employees which meets the criteria of Hazard Communication Program training. However, the training is not documented as required. Also, T-Chem has no written Hazard Communication Program. T-Chem must develop and implement a written Hazard Communication Program meeting the criteria described above.

6.3 Hazardous Waste Operations and Emergency Response

Title III of the Superfund Amendments and Reauthorization Act (SARA) required OSHA and EPA to issue worker safety regulations covering routine hazardous waste management operations and emergency response involving hazardous materials (CFR 1910.120). The worker safety and training regulations cover three categories:

- contaminated site clean-up;
- routine hazardous waste handling and emergency responses to TSD facilities;
- emergency response actions to hazardous substance or waste spills at facilities not covered by the above two categories.

Cal/OSHA regulations require employers with more than 10 employees to develop and implement a written Emergency Action Plan (GISO Section 3220) and a written Fire Prevention Plan (GISO Section 3221). Employers with 10 or fewer employees need not maintain written plans, but the plans must be communicated orally.

Implementing Agency

Cal/OSHA is the enforcing agency for these regulations.

Applicability

The Cal/OSHA regulations for written Emergency Action and Fire Prevention Plans are applicable to the T-Chem because there are greater than 10 employees at this facility.

Compliance Requirements

T-Chem must comply with the following requirements;

1) Employers shall develop and implement a written Emergency Action Plan which includes:

   - procedures for emergency escape, accounting for all employees after evacuation has been completed, and rescue and medical duties for those employees who are to perform them.

   - An employee alarm system and the types of evacuation to used in emergency situations.

   - Designation and training of a sufficient number of persons to assist in the safe and orderly emergency evacuation of employees.

2) Employers shall develop and implement a written Fire Prevention Plan which includes:

   - Potential fire hazards and their proper handling and storage procedures, potential ignition sources and their control procedures, and the type of fire protection equipment or systems which can control a fire. The plan shall include names or job titles of those responsible for the maintenance of equipment and systems installed to prevent or control fires.

   - Training of each employee upon initial assignment for those parts of the Fire Prevention Plan which the employee must know to protect the employee in the event of an emergency. (GISO Section 3221(d))

   - Regular and proper maintenance equipment and systems installed in the work place to prevent accidental ignition of combustible materials.

Findings

T-Chem has developed and implemented a written Emergency Action Plan satisfying the above conditions. Elements of the plan are located in the Hazardous Materials Business Emergency Plan and are specific to situations involving hazardous materials. T-Chem utilizes chlorine gas detectors in the rail car and tank farm areas. These detectors will shut down process operations if chlorine is detected at levels equal to or greater than three parts per million.

T-Chem contracts with an outside vendor to maintain and service its fire suppression equipment. The T-Chem hazardous materials response team typically trains with the local

fire/hazardous materials response agency, the City of Santa Fe Springs Fire Department. Through these training sessions the T-Chem response team has acquired a significant amount of general fire prevention/suppression and emergency response training. T-Chem does not have a written Fire Prevention Plan which addresses the criteria listed above.

T-Chem must prepare a written Fire Prevention Plan.

6.4 Injury and Illness Prevention Program (SB198)

California established the Injury and Illness Prevention Program (GISO Section 3203) to ensure that all employees have a safe and healthy work place. The six major elements of the written program are:

- designation of responsible individuals;
- identification of work place hazards and investigation of injuries and illnesses;
- periodic inspections;
- correction of safety related deficiencies;
- training program for employees
- system for communication with employees on safety matters.

Implementing Agency

Cal/OSHA is the enforcing agency for the Injury and Illness Prevention Program.

Applicability

The Injury and Illness Prevention Program is applicable to all employers in the state of California.

Compliance Requirements

T-Chem must comply with the following requirements:

1) Every employer shall establish a written injury and illness prevention program as required under GISO Section 3203 which includes:

   - the person or persons with authority and responsibility for implementing the program. (GISO Section 3203(a)(1))

   - a system for identifying and evaluating hazards in the work place and investigation of injuries and illnesses. (GISO Section 3203(a)(4))

   - documented scheduled periodic inspections to identify unsafe conditions and work practices. (GISO Section 3203(a)(4)(A)-(c),(b)(1))

- methods and procedures for timely correction of unsafe conditions. (GISO Section 3203(a)(6))

- a system for communicating with employees on safety matters. (GISO Section 3203(a)(3))

- provide documented training and instruction for health and safety. (GISO Section 3203(a)(7),(b)(2))

Findings

T-Chem has developed and implemented an Injury and Illness Prevention Program. Adequately addressed sections of the existing program include: 1) identification of work place hazards and investigation of injuries and illnesses; 2) correction of safety related deficiencies; 3) training program for employees; and 4) system for communication with employees on safety matters.

T-Chem's existing written program is lacking the following sections: 1) designation of individuals responsible for the implementation and maintenance of the program; and 2) performance and documentation of periodic inspections. T-Chem's written Injury and Illness Prevention Program must include these elements.

6.5 Occupational Carcinogens Control Act

California established the Occupational Carcinogens Control Act (OCCA Labor Code Section 4034) to provide special regulations for worker protection from carcinogens in the workplace. These regulations address exposure and monitoring, specific engineering controls, and training programs to ensure worker safety (GISO Section 5200-5220)

Implementing Agency

Cal/OSHA is the implementing agency for the OCCA.

Applicability

The OCCA is applicable to all facilities where carcinogens are used. Because formaldehyde is a specially regulated carcinogen and is being stored at the facility, T-Chem must comply with these regulations. Once all of the formaldehyde is used, compliance with OCCA will no longer be necessary

Compliance Requirements

T-Chem must comply with the following requirements:

1) Employers must evaluate job tasks in which formaldehyde is used to determine if employees are exposed at or above the action level. (GISO Section 5217[d])

2) The employer must document either by using objective data or by conducting exposure monitoring that the presence of formaldehyde in the work place would not result in employee exposure at or above the action level. (GISO Section 5217[d])

3) The employer shall conduct initial exposure monitoring for employees potentially exposed at or above the action level. (GISO Section 5217[d][2])

4) The employer shall conduct periodic monitoring to measure and accurately determine exposure to formaldehyde for employees shown by the initial monitoring to be exposed at or above the action level. (GISO Section 5217[3])

Findings

Certain T-Chem employees use formaldehyde while performing tasks. Workers utilize the following personal protective equipment: 1) chemically resistant gloves and 2) full face respirators (or half face with goggles) with acid gas and organic vapor cartridges. There have been no accidental releases of formaldehyde.

T-Chem has not evaluated job tasks to determine if employees are exposed at or above formaldehyde action levels. There has been no documentation to determine if formaldehyde usage in the workplace would not result in employee exposure at or above the action level. T-Chem must evaluate these job tasks and determine if workplace conditions would result in exposure at or above formaldehyde action levels.

T-Chem has not performed initial or periodic exposure monitoring of employees potentially exposed at or above the action level. This monitoring must be performed if the findings of job task or workplace monitoring indicate that employees may be exposed at or above formaldehyde action levels.

6.6 OSHA Recordkeeping and Reporting

OSHA requires employers to maintain records and reports associated with occupational injuries, illnesses, and fatalities. Annual summaries of industrial accidents must be submitted to OSHA and posted in the workplace. Records of employee exposure to toxic materials or harmful physical agents must be maintained. Employee health monitoring records must be maintained and made available for employee protection. (Title 8, CCR Section 14000-14400)

Implementing Agency

Cal/OSHA is the enforcing agency for recordkeeping and reporting requirements.

Applicability

All employers are required to comply with OSHA recordkeeping and reporting requirements.

Compliance Requirements

T-Chem must comply with the following requirements:

1) All employers must complete the Employer's First Report of Occupational Injury or Illness as required by CCR Section 14001.

2) All employers are required to establish and maintain a log of all recordable occupational injuries and illnesses. Employers can use Cal/OSHA Form No. 200 or equivalent for this purpose. (CCR Section 14301)

3) All employers shall submit an annual summary of occupational injuries and illnesses to Cal/OSHA. (CCR Section 14305(a))

4) All employers shall post a copy of the annual summary in the workplace where notices to employees are customarily posted. (CCR Section 14305(d)(1))

5) All employers shall retain records pertaining to occupational injuries and illness for five years following the end of the year to which they relate. (CCR Section 14307)

Findings

T-Chem has implemented an OSHA record keeping and reporting plan. T-Chem actively documents work-related injuries and illnesses and submits the required reports and summaries to Cal/OSHA. No non-compliance issues were noted.

6.7 Asbestos

The owner of any building constructed prior to 1979 must notify tenants and employees of the locations of any known asbestos or asbestos-containing construction materials on-site.

Implementing Agency

Asbestos notification requirements are implemented by Cal/OSHA.

Applicability

The T-Chem facility was constructed before 1979 and must comply with asbestos notification requirements.

Compliance Requirements

T-Chem must comply with the following requirements:

1) Notify employees of the presence of asbestos including the following: (H & SC Sec 25915[a])

   - Results of asbestos survey
   - Specific locations of asbestos
   - Procedures to prevent disturbance, release and exposure to asbestos
   - Summary of any air monitoring results
   - Potential health risks resulting from exposure.

2) Employees must be notified within 15 days of hire of identification of asbestos, and on an annual basis. (H & SC Sec 25915.2.)

Findings

T-Chem management indicated that an asbestos survey of the facility has been performed with no asbestos found. T-Chem must notify employees of the negative survey results and provide employees with access to asbestos survey documentation.

7.0 CONSUMER PROTECTION LAWS

Consumer protection laws were established to identify and decrease the hazards posed to consumers by chemicals, substances, and products (including drinking water). The Federal Toxic Substances Control Act (TSCA) establishes a system of chemical evaluation in an effort to identify which chemicals may be hazardous, and to begin the process of modification, restriction, or consumer information intended to reduce the hazard. The California Safe Drinking Water and Toxic Enforcement Act (Proposition 65) was enacted to provide consumers with information and a system whereby chemicals identified as cancer causing or reproductively toxic could be monitored.

Agency Responsibility

Implementing agencies for consumer protection laws are the EPA and state or local prosecutors.

Applicable Programs

TSCA regulations are applicable to facilities which manufacture or import chemical substances and/or mixtures. TSCA also has provisions which apply to facilities which have or had PCB containing devices on-site. The Safe Drinking Water and Toxic Enforcement Act (Proposition 65) is applicable to all facilities which employ over ten workers and use listed chemicals.

7.1 Toxic Substances and Control Act (TSCA)

The Toxic Substances Control Act (TSCA) (40 CFR 720) was implemented to allow EPA to review and monitor the risk a chemical poses to humans and the environment both before and after its introduction into commerce. Regulations require reporting to EPA of chemicals which may be manufactured or imported and that are not already on the TSCA chemical substance inventory. TSCA also has specific regulations for specific chemicals such as Polychlorinated Biphenyls (PCBs). The EPA established regulations for location inspections, recordkeeping and reporting for facilities which have on-site electrical items that contain or have contained PCBs.

Implementing Agency

EPA is the implementing agency responsible for TSCA.

Applicability

TSCA is applicable to any facility that manufactures or imports chemical substances and/or mixtures. The PCB provisions in TSCA are applicable to facilities that have on-site electrical items that contain or have contained PCBs.

TSCA regulations for chemical substances and/or mixtures are not applicable to this facility because the facility imports and manufactures chemicals which are already TSCA listed.

TSCA regulations for PCBs are not applicable to this facility because the facility neither has nor had any electrical items on-site that contained PCBs (it would apply if there were PCB items on-site).

7.2 Safe Drinking Water and Toxic Enforcement Act (Proposition 65)

Proposition 65 provides a system whereby citizens are protected from exposure to certain chemicals through notice requirements and discharge limitations. The adoption of Proposition 65 required a number of new restrictions to be placed on two broad categories of chemicals:

- those "known to the state to cause cancer"
- those "known to the state to cause reproductive toxicity"

The initiative required the governor to publish a list of such chemicals and provide at least annual updates. There are two applicable private sector requirements of Proposition 65:

- Notifications of Exposures (Health & Safety Code §§ 25249.6, 25249.10(b); and
- Discharge Prohibitions (Health & Safety Code §§ 25249.5, 25249.9[a]).

Implementing Agency

Proposition 65 is enforced by state or local prosecutors. (Health & Safety Code sec. 25249.7[c]). In addition, Proposition 65 establishes the right of action for private citizens, acting "in public interest."

Applicability

Facilities which employ ten employees or more and use listed chemicals must comply with Proposition 65. T-Chem has over 100 employees and potentially exposes workers to formaldehyde and diesel exhaust. Therefore, T-Chem is subject to Proposition 65 requirements.

Compliance Requirements

T-Chem must comply with the following Proposition 65 requirements:

1) Post warning notifications for chemicals on the Proposition 65 list on products or in areas where exposure may occur.

2) Beginning twenty months after listing, eliminate the discharge of Proposition 65 chemicals "into water or onto land where such chemical passes or probably will pass into any source of drinking water" except at levels below defined risk levels.

Findings

Formaldehyde is a listed Proposition 65 chemical but only in gas form. The formaldehyde used at T-Chem is in solution form. Due to the volatility of formaldehyde, T-Chem management posts Proposition 65 warnings in the formaldehyde work area. Other listed chemicals are found at T-Chem which are not associated with manufacturing processes. These include: tobacco smoke and diesel exhaust. T-Chem posts Proposition 65 warnings in the workplace addressing these exposures. No non-compliance findings were noted pertaining to Proposition 65 requirements.

STATE OF CALIFORNIA
DEPARTMENT OF PESTICIDE REGULATION
PESTICIDE REGISTRATION BRANCH
830 K STREET, 9th St-L/L
SACRAMENTO,CA 95814-3510

LICENSE No. 17591

CERTIFICATE OF REGISTRATION
FOR PESTICIDES

NON TRANSFERABLE

FIRM NAME	FIRM NO	DATE OF ISSUE (MO DAY YEAR)	EXPIRES
T-CHEM PRODUCTS	11321	02/11/99	DEC 31 1999

9028 DICE ROAD
SANTA FE SPRINGS CA 90670

is authorized to manufacture, deliver or sell in California the products listed below Registration is not an endorsement of approval by the Department of Pesticide Regulation of any product or any claim made for it No reference may be made to the California Department of Pesticide Regulation in labeling or advertisements Registration may be cancelled after hearing at any time for just cause The composition of each product and the label on it must be the same as those submitted by the registrant Only labels accepted by the Director may represent a pesticide

REGISTRATION NUMBER	BRAND NAME
FULL REGISTRATIONS	
11321- 11-AA	PURE BRIGHT 10% SODIUM HYPOCHLORITE SOLUTION
11321- 20007-AA	PURE BRIGHT 12.5% SODIUM HYPOCHLORITE SOLUTION
11321- 7-ZA	PURE BRIGHT GERMICIDAL BLEACH
11321- 10-AA	PURE BRIGHT INDUSTRIAL SANITIZER/DISINFECTANT
11321- 6-AA	PURE BRIGHT INSTITUTIONAL SANITIZER
11321- 12-AA	PURE BRIGHT LIQUID CHLORINATOR

TOTAL PRODUCTS REGISTERED: 6

A CERTIFICATE OF REGISTRATION FOR PESTICIDES IS NOT TRANSFERABLE
IF THERE IS A CHANGE IN BUSINESS OWNERSHIP, A NEW APPLICATION AND FEE(S) ARE NECESSARY.

BRIAN CONSTRUCTION COMPANY, INC.
5552 E. La Palma Avenue
Anaheim, CA 92807
(714) 777-1699
FAX (714) 693-0923

PROPOSAL AND CONTRACT

TO: T-CHEM PRODUCTS
9028 DICE RD.
SANTA FE SPRINGS, CA. 90670
ATTN: JIM RISSMAN/ GREG WEISE

Date MARCH 24, 1994
Telephone 310-906-2219
310-941-9780 FAX

I/we hereby agree to furnish all labor, materials, equipment and supervision to complete the following described work located at:

9028 DICE RD.- SANTA FE SPRINGS

1. REMOVE APPROXIMATELY 9,699 SQ. FT. OF DAMAGED ASPAHLT AND EXISTING SUB SOIL TO A DEPTH OF 10".

2. FURNISH AND COMPACT 6" OF CRUSHED MISCELLANEOUS BASE OVER THE ENTIRE AREA.

3. REPAVE THE ENTIRE AREA WITH 4" OF NEW ASPHALT CONCRETE.

4. APPROXIMATE AREAS SHOWN ON ATTACHED SKETCH.

BRIAN CONSTRUCTION CO., INC. will not be responsible for damage to underground lines, pipelines, conduit, wiring, etc., nor for any damage to approaches (including sidewalk) from the street to the property line

All for the sum of $ $24,425.00

This proposal is firm for fifteen (15) days from above date. Terms: Net Cash 30 DAYS UPON COMPLETION

When signed by the Buyer and Seller's sales representative this proposal will constitute a firm contract according to the terms and conditions on both sides of this form.

ACCEPTED: _____ Buyer

Date: _____

BRIAN CONSTRUCTION CO., INC.
Cont. Lic. No. 396185

Per _____

Scott C.

To file for
a variance:

(818) 572-6702

To ask for
assistance
with a variance:

(818) 572-6481

To check the
status of your
violation notice:

(818) 572-6177

1/87

NOTICE OF VIOLATION

- What it is
- What you need to know

SOUTH COAST AIR QUALITY
MANAGEMENT DISTRICT
9150 Flair Drive
El Monte, CA 91731

WHY YOU NEED TO KNOW

If you have violated rules or regulations of the South Coast Air Quality Management District, there are certain steps you should take immediately to resolve the problem. This pamphlet describes those steps and provides answers to commonly asked questions about the Notice of Violation.

The District is a government agency responsible for air pollution control in Los Angeles, Orange and Riverside Counties and in the non-desert portion of San Bernardino County.

The District gets its authority from the California Legislature. District rules and penalties for violation have the force of law. A violation may be handled either as a criminal misdemeanor, or as a civil case involving the imposition of a monetary penalty.

WHAT IS A NOTICE?

A Notice of Violation is the District's official claim that someone has violated District rules or state laws that apply to air pollution.

WHAT HAPPENS NEXT

District personnel study all available information to decide whether your notice will be handled by this agency, or be referred to the local district attorney or city prosecutor.

This decision depends on the seriousness of the violation. In most cases, violations can be resolved by mail through the District's MUTUAL SETTLEMENT LETTER PROGRAM. This program offers the opportunity to settle your case out of court by reaching a mutual agreement with the District.

More serious cases are prosecuted in civil or criminal court. As soon as this decision is made, you will be notified.

WHAT YOU SHOULD DO IN THE MEANTIME

Take immediate action to prevent your violation from recurring. Each additional day of non-compliance could be considered an additional violation. If you must continue using the non-complying equipment after you have received a Notice of Violation, you may petition the Hearing Board for a VARIANCE.

If granted, a variance allows you to legally operate the equipment causing the violation while you are working to correct the problem. If you'd like to know how to apply for a variance, please contact either the Hearing Board Office, (818) 572-6702, or the Office of the Public Advisor, (818) 572-6481.

WHAT THE DISTRICT WILL DO:

Your Notice of Violation will be handled in one of three ways — by the District's Mutual Settlement Letter Program, by civil prosecution or by criminal prosecution.

/. Mutual Settlement Letter Program

Most violation notices are processed through this program. It gives you the chance to settle your case within the District, rather than in court.

If your Notice of Violation is referred to this program, you will receive a letter from the District offering to settle the violation. The District sets the settlement terms, usually involving a penalty and written proof of current compliance with the violated rule. The maximum penalty established by the California Health and Safety Code is $25,000 for each day of violation.

Respond to the mutual settlement letter, either in writing or by phone, by the deadline specified in the letter. If you do not respond, your case will be referred to the District's Legal Division for further legal action, and may be filed in court.

You can arrange to discuss your case, by phone or in person, with an Enforcement Division investigator. The INVESTIGATOR'S NAME AND PHONE NUMBER are included in the letter. Inform the investigator of any circumstances relating to the violation that you think the District should know in considering your case. If certain special circumstances are involved in the violation, the settlement amount specified in the letter may be reduced.

If a mutually agreeable resolution of the Notice of Violation cannot be reached, it is referred to the District's Legal Division. Our attorney then files a legal action in court for civil penalties, as described here.

2. Civil Prosecution

If the District Counsel assigns your case to an attorney in the District's Legal Division for civil prosecution, the attorney reviews your case and usually sends you a letter specifying the District's settlement terms.

This gives you a chance to resolve the matter by paying a fine and providing written proof of correction. You have 15 days from the date of the letter to reply.

You can arrange to discuss your case, by phone or in person, with the attorney who has been assigned. The ATTORNEY'S NAME AND PHONE NUMBER are included in the letter. Tell the attorney any circumstances relating to the violation that you think the District should know in considering your case.

If you do not respond within the time limit specified in the letter, the attorney files a lawsuit -- a civil complaint. You will be served a summons requiring you to file a written response in court within 30 calendar days, and outlining other steps you must take to protect your legal rights. You may wish to consult an attorney.

After the lawsuit is filed, the District may choose to conduct further investigation (known as the discovery process), and a trial date may be set.

Unless you and the attorney for the District reach a mutually agreeable settlement, the case goes to trial. If the court (or jury) determines that you violated District rules, it will set the amount of the penalty to be imposed. The maximum penalty is either $1,000 per day, $10,000 per day or $25,000 per day of violation, depending on the type of violation and steps taken to avoid or correct it.

3. Criminal Prosecution

Your violation may result in criminal prosecution if it:

- involves substantial pollution that could have been prevented, or
- shows willful disregard of District rules.

If so, the District Counsel may refer your case to the local district attorney or city prosecutor. You will be served either an arraignment letter (if it is filed against an individual) or a summons (if it is filed against a corporation), along with a complaint.

You will be required to appear in court to enter a plea of guilty, not guilty, or no contest. If by plea or trial you are found guilty, the court determines penalties after considering recommendations from the prosecutor and your attorney. You will be subject to a fine of up to $25,000 and/or up to a year in jail for each day of violation.

You should seek the advice of your attorney if you have questions concerning penalties or procedures. If you do not have an attorney, contact any attorney referral service or a legal aid office (listed in the phone book).

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
9150 Flair Drive—El Monte, California 91731

NOTICE OF VIOLATION

DATE OF VIOLATION 11 30 92

T-CHEM PRODUCTS
NAME

9028 DICE ROAD SANTA FE SPRINGS
ADDRESS CITY

9028 DICE ROAD #: 092873
LOCATION-ADDRESS OF VIOLATION ID#

SANTA FE SPRING RM 310-946-6427
CITY SECTOR TELEPHONE #

YOU ARE HEREBY NOTIFIED THAT A VIOLATION OF CALIFORNIA HEALTH AND SAFETY CODE SECTION(S) _____

AND/OR SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT RULE(S)
203(a)

HAS BEEN COMMITTED. SUCH VIOLATIONS MAY BE PUNISHED BY THE IMPOSITION OF THE CIVIL OR CRIMINAL PENALTIES PRESCRIBED BY ARTICLE 3, CHAPTER 4, PART 4, DIVISION 26 (BEGINNING WITH SECTION 42400) OF THE CALIFORNIA HEALTH AND SAFETY CODE. EACH DAY DURING WHICH THE VIOLATION OCCURS MAY BE PUNISHED AS A SEPARATE VIOLATION WHETHER OR NOT A NOTICE OF VIOLATION IS ISSUED ON EACH SUCH DAY.

Description of Violation: Operating a Chlorine Scrubber without a valid permit to operate.

CONTROL NO.

BY _____
INSPECTOR

TELEPHONE ~~(213)~~ 396-2323

SERVED TO MR. GREG VIESE TITLE EXECUTIVE V P

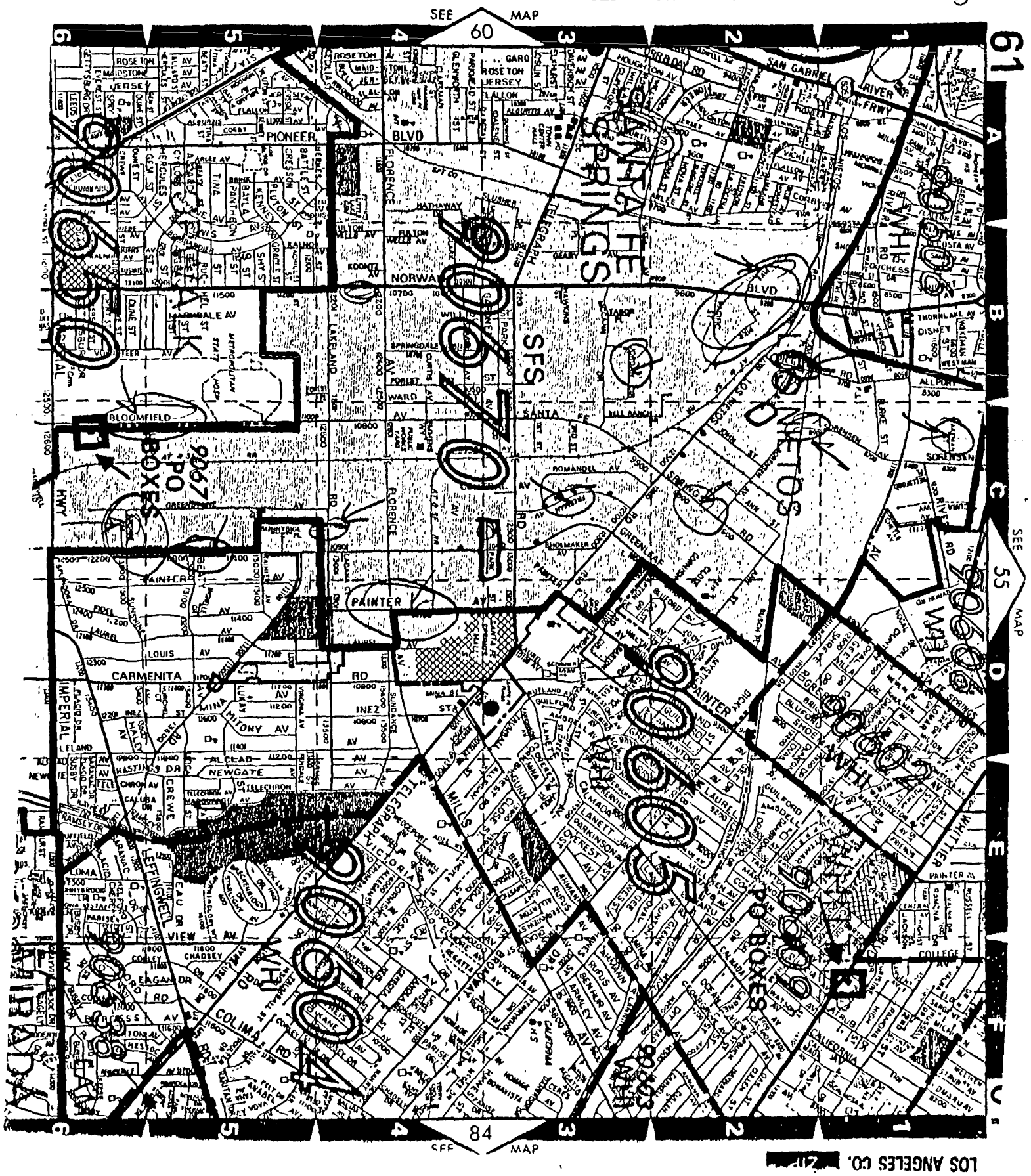
SERVED BY SHENG-YUAN CHIANG DATE 12-7-92

No. L 07509 **ENFORCEMENT DIVISION**

PM

VIOLATOR COPY

COPYRIGHT, © 1989 BY Thomas Bros Maps



T-CHEM PRODUCTS, INC. MEMORANDUM

DATE: April 23, 1993

TO: Ray Wetter

FROM: Greg Wiese

SUBJECT: South Coast Air Quality Management District

On Thursday April 22, 1993 T-Chem has agreed to commit to install an alarm system on the chlorine scrubber that will be actuated by the ORP.

Ideally it would be good to incorporate an alarm with a shut off valve from the line before a saturation threshold is realized.

Please respond back to me of your thoughts as well as confirming the installation of the alarm.

cc: Don Thurmond
Jerry McHugh
Curtis Coleman
Bob Brown
Scott Chancellor
Dale Cagle
Fred Lamb
Jim Rissman

5c

T-CHEM PRODUCTS, INC.

9028 DICE ROAD, P.O. BOX 3807
SANTA FE SPRINGS, CA 90670-1807

April 27, 1993

Mr. Bob Bean
South Coast Air Quality Management District
21865 E. Copley Drive
Diamond Bar, CA 91765-4182

Re: Bleach System Reactor Sparging Tank Alarm System

Dear Bob:

This correspondence will serve as written confirmation that we will design and install an automatic alarm system that will be activated by a high level millivolt reading from a ORP meter on the chlorine sparging tank venting the reactor of our bleach manufacturing system. It is our intention to proceed with the installation immediately.

As per our telephone conversation, our implementation of these additional safeguards will resolve any and all issues outstanding regarding the November 30, 1992 incident that originated Notice of Violation No. L-07509, and that Notice of Violation will be canceled.

We appreciate your constructive approach to resolving this matter.

Sincerely,

Greg J. Wiese

Greg J. Wiese
Executive Vice President

GJW/dod

cc: Curtis Coleman
Don Thurmond

FACSIMILE: (310) 941-9780 TELEPHONE: (310) 946-6427

LAIDLAW ENVIRONMENTAL SERVICES
SCHEDULING GUIDELINES

Please call and schedule all deliveries at least 24 hours in advance. Scheduling your deliveries will allow Laidlaw to provide your company with more efficient service.

WORK ORDER NUMBERS
When you call to schedule your deliveries, a WORK ORDER NUMBER will be assigned to each scheduled load. This work order number must be written in section 15 on the hazardous manifest. If non-hazardous, the work order number must be written in the upper right corner of the non-hazardous shipping document.

Along with the work order number, you must also write the LAIDLAW WASTE APPROVAL NUMBER on the hazardous manifest or non-hazardous shipping document. Omission of the work order number or waste approval number may result in delays in off-loading your waste.

The work order number is assigned for a specific delivery time. Please make every effort to adhere to this schedule. Trucks that do not arrive at their scheduled time may be subject to delays.

THE FOLLOWING INFORMATION WILL BE NECESSARY WHEN YOU CALL TO SCHEDULE. PLEASE HAVE IT AVAILABLE WHEN YOU CALL.

* Generator name
* Laidlaw Waste Approval Number
* Material classification i.e., RCRA, CA haz, non-haz
* Preferred date and time for delivery
* Number of loads to be scheduled
* Method of shipment i.e., drums, bulk, etc.

WHERE TO CALL
Your waste is approved for disposal at one or both of the following facilities. If you are unsure, please contact your Laidlaw Sales or Customer Service Representative to determine the proper facility. Please ask for the Scheduling Coordinator.

Laidlaw Environmental Services (Lokern), Inc. 2500 West Lokern Road Buttonwillow, CA 93206 (7 miles west of Buttonwillow) (800) 544-7199	Laidlaw Environmental Services (Imperial Valley), Inc. 5295 South Garvey Road Westmorland, CA 92281 (6 miles north of Westmorland) (619) 344-9400
Facility operating hours: Monday - Friday 9 am - 7 pm Closed Saturdays and Sundays	Facility operating hours: Monday - Friday 7:30 am - 3:30 pm Closed Saturdays and Sundays

At the Lokern facility, ASBESTOS deliveries will be accepted from 7 am to 11 am only.

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD054822784 — Manifest Document No: 013355 — 2 Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

4. Generator's Phone (310) 906-2219

A. State Manifest Document Number: 9360355

B. State Generator's ID:

5. Transporter 1 Company Name: LAIDLAW ENVIRONMENTAL SERVICES OF CALIFORNIA

6. US EPA ID Number: CAD000083121

C. State Transporter's ID: 4485-7

D. Transporter's Phone: 310-522-4100

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
ERICKSON TANK
13738 SLOVER AVENUE
FONTANA, CA 92335

10. US EPA ID Number: CAD982484933

G. State Facility's ID: CAD982484933

H. Facility's Phone: 909-355-5601

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 Number
a. NON-RCRA HAZARDOUS WASTE SOLID (EMPTY STORAGE TANK)	001	TP	12000	P	State 512 / EPA/Other N/A
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
11A) PO# 10555
12,000 GALLON EMPTY STORAGE TANK (STEEL)
ONCE CONTAINED DIESEL

K. Handling Codes for Wastes Listed Above
a. G1 b. c. d.

15. Special Handling Instructions and Additional Information
WEAR PROPER SAFETY EQUIPMENT
24 HOUR EMERGENCY PHONE # 800-929-3274

34302
4547

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	Signature	Month	Day	Year
JOHN HAUCK	John Hauck	01	16	95

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
LEE HARRIS	Lee Harris	01	16	95

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	Signature	Month	Day	Year
L.T. BARRIGAN	L.T. Barrigan	01	16	95

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

DTSC 8022A (9/93)
EPA 8700—22

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

9360355

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES

221 E. "D" ST. • P.O. Box 1175
WILMINGTON, CA 90748-1175
(310) 518-4700 • (800) 955-5359

CUSTOMER/ACCT. NO

WORK ORDER NO.
14912
15491

BILLING ADDRESS

T-CHEM PRODUCTS INC
9028 DICE ROAD
SANTA FE SPRNGS CA
90760

SERVICE ADDRESS

SAME

ORDER DATE	DATE TO BE DONE	CUSTOMER P.O. #	ORDERED BY	TELEPHONE#	CONTACT PERSON
06/14/95	06/16/95		JOHN HOUCK	(310) 9062219	JOHN HOUCK
REP.	**DIV. #**	**DEPARTMENT**	**CUSTOMER'S EPA #**	**CUSTOMER'S BD OF EQUAL #**	**CONTACT PHONE #**
JB	516-200	FIELD SERVICES	CAD051482784		(310) 906221 9

FLATBED TO DELIVER 1200 GAL STORAGE TANK TO ERICKSON PO# 10555

ON SITE 1380

DRIVER COMPLETE:

SERVICES PERFORMED Loaded 12,000 GAL TANKS
HAUL TO ERICKSON IN FONTANA
AS DIRECTED

START TIME 1130 STOP TIME _____ START MILES 30705 END MILES _____ TRUCK NUMBER 517231 TRAILER NUMBER 6080F

Manifest Number 93603355 Date Completed 6/16/95 Drivers Name Lee Harris

Comments _____

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature _____

CROSBY & OVERTON, INC.

CERTIFICATE OF TREATMENT
ISSUED TO

T-CHEM PRODUCTS, INC.

MANIFEST NUMBER: #93603354 DATE RECEIVED: 6/16/95

THE REFERENCED WASTE WAS RECEIVED AND TREATED TO STANDARDS MANDATED BY THE FEDERAL CLEAN WATER ACT AND EFFLUENT REQUIREMENTS SET FORTH BY THE LOS ANGELES COUNTY SANITATION DISTRICTS. WASTE TREATMENT IS PERFORMED UNDER PERMITS GRANTED TO CROSBY & OVERTON, INC., BY THE DEPARTMENT OF TOXIC SUBSTANCE CONTROL, TOGETHER WITH THE ENVIRONMENTAL PROTECTION AGENCY, IN ACCORDANCE WITH THE PROVISIONS OF THE RESOURCE CONSERVATION AND RECOVERY ACT OF 1976 TOGETHER WITH APPLICABLE FEDERAL AND STATE REGULATIONS. CROSBY & OVERTON HAS ALL OF THE NECESSARY PERMITS TO ACCEPT THE REFERENCED WASTE AND ALL THE WASTE HAS BEEN HANDLED IN ACCORDANCE WITH RCRA AND PROPOSITION 65, SUCH THAT THE CERTIFICATE HOLDER'S LIABILITY HAS BEEN TERMINATED.

CROSBY & OVERTON, INC.

JOHN ARMENTA
WATER TREATMENT SUPERVISOR

6/19/95
DATE

CROSBY & OVERTON, INC. 1610 W. 17th STREET, LONG BEACH CA 90813, (310)432-5445, FAX (310)436-7540

Washout 10 minutes No Solids

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93603354

IN CASE OF 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	Manifest Document No	2 Page 1	Information in the shaded areas is not required by Federal law
CA0051482784	03354	1 of 1	

GENERATOR

3 Generator's Name and Mailing Address: T-CHEM PRODUCTS, INC
9028 DICE ROAD
SANTA FE SPRINGS CA, 90670

4 Generator's Phone: (310) 906-2219

A. State Manifest Document Number: 93603354

B State Generator's ID:

5 Transporter 1 Company Name: LAIDLAW ENVIRONMENTAL SERVICES OF CALIFORNIA

6 US EPA ID Number: CAD000083121

C. State Transporter's ID: 4480016

D Transporter's Phone: 310-514-4700

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: CROSBY AND OVERTON
1620 WEST 16TH STREET
LONG BEACH, CA 90813

10 US EPA ID Number: CAD028409019

G. State Facility's ID: CAD028409019

H. Facility's Phone: 310-432-5445

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 Number
a WASTE COMBUSTIBLE LIQUID, N.O.S. PG III, NA 1993 (DIESEL)	001	TT	00100	G	State 223 EPA/Other N/A
b					State EPA/Other
c					State EPA/Other
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above
11A) PROFILE # 17986
PO # 10556
ESTIMATED 100 GALLONS

K. Handling Codes for Wastes Listed Above
a. H5
b.
c.
d.

15 Special Handling Instructions and Additional Information
WEAR PROPER SAFETY EQUIPMENT

24 HOUR EMERGENCY PHONE # 1-800-929-3274

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	Signature	Month	Day	Year
DENNIS M. JOHNSON	John Hunt	06	16	95

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
PETE MCGRAITH	Pete McGraith	06	16	95

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space
Box 9 address info is missing. Box 9 address should be 1630 West 17th Street.

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

Printed/Typed Name	Signature	Month	Day	Year
Brett La Rose	Brett La Rose	06	16	95

DO NOT WRITE BELOW THIS LINE.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (9/93)
EPA 8700—22

California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-94)
Please print or type *Form designed for use on elite (12-pitch) typewriter*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93603354

IN CASE OF 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: CAD005148278 — Manifest Document No: 03354 — 2 Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC
9028 DICE ROAD
SANTA FE SPRINGS CA, 90670

4 Generator's Phone (310) 906-2219

A. State Manifest Document Number: 93603354

B. State Generator's ID:

5 Transporter 1 Company Name: LAIDLAW ENVIRONMENTAL SERVICES OF CALIFORNIA

6 US EPA ID Number: CAD010008312

C. State Transporter's ID: 448016

D. Transporter's Phone: 310-519-4700

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
CROSBY AND OVERTON
1620 WEST 16TH STREET
LONG BEACH, CA 90813

10 US EPA ID Number: CAD028140676

G. State Facility's ID:

H. Facility's Phone: 310-432-5445

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 Number
a WASTE COMBUSTIBLE LIQUID, N.O.S. PG III NA 1993 (DIESEL)	001	TT	00100	G	State 223 / EPA/Other N/A
b.					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
IIA) PROFILE # 17586
PO# 10556
ESTIMATED 100 GALLONS

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

15 Special Handling Instructions and Additional Information
WEAR PROPER SAFETY EQUIPMENT

24 HOUR EMERGENCY PHONE # 1-800-929-3274

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	Signature	Month	Day	Year
[illegible]	[illegible]	01	16	95

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
PETE MCGRAITH	[illegible]	01	16	95

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Yellow- GENERATOR RETAINS

California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9 30 94)
Please print or type — Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93603355

IN CASE OF 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: CAD055148218484 — Manifest Document No: 013355
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

4. Generator's Phone (310) 906-2219

A. State Manifest Document Number: 93603355

B. State Generator's ID:

5. Transporter 1 Company Name: CAMAN ENVIRONMENTAL SERVICES OF CALIFORNIA

6. US EPA ID Number: CAD000083121

C. State Transporter's ID: 448157

D. Transporter's Phone: 310-518-4200

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
ERICKSON TANK
13735 SLOVER AVENUE
FONTANA, CA 92335

10. US EPA ID Number: CAD982484933

G. State Facility's ID:

H. Facility's Phone: 909-355-5601

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 Number
a. NON-RCRA HAZARDOUS WASTE SOLID (EMPTY STORAGE TANK)	001	TP	12000	P	State: 512 / EPA/Other: N/A
b.					State: / EPA/Other:
c.					State: / EPA/Other:
d.					State: / EPA/Other:

J. Additional Descriptions for Materials Listed Above
11A) RQ# 10555
12,000 GALLON EMPTY STORAGE TANK (STEEL) ONCE CONTAINING DIESEL

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

15. Special Handling Instructions and Additional Information
WEAR PROPER SAFETY EQUIPMENT

24 HOUR EMERGENCY PHONE # 800-929-3271

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	Signature	Month	Day	Year
JOHN HUCK				

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
LUCI HARRIS		01	16	95

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Yellow· GENERATOR RETAINS

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES

221 E. "D" ST. • P.O. Box 1175
WILMINGTON, CA 90748-1175
(310) 518-4700 • (800) 955-5359

CUSTOMER/ACCT. NO

WORK ORDER NO.
15245
15825

BILLING ADDRESS
T-CHEM PRODUCTS INC
9028 DTCE ROAD
SANTA FE SPRNGS CA
90760

SERVICE ADDRESS
SAME

ORDER DATE	DATE TO BE DONE	CUSTOMER P.O. #	ORDERED BY	TELEPHONE#	CONTACT PERSON
06/26/95	06/30/95		JOHN HOUCK	(310) 9062219	J. HOUCK
REP	**DIV.#**	**DEPARTMENT**	**CUSTOMER'S EPA #**	**CUSTOMER'S BD OF EQUAL #**	**CONTACT PHONE #**
JB	516-200	FIELD SERVICES	CAD051402784	HAHQ3604571 9	(310) 9062219

LEST TO PROVIDE CONFINED SPACE CREW TO CLEAN AND PRESSURE WASH SUMPS
Q.P. JERRY BLOOD
TECHS RICARDO ALANIS AND JOEL CLEARY

IN YARD 0700/0900 - 1330/1400

DRIVER COMPLETE:

SERVICES PERFORMED
CLEANED SUMPS FOR STABILIZATION
AT WESTMORLAND

START TIME 0700 STOP TIME 1530 START MILES _____ END MILES _____ TRUCK NUMBER 2077 TRAILER NUMBER N/R

Manifest Number 95130798 Date Completed 6/30/95 Drivers Name [illegible]

Comments _____

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature [signature]

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SODIUM CHLORIDE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SODIUM CHLORIDE

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 31685	MAXIMUM DAILY AMOUNT 43700	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SODIUM CHLORIDE TOPFLO

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SODIUM CHLORIDE TOPFLO

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	2250	MAXIMUM DAILY AMOUNT	4050	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
TOMADOL 91-6

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DETERGENT RANGE ALCOHOL ETHOXYLATE

EHS* ☐ Yes ☑ No

CAS #
68439-46-3

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 110	MAXIMUM DAILY AMOUNT 440	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
UCARCIDE 50 ANTIMICROBIAL

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
UCARCIDE 50 ANTIMICROBIAL

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 68	MAXIMUM DAILY AMOUNT 1380	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50.00%	GLUTARALDEHYDE	☐ Yes ☑ No	111-30-8
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ACCOSOFT 550-PPG

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ACCOSOFT 550-PPG

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	2650	MAXIMUM DAILY AMOUNT	5180	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	85.00%	METHYL TALLOW DIETHYLENE TRIAMINE CONDENSATE	☐ Yes ☑ No	68410-69-5
2	7 50%	DIETHYLENE GLYCOL	☐ Yes ☑ No	111-46-6
3	5 00%	PROPYLENE GLYCOL	☐ Yes ☑ No	57-55-6
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
AMORPHOUS ALUMINA SILICATE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HARBORLITE H-700

EHS* ☐ Yes ☑ No

CAS #
130885-09-5

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 4250	MAXIMUM DAILY AMOUNT 7740	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ANTIFOAM XFO30

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ANTIFOAM XFO30

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	30	MAXIMUM DAILY AMOUNT	55	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BIO-SOFT D-40

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
BIO-SOFT D-40

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 950	MAXIMUM DAILY AMOUNT 1910	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	35.00%	SODIUM DODECYLBENZENSULFONATE	☐ Yes ☑ No	25155-30-0
2	3 00%	SODIUM XYLENESULPHONATE	☐ Yes ☑ No	1300-72-7
3	1.00%	DODECYL BENZENE - LN	☐ Yes ☑ No	123-01-3
4	1 00%	SODIUM SULFATE	☐ Yes ☑ No	7757-82-6
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BIO-TERGE AS-40

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
BIO-TERGE AS-40

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ *Fire*	☐ *Reactive*	☐ *Pressure Release*	☑ *Acute Health*	☐ *Chronic Health*

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
170	350		

UNITS* (Check one item only)				DAYS ON SITE
☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	40.00%	SODIUM (C14-16) OLEGIN SULFONATE	☐ Yes ☑ No	68439-57-6
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CITRIC ACID GRANULAR

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CITRIC ACID GRANULAR

EHS* ☐ Yes ☑ No

CAS #
77-92-9

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 810	MAXIMUM DAILY AMOUNT 1300	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
COCONUT DIETHANOLAMIDE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CALAMIDE C (NINOL 40-CO)

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	240	MAXIMUM DAILY AMOUNT	480	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	82.00%	COCO DIETHANOLAMINE	☐ Yes ☑ No	68603-42-9
2	10.00%	GLYCERINE	☐ Yes ☑ No	56-18-5
3	8.00%	DIETHANOLAMINE	☐ Yes ☑ No	111-42-2
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
FIC 200

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
FIC 200

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 44	MAXIMUM DAILY AMOUNT 90	ANNUAL WASTE AMOUNT			STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK #'s 6 & 7

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CAUSTIC SODA 50%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CAUSTIC SODA 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 24000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 10000	MAXIMUM DAILY AMOUNT 76000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☑ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50.00%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, NORTHEAST SIDE OF BUILDING

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☑ Yes ☐ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CHLORINE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CHLORINE

EHS* ☑ Yes ☐ No

CAS #
7782-50-5

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 180000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 540000	MAXIMUM DAILY AMOUNT 900000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0		
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☑ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	CHLORINE	☑ Yes ☐ No	7782-50-5
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK#27

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
AMMONIA AQUAEOUS

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
AMMONIA AQUAEOUS

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 6000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	4000	MAXIMUM DAILY AMOUNT	6000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	29 00%	AMMONIA	☑ Yes ☐ No	7664-41-7
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM TANK #'s 23,25,26,33 &48 AND WAREHOUSE

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
HOUSEHOLD AMMONIA

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HOUSEHOLD AMMONIA

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 6200	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☑ Chronic Health

AVERAGE DAILY AMOUNT	20000	MAXIMUM DAILY AMOUNT	28000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☑ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	2.50%	AMMONIA	☐ Yes ☑ No	1336-21-6
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, WW & TANK# 13

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
HYDROGEN PEROXIDE 50%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HYDROGEN PEROXIDE 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 10000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 5000	MAXIMUM DAILY AMOUNT 10000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50 00%	HYDROGEN PEROXIDE	☐ Yes ☑ No	7722-84-1
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK 15

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SURFONIC N-102

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SURFONIC N-102

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 12000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	5000	MAXIMUM DAILY AMOUNT	12000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	POLY(OXY-1 2 ETHANEDIYL) ALPH-(NONYLPHENOL-OMEGA H	☐ Yes ☑ No	9016-45-9
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, NORTHEAST END OF BUILDING

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
PROPANE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
PROPANE

EHS* ☐ Yes ☑ No

CAS #
74-98-6

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 18231	
FED HAZARD CATEGORIES (Check all that apply)	☐ *Fire*	☐ *Reactive*	☑ *Pressure Release*	☐ *Acute Health*	☐ *Chronic Health*

AVERAGE DAILY AMOUNT	10950	MAXIMUM DAILY AMOUNT	18231	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a. AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	97.00%	PROPANE	☐ Yes ☑ No	74-98-6
2	1.00%	ETHANE	☐ Yes ☑ No	74-84-0
3	1.00%	PROPYLENE	☐ Yes ☑ No	115-07-1
4	1.00%	BUTANE	☐ Yes ☑ No	106-97-8
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME: ACETYLENE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME: ACETYLENE

EHS* ☐ Yes ☑ No

CAS #: 74-86-2

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER: 130	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☐ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT: 200	MAXIMUM DAILY AMOUNT: 390	ANNUAL WASTE AMOUNT	STATE WASTE CODE: 0		
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE: 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	ACETYLENE	☐ Yes ☑ No	74-86-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
OXYGEN

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
OXYGEN

EHS* ☐ Yes ☑ No

CAS #
7782-44-7

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 249	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☐ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 350	MAXIMUM DAILY AMOUNT 747	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0		
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other*
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	OXYGEN	☐ Yes ☑ No	7782-44-7
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
MAINTENANCE SHOP

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ARGON

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ARGON

EHS* ☐ Yes ☑ No

CAS #
7440-37-1

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 250	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☐ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 150	MAXIMUM DAILY AMOUNT 250	ANNUAL WASTE AMOUNT			STATE WASTE CODE 0
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b. ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	ARGON	☐ Yes ☑ No	7440-37-1
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMOLD DEPARTMENT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
MULTI GEAR OIL API GL-S SAE 85 W150

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
MULTI GEAR OIL API GL-S SAE 85 W150

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☐ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
200	330		0

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	94.00%	SOLVENT REFINED RESIDUAL OIL	☐ Yes ☑ No	64742-01-4
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMOLD

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
NITROGEN

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
NITROGEN

EHS* ☐ Yes ☑ No

CAS #
7727-37-9

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☐ LIQUID	☑ GAS	LARGEST CONTAINER 304	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☑ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	2128	MAXIMUM DAILY AMOUNT	3648	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☐ GALLONS	☑ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☑ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☐ a AMBIENT ☑ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100 00%	NITROGEN	☐ Yes ☑ No	7727-37-9
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM (BAG/DRUM STORAGE AREA)

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SODA ASH (SODIUM CARBONATE, ANHYDROUS)

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SODA ASH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	775	MAXIMUM DAILY AMOUNT	3070	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☑ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	99 80%	SODIUM CARBONATE	☐ Yes ☑ No	497-19-8
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
BLOWMIND DEPARTMENT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
ANTI-FREEZE & SUMMER COOLANT

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ANIT-FREEZE & SUMMER COOLANT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	33	MAXIMUM DAILY AMOUNT	55	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	100.00%	ETHYLENE GLYCOL	☐ Yes ☑ No	107-21-1
2	0 00%		☐ Yes ☑ No	
3	0 00%		☐ Yes ☑ No	
4	0 00%		☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM, TANK #'s 1,2,3 & 5 AND WAREHOUSE

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
SODIUM HYPOCHLORITE BLEACH

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
SODIUM HYPOCHLORITE BLEACH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 22500	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	208000	MAXIMUM DAILY AMOUNT	208000	ANNUAL WASTE AMOUNT	STATE WASTE CODE 0
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☑ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	11 00%	SODIUM HYPOCHLORITE	☐ Yes ☑ No	7681-52-9
2	1 50%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK SO-CAL INC (T-CHEM PRODUCTS)

CHEMICAL LOCATION
TANK FARM COMPRESSER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
WASTE OIL

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
WASTE OIL

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☐ MIXTURE ☑ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
300

FED HAZARD CATEGORIES (Check all that apply) ☑ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
30	300	300	221

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank ☐ Plastic/Nonmetallic Drum ☐ Fiber Drum ☐ Glass Bottle ☐ Rail Car
☐ Underground Tank ☐ Can ☐ Bag ☐ Plastic Bottle ☐ Other: _____
☐ Tank Inside Building ☐ Carboy ☐ Box ☑ Tote Bin
☐ Steel Drum ☐ Silo ☐ Cylinder ☐ Tank Wagon

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM WASTE WATER TRETMENT DRUM STORAGE AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME: T-10FS HYDROCHLORIC ACID SOLUTION

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME: HYDROCHLORIC ACID

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER: 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT: 110	MAXIMUM DAILY AMOUNT: 220	ANNUAL WASTE AMOUNT	STATE WASTE CODE	
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS
DAYS ON SITE: 365				

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	1.00%	HYDROCHLORIC ACID	☐ Yes ☑ No	7647-01-0
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
TANK FARM FLAMABLE STORAGE AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BLEACH & AMMONIA PRODUCT FRAGRANCES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
PERFUMES

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
CLASS II

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	185	MAXIMUM DAILY AMOUNT	330	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SOCAL

CHEMICAL LOCATION
FLAMMABLE DRUM STORAGE AREA SITE SE LOT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BLEACH & AMMONIA FRAGRANCES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
PERFUMES

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
CLASS I

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT 385	MAXIMUM DAILY AMOUNT 770	ANNUAL WASTE AMOUNT	STATE WASTE CODE	
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS
DAYS ON SITE 365				

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
FLAMABLE DRUM STORAGE AREA SITE SE LOT

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME: PHOSPHORIC ACID

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME: PHOSPHORIC ACID

EHS* ☐ Yes ☑ No

CAS #: 7664-38-2

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER: 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT: 55	MAXIMUM DAILY AMOUNT: 70	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE: 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	75.00%	PHOSPHORIC ACID	☐ Yes ☑ No	7664-38-2
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
BACK UP GENERATOR TANK/ FLAMMABLE STORAGE AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DIESEL FUEL NO. 2

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DIESEL FUEL NO. 2

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 110	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 55	MAXIMUM DAILY AMOUNT 220	ANNUAL WASTE AMOUNT		STATE WASTE CODE	
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM BOILER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
BWT-OD-PPSA CR3057

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
BOILER TREATMENT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ PURE ☑ MIXTURE ☐ WASTE

RADIOACTIVE ☐ Yes ☑ No

CURIES

PHYSICAL STATE (Check one item only) ☐ SOLID ☑ LIQUID ☐ GAS

LARGEST CONTAINER
55

FED HAZARD CATEGORIES (Check all that apply) ☐ Fire ☐ Reactive ☐ Pressure Release ☑ Acute Health ☑ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
30	55		

UNITS* (Check one item only) ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS

DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	20.00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	1310-58-3
2	10.00%	DIETHYLAMINOETHANOL	☐ Yes ☑ No	100-37-8
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM BOILER AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
POTASIUM HYDROXIDE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
CAUSTIC POTASH- LIQUID 50%

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 12000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 8000	MAXIMUM DAILY AMOUNT 12000	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	50.00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	7732-18-5
2	50.00%	WATER	☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK #45 IN TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
POTASSIUM HYPOCHLORITE BLEACH 7-15%

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
POTASSIUM HYPOCHLORITE BLEACH

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 6000	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	2000	MAXIMUM DAILY AMOUNT	6000	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☑ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other.
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	11 00%	POTASSIUM HYPOCHLORITE	☐ Yes ☑ No	7778-66-7
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
OPACIFIER E305

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
LYTRON 305

EHS* ☐ Yes ☑ No

CAS #
68649-55-8

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health
AVERAGE DAILY AMOUNT 36	MAXIMUM DAILY AMOUNT 90	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	1.60%	NONYLPHENOL, SULFATED AND ETHOXYLATED	☐ Yes ☑ No	68649-55-8
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CHELATING LIQUID 100

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
VERSENE 100

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
480	660		

UNITS* (Check one item only): ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS — DAYS ON SITE: 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	37.00%	ETHYLENEDIAMINE TETRAACETIC ACID SALT	☐ Yes ☑ No	64-02-08
2	1.00%	SODIUM GLYCOLATE	☐ Yes ☑ No	2836-32-0
3	1 00%	NITRILORTIACETIC ACID TRISODIUM SALT	☐ Yes ☑ No	5064-31-3
4	1 00%	SODIUM HYDROXIDE	☐ Yes ☑ No	1310-73-2
5	1.00%	DISODIUM ETHYLENEDIAMINEDIACETATE	☐ Yes ☑ No	38011-25-5

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DETERGENT AND AMMONIA DYES

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DYES

EHS* ☐ Yes ☑ No

CAS #
81-88-9

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 25	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health
AVERAGE DAILY AMOUNT 23	MAXIMUM DAILY AMOUNT 25	ANNUAL WASTE AMOUNT	STATE WASTE CODE		
UNITS* (Check one item only)	☐ GALLONS	☐ CUBIC FEET	☑ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☑ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DGC WinSurf

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
AQUEOUS SYNTHETIC DETERGENT/CHELATE

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health

AVERAGE DAILY AMOUNT	380	MAXIMUM DAILY AMOUNT	850	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☐ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☑ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	7 50%	AMINOCARBOXYLIC ACID	☐ Yes ☑ No	60-00-4
2	2 00%	POTASSIUM HYDROXIDE	☐ Yes ☑ No	1310-58-3
3	87 00%	WATER	☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
DANTOGARD DMDMHYDANTION

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
DMDM HYDANTION

EHS* ☐ Yes ☑ No

CAS #
NONE ESTABLISHED

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	MAXIMUM DAILY AMOUNT	ANNUAL WASTE AMOUNT	STATE WASTE CODE
55	110	0	

UNITS* (Check one item only): ☑ GALLONS ☐ CUBIC FEET ☐ POUNDS ☐ TONS — DAYS ON SITE: 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE: ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	1 50%	FORMALDEHYDE	☑ Yes ☐ No	50-00-0
2	39 50%	5,5 DIEMTHYHYDANTOIN	☐ Yes ☑ No	77-71-4
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
FMB 1210-8

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
FMB 1210-8

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health
AVERAGE DAILY AMOUNT 5582	MAXIMUM DAILY AMOUNT 165	ANNUAL WASTE AMOUNT 0	STATE WASTE CODE		
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	34.00%	ALKYLBENYLDIMETHYAMMONIUM CL	☐ Yes ☑ No	8001-54-5
2	50.00%	DIDECYL DIMETHYL AMMONIUM CL	☐ Yes ☑ No	7173-51-5
3	12.50%	ETHANOL	☐ Yes ☑ No	64-17-5
4	0.00%		☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
STEPANATE SXS

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
HYDROTROPE

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE	☐ Yes	☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER	55		
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health		
AVERAGE DAILY AMOUNT	220	MAXIMUM DAILY AMOUNT	820	ANNUAL WASTE AMOUNT		STATE WASTE CODE	
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS		DAYS ON SITE	365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	41.00%	SODIUM XYLENESULPHONATE	☐ Yes ☑ No	1300-72-7
2	1.00%	SODIUM SULFATE	☐ Yes ☑ No	7757-82-6
3	56.00%	WATER	☐ Yes ☑ No	7732-18-5
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
GLYCOL ETHER DB

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
GLYCOL ETHER

EHS* ☐ Yes ☑ No

CAS #
112-34-5

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☑ Reactive	☐ Pressure Release	☐ Acute Health	☑ Chronic Health

AVERAGE DAILY AMOUNT	190	MAXIMUM DAILY AMOUNT	770	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	99.00%	DIETHYLENE GLYCOL	☐ Yes ☑ No	112-34-5
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
CALFOAM ES-603

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
ANIONIC SURFACTANT

EHS* ☐ Yes ☑ No

CAS #

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)
FLAMMABLE NFPA 3

HAZARDOUS MATERIAL TYPE (Check one item only)	☐ PURE	☑ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☐ SOLID	☑ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☑ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	150	MAXIMUM DAILY AMOUNT	900	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d. CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1	60.00%	SODIUM LAURYL ETHER SULFATE	☐ Yes ☑ No	9004-82-4
2	28.00%	WATER	☐ Yes ☑ No	7732-18-5
3	12.00%	ETHYL ALCOHOL	☐ Yes ☑ No	64-17-5
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

Unified Program Consolidated Form

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

(one page per material per building or area)

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)
KIK INTERNATIONAL SO-CAL INC.

CHEMICAL LOCATION
TANK FARM AREA

CHEMICAL LOCATION CONFIDENTIAL - EPCRA ☐ Yes ☑ No

FACILITY ID# 1 9 0 4 9 6 0 0 0 9 1 | MAP# (optional) | GRID# (optional)

II. CHEMICAL INFORMATION

CHEMICAL NAME
MAGNESIUM CHLORIDE

TRADE SECRET ☐ Yes ☑ No
If Subject o EPCRA, refer to instructions

COMMON NAME
MAGNESIUM CHLORIDE

EHS* ☐ Yes ☑ No

CAS #
7706-30-3

*If EHS is "Yes", all amounts below must be in lbs

FIRE CODE HAZARD CLASSES (Complete if required by CUPA)

HAZARDOUS MATERIAL TYPE (Check one item only)	☑ PURE	☐ MIXTURE	☐ WASTE	RADIOACTIVE ☐ Yes ☑ No	CURIES
PHYSICAL STATE (Check one item only)	☑ SOLID	☐ LIQUID	☐ GAS	LARGEST CONTAINER 55	
FED HAZARD CATEGORIES (Check all that apply)	☐ Fire	☐ Reactive	☐ Pressure Release	☑ Acute Health	☐ Chronic Health

AVERAGE DAILY AMOUNT	1050	MAXIMUM DAILY AMOUNT	2330	ANNUAL WASTE AMOUNT	STATE WASTE CODE
UNITS* (Check one item only)	☑ GALLONS	☐ CUBIC FEET	☐ POUNDS	☐ TONS	DAYS ON SITE 365

Storage Container (Check all that apply)

☐ Aboveground Tank	☑ Plastic/Nonmetallic Drum	☐ Fiber Drum	☐ Glass Bottle	☐ Rail Car
☐ Underground Tank	☐ Can	☐ Bag	☐ Plastic Bottle	☐ Other:
☐ Tank Inside Building	☐ Carboy	☐ Box	☐ Tote Bin	
☐ Steel Drum	☐ Silo	☐ Cylinder	☐ Tank Wagon	

STORAGE PRESSURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT

STORAGE TEMPERATURE ☑ a AMBIENT ☐ b ABOVE AMBIENT ☐ c BELOW AMBIENT ☐ d CRYOGENIC

	% WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS#
1			☐ Yes ☑ No	
2			☐ Yes ☑ No	
3			☐ Yes ☑ No	
4			☐ Yes ☑ No	
5			☐ Yes ☑ No	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0 1% by weight if carcinogenic, attach additional sheets of paper capturing the required information

ADDITIONAL LOCALLY COLLECTED INFORMATION

If EPCRA, Please Sign Here

PILOT CHEMICAL COMPANY

3095856

10-20-06

QUALITY REPORT

CUSTOMER	ASHLAND CHEMICAL
LOCATION	20915 SO. Wilmington Ave. Carson, CA, 90810
PRODUCT NAME	CALFOAM ES-603
LOT NUMBER	3360PM060915
DATE SHIPPED	10/19/06
CARRIER	Customer Pick Up
CUSTOMER ORDER NUMBER	4501532609
CUSTOMER PRODUCT NAME	CALFOAM ES-603
CUSTOMER PRODUCT CODE	3095856-155
PILOT B/L NUMBER	115654

ANALYSIS

TEST	UNITS	SPECIFICATIONS Min.	Max.	RESULTS
PH	10% Solution	7.0	9.0	8.6
ACTIVE	%	58.0	60.0	58.7
COLOR	5% KLETT	---	50	7
UNSULFATED MATTER	%	---	3.0	1.93
INORGANIC SALT	%	---	3.0	0.22

ANALYST *F. Zargar* DATE 10/18/06

Contact: Ed Trainer, Plant Manager.

UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
RESEARCH AND SPECIAL PROGRAMS ADMINISTRATION

HAZARDOUS MATERIALS
CERTIFICATE OF REGISTRATION
FOR REGISTRATION YEAR 1999-2000

Registrant: KIK INTERNATIONAL SOCAL
Attn: Don C Thurmon
9028 Dice Rd.
Santa Fe Springs, CA 90670

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108 It is unlawful to alter or falsify this document.

Reg. No: 092099 001 019H Issued: 09/22/99 Expires: 06/30/00

Record keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

(1) A copy of the registration statement filed with RSPA; and
(2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, DHM-60 Research and Special Programs Administration, U.S. Department of Transportation, 400 Seventh Street, SW, Washington, DC 20590, telephone (202) 366-4109.

mySBNFLCC

Exempted from Paperwork Reduction Act by 49 U S C 5108(i)

U.S. DEPARTMENT OF TRANSPORTATION
HAZARDOUS MATERIALS REGISTRATION STATEMENT
REGISTRATION YEAR 19 99 - 20 00

(Please Type or Print all Responses)

Initial Registration ____ Renewal of Registration X Amendment to Registration ____ Expedited Follow-up ____

Current Registration # 061698001038LG

1. **Registrant** KIK INTERNATIONAL SOCAL
(Company Name)

(Place pre-printed label here if provided and if name and address are correct Otherwise, provide correct information)

2. **Mailing Address of Principal Place of Business**

Street or P O Box 9028 DICE Rd City Santa Fe Springs

County LA State CA Zip Code 90670 - ____ Country USA

3. **Carrier's US DOT ID Number, ICC Number, or Reporting Railroad Alphabetic Code (if applicable)**

US DOT ID #_____ ICC # _____ Railroad Alphabetic Code _____

4. **Mode(s) Used to Transport Hazardous Materials:** Highway X Rail ____ Water ____ Air ____

5. **Industrial Classification:** Check the primary industry in which the registrant operates. **Mark Only One.**

Transportation
- ☐ Carrier
- ☐ Warehousing
- ☐ Freight Forwarding, Agent Services
- ☐ Transportation Repair & Service Facilities

Manufacturing
- ☐ Petroleum Refining & Related Industries
- ☐ Apparel & Other Textile Products
- ☐ Paper, Wood, & Allied Products
- ☐ Printing & Publishing
- ☐ Chemicals & Allied Products
- ☐ Food & Kindred Products
- ☐ Rubber & Miscellaneous Plastic Products
- ☐ Electric & Electronic Equipment
- ☐ Explosives
- ☐ Other Manufacturing Industries

Other
- ☐ Agriculture & Support Services
- ☐ Mining - Metal & Non-Metal
- ☐ Oil & Gas Extraction
- ☐ Gasoline, Fuel Oil, Propane Sales & Delivery
- ☐ Construction - All Types
- ☐ Wholesale or Retail Trade
- ☐ Non-Transportation Repair Facilities
- ☐ Hazardous Waste Services - Transportation, Disposal, Treatment
- ☒ Other BLENDER/PROCESSOR

6. **Annual Registration Fee.** The combined registration and processing fee is $300.00. (Complete only when submitting initial or renewal registration)

Total Amount Enclosed: 300.00

Make check or money order in U S funds, drawn on a U.S. bank, and payable to "U.S. Department of Transportation," and identified as payment for the "Hazmat Registration Fee."

Method of Payment

Check X Money Order ____ Credit Card: *VISA* ____ *MasterCard* ____

Credit Card Users Please Provide the Following Information:

Card Number: | | | | | | | | | | | | | | | | Expiration Date: MO | | YR | |

Name as it appears on the card _____

Authorized Signature _____

Cardholder acknowledges ordering goods or services in the amount of the total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the issuer. Credit card statement will list this payment as "US DOT Hazmat Regis."

NOTE. If completing an Expedited Registration, **do not** resubmit credit card information here.

7. PRIOR-YEAR SURVEY INFORMATION: Hazardous Materials Activities, and States in Which Activity was Conducted. Indicate those activities conducted by the registrant during the previous calendar year (e g , 1998 for the 1999-2000 Registration Year) Mark "A" through "E," as appropriate, to indicate the category or categories and the activity or activities (shipper, carrier, or other) in which the registrant acted Check all categories and activities that apply "Other" may be checked to indicate offeror activities not covered under the heading of shipper or carrier, such as freight forwarder or agent Carriers should circle all states in which they operated as a hazardous materials carrier Shippers and others engaged in offering hazardous materials should circle only those states from which they offered hazardous materials They do not need to indicate to or through which states shipments were sent A list of the states and their abbreviations appears in the accompanying materials Circle "48 Contiguous States," if appropriate, to indicate that the activity was conducted in all of the 48 contiguous states If the registrant did not engage in activities covered by "A" through "E" during the previous year, but plans to do so in the current registration year, mark only "F "

A ____ Offered or transported in commerce any highway route-controlled quantity of a Class 7 (radioactive) material

1 Shipper ____ 2. Carrier ____ 3 Other (Freight Forwarder, Agent, etc) ____

AL	AR	AZ	CA	CO	CT	DE	FL	GA	ID	IL	IN	IA	KS	KY	LA	MA	MD	ME	MI	MN
MO	MS	MT	NC	ND	NE	NH	NJ	NM	NV	NY	OH	OK	OR	PA	RI	SC	SD	TN	TX	UT
	VT	VA	WA	WV	WI	WY	48 Contiguous States						AK	AS	DC	GU	HI	MP	PR	VI

B ____ Offered or transported in commerce more than 25 kilograms (55 pounds) of a Division 1 1, 1 2, or 1 3 (explosive) material in a motor vehicle, rail car, or freight container

1. Shipper ____ 2. Carrier ____ 3 Other (Freight Forwarder, Agent, etc) ____

AL	AR	AZ	CA	CO	CT	DE	FL	GA	ID	IL	IN	IA	KS	KY	LA	MA	MD	ME	MI	MN
MO	MS	MT	NC	ND	NE	NH	NJ	NM	NV	NY	OH	OK	OR	PA	RI	SC	SD	TN	TX	UT
	VT	VA	WA	WV	WI	WY	48 Contiguous States						AK	AS	DC	GU	HI	MP	PR	VI

C ____ Offered or transported in commerce more than 1 liter (1 06 quarts) per package of a material extremely toxic by inhalation (materials poisonous by inhalation that meet one of the defining criteria for Hazard Zone A).

1. Shipper ____ 2. Carrier ____ 3. Other (Freight Forwarder, Agent, etc) ____

AL	AR	AZ	CA	CO	CT	DE	FL	GA	ID	IL	IN	IA	KS	KY	LA	MA	MD	ME	MI	MN
MO	MS	MT	NC	ND	NE	NH	NJ	NM	NV	NY	OH	OK	OR	PA	RI	SC	SD	TN	TX	UT
	VT	VA	WA	WV	WI	WY	48 Contiguous States						AK	AS	DC	GU	HI	MP	PR	VI

D ✓ Offered or transported in commerce a hazardous material or hazardous waste in a bulk packaging (see 49 CFR 171.8) having a capacity equal to or greater than 13,248 liters (3,500 gallons) for liquids or gases or more than 13.24 cubic meters (468 cubic feet) for solids

1 Shipper ✓ 2 Carrier ____ 3. Other (Freight Forwarder, Agent, etc) ____

AL	AR	AZ	(CA)	CO	CT	DE	FL	GA	ID	IL	IN	IA	KS	KY	LA	MA	MD	ME	MI	MN
MO	MS	MT	NC	ND	NE	NH	NJ	NM	NV	NY	OH	OK	OR	PA	RI	SC	SD	TN	TX	UT
	VT	VA	WA	WV	WI	WY	48 Contiguous States						AK	AS	DC	GU	HI	MP	PR	VI

E ____ Offered or transported in commerce a shipment, in other than a bulk packaging, of 2,268 kilograms (5,000 pounds) gross weight or more of one class of hazardous materials or hazardous waste for which placarding of a vehicle, rail car, or freight container is required.

1. Shipper ____ 2. Carrier ____ 3. Other (Freight Forwarder, Agent, etc.) ____

AL	AR	AZ	CA	CO	CT	DE	FL	GA	ID	IL	IN	IA	KS	KY	LA	MA	MD	ME	MI	MN
MO	MS	MT	NC	ND	NE	NH	NJ	NM	NV	NY	OH	OK	OR	PA	RI	SC	SD	TN	TX	UT
	VT	VA	WA	WV	WI	WY	48 Contiguous States						AK	AS	DC	GU	HI	MP	PR	VI

F. ____ Did not engage in any of the activities listed in A through E during the previous calendar year

8. Certification of Information. I certify that, to the best of my knowledge, the above information is true, accurate, and complete

Certifier's Name DON C. THURMOND (Print the signer's name) Date 9/14/99

Title Director of Procurement Phone (562) 243-0506

Certifier's Signature _____

FALSE STATEMENTS MAY VIOLATE 18 U.S.C 1001

MAIL COMPLETED FORM WITH PAYMENT TO :

U S Department of Transportation
Hazardous Materials Registration
P O. Box 740188
Atlanta, GA 30374-0188

Please retain a copy of this form for your records

Exempted from Paperwork Reduction Act by 49 U S C 5108(i)

U.S. DEPARTMENT OF TRANSPORTATION
HAZARDOUS MATERIALS REGISTRATION STATEMENT
REGISTRATION YEAR 19 99 - 20 00

(Please Type or Print all Responses)

Initial Registration ____ Renewal of Registration ____ Amendment to Registration X Expedited Follow-up ____

Current Registration # 061698001031G

1. Registrant KIK INTERNATIONAL SOCAL
(Company Name)

(Place pre-printed label here if provided and if name and address are correct Otherwise, provide correct information.)

2. Mailing Address of Principal Place of Business

Street or P O. Box 9028 DICE Rd City Santa Fe Springs

County LA State CA Zip Code 90670 - ____ Country USA

3. Carrier's US DOT ID Number, ICC Number, or Reporting Railroad Alphabetic Code (if applicable)

US DOT ID #____ ICC # ____ Railroad Alphabetic Code ____

4. Mode(s) Used to Transport Hazardous Materials: Highway X Rail ____ Water ____ Air ____

5. Industrial Classification: Check the primary industry in which the registrant operates. **Mark Only One.**

Transportation
- ☐ Carrier
- ☐ Warehousing
- ☐ Freight Forwarding, Agent Services
- ☐ Transportation Repair & Service Facilities

Manufacturing
- ☐ Petroleum Refining & Related Industries
- ☐ Apparel & Other Textile Products
- ☐ Paper, Wood, & Allied Products
- ☐ Printing & Publishing
- ☐ Chemicals & Allied Products
- ☐ Food & Kindred Products
- ☐ Rubber & Miscellaneous Plastic Products
- ☐ Electric & Electronic Equipment
- ☐ Explosives
- ☐ Other Manufacturing Industries

Other
- ☐ Agriculture & Support Services
- ☐ Mining - Metal & Non-Metal
- ☐ Oil & Gas Extraction
- ☐ Gasoline, Fuel Oil, Propane Sales & Delivery
- ☐ Construction - All Types
- ☐ Wholesale or Retail Trade
- ☐ Non-Transportation Repair Facilities
- ☐ Hazardous Waste Services - Transportation, Disposal, Treatment
- ☒ Other BLENDER/PROCESSOR

6. Annual Registration Fee. The combined registration and processing fee is $300.00. (Complete only when submitting initial or renewal registration.)

Total Amount Enclosed: 300.00

Make check or money order in U.S. funds, drawn on a U.S. ba
identified as payment for the "Hazmat Registration Fee."

Method of

Check X Money Order ____ Cre

Credit Card Users Please Provic

Card Number: | | | | | | | | | | | | | | | | |

Name as it appears on the card ____

Authorized Signature ____

Cardholder acknowledges ordering goods or se
hereon and agrees to perform the obligations s
with the issuer. Credit card statement will list t

NOTE: If completing an Expedited Registration, do r

KIK- SoCal Inc
Accounts Payable Approval

General Ledger A/c	Amount
Total	
Coded by	Approved by
Entered by	Date Entered
Transaction Code	

Form DOT F 5800.2 (Revised 03/99)

CHECK NO.	CHECK DATE	VENDOR NO.
1699	09/09/99	USDEPT

CHASE MANHATTAN BANK DELAWARE
1201 Market Street
Wilmington, DE 19601

KIK-SoCal Inc.
9028 Dice Road
Santa Fe Springs, CA
90670
Bus (562) 946-6427

CHECK NO. 001699

62-26/311 5829 09

CHECK AMOUNT
$300.00

THREE HUNDRED AND 00/100 DOLLARS

PAY
TO THE
ORDER OF

U S Dept of Transportation
Hazardous Material Registratn
PO Box 740188
Atlanta GA 30374-0188
USA

AUTHORIZED SIGNATURE

THE SECURITY FEATURES ON THIS DOCUMENT INCLUDE MICRO-PRINT SIGNATURE LINES AND BLEED THROUGH MICR NUMBERING

"001699" :031100267: 630458299 509"

U.S Department
of Transportation

**Research and
Special Programs
Administration**

AUG 25 1999

400 Seventh Street, S W
Washington, D C 20590

Rec'd 9/9/99

TO PERSONS WHO MAY BE SUBJECT TO THE HAZARDOUS MATERIALS REGISTRATION REQUIREMENT

CONCERNING RENEWAL OF HAZARDOUS MATERIALS REGISTRATIONS FOR REGISTRATION YEAR 1999-2000

According to our records, your company filed a Hazardous Materials Registration Statement with us for the 1997-98 or 1998-99 registration year but has not yet renewed its registration for the 1999-2000 registration year. A copy of the brochure containing the Registration Statement for the 1999-2000 registration year was mailed to your company in May; another copy is enclosed for your information and use, if appropriate. If you have engaged in any of the activities that require registration (as described in the enclosed brochure) since July 1, 1999, or plan to engage in any of these activities during the remainder of this registration year, you are required to register with us and pay a fee.

If you have already registered for the 1999-2000 registration year and have received a Certificate of Registration with a June 30, 2000, expiration date, we would appreciate your informing us of the 1998-99 and 1999-2000 registration numbers by calling us at (202) 366-4109 or writing to the address given at the end of this letter so that we can correct our records.

If you have sent in a 1999-2000 Registration Statement and have not received a Certificate of Registration with a June 30, 2000, expiration date, we recommend that you contact the Hazardous Materials Support Center in Cambridge, Massachusetts, at (617) 494-2545 to inquire about the status of that registration.

If you have not registered for the 1999-2000 registration year and are required to register, please complete the enclosed Statement, entering your most recent Registration Number in the place where the "Current Registration #" is requested. Your most recent Registration Number is printed at the top of the mailing label used for this mailing. That label may be peeled off and placed in the box on the form to supply your company name and address. Return the Statement with your payment to:

U.S. Department of Transportation
Hazardous Materials Registration
P.O. Box 740188
Atlanta, GA 30374-0188

US.Department
of Transportation
**Research and
Special Programs
Administration**

400 Seventh Street, S W
Washington, D C 20590

AUG 25 1999

TO PERSONS WHO MAY BE SUBJECT TO THE HAZARDOUS MATERIALS REGISTRATION REQUIREMENT

In early May 1999 your company was sent a copy of a brochure concerning the U.S. Department of Transportation's Hazardous Materials Registration Program. A second copy of that brochure is enclosed for your information. The May mailing was sent to (1) all companies added within the last year to the census of highway carriers and shippers maintained by the Federal Highway Administration's Office of Motor Carriers, and (2) all companies who first submitted reports as carriers or were first named as shippers on a Hazardous Materials Incident Report during the last year. Inclusion in either of these sources does not prove that the company is required to register under this program, but it does indicate that your company may be subject to the registration requirements. Our records do not indicate that your company has registered for the 1999-2000 Registration Year, and the enclosed brochure is being provided in an effort to ensure that persons who may be subject to registration have been informed of the program.

We recommend that you carefully review the description of "Who Must Register" on page 2, and the explanatory "Definitions" on page 3 if you have not already done so.

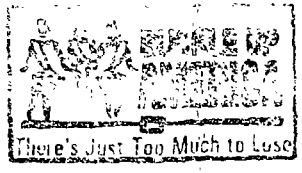
If your company is not required to register, or if it has registered, no further action is necessary. Although we attempted to avoid sending this letter to companies that have registered, it is inevitable that some registered companies will receive this letter because of the difficulty in comparing our internal records with those supplied by the outside sources used to generate the mailing list.

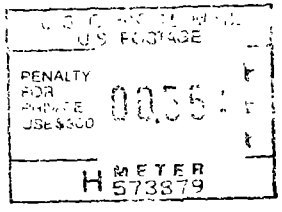
If you determine that your company is required to register, you should also consider the information on page 4 concerning "If You Have Failed to Register for Past Years." You should complete a Registration Statement for each year in which your company engaged in any of the specified activities, including the current year, and send the form or forms with payment of the $300 fee for each required year to:

U.S. Department of Transportation
Hazardous Materials Registration
P.O. Box 740188
Atlanta, GA 30374-0188

U. S. Department of
Transportation

Research and Special Programs
Administration
DHM-60
400 Seventh St., S.W.
Washington, D.C. 20590





9-85147
T-CHEM PRODUCTS INC
9028 DICE ROAD
SANTA FE SPRINGS CA 90670

90670-2550 21

EPA
United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P O Box 1513, Lantham, MD 20703-1513 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2002

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2 2, Attach substantiation forms) [X] NO (Do not answer 2 2, Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report

Name and official title of owner/operator or senior management official	Signature	Date Signed
Bob Brown General Manager		06/13/2003

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name: KIK-SoCal Inc.

Facility or Establishment Name or Mailing Address (if different from street address):

Street: 9028 Dice Road

Mailing Addres: NA

City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670

City/State/Zip Code:

Country (Non-US):

4.2 This report contains information for (Important check a or b, check c or d if applicable) a. [X] An entire facility b [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

4.3 Technical Contact Name: Derrell Johnson — Telephone Number (include area code): (562) 946-6427

Email Address: NA

4.4 Public Contact Name: United States Compliance Corp — Telephone Number (include area code): (952) 252-3000

4.5 SIC Code (s) (4 digits)	Primary a.	b.	c.	d.	e.	f.
	2841					

4.6	Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
		33	57	26		118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D No) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Ammonia

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category)
	7664-41-7
1.2	Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list)
	Ammonia
1.3	Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive)
	NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
[ ]																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical
a. [ ] Produce b. [ ] Import		
If produce or import	a. [ ] As a reactant	a. [ ] As a chemical processing aid
c. [ ] For on-site use/processing	b. [X] As a formulation component	b. [ ] As a manufacturing aid
d. [ ] For sale/distribution	c. [ ] As an article component	c. [ ] Ancillary or other use
e. [ ] As a byproduct	d. [ ] Repackaging	
f. [ ] As an impurity	e. [ ] As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	05 (Enter two-digit code from instruction package)	

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA [ ]	2 8	M	
5.2	Stack or point air emissions	NA [ ]	379	M	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 5.3 page number in this box. [ ] (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3	Surface Impoundment	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No.)	NA							
Off-Site Location Name	NA								
Off-site Address									
City		State		County		Zip		Country (Non-US)	

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)								
Off-Site location Name								
Off-site Address								
City		State		County		Zip		Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]								c. Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b	1	A03	2	NA				7A.1c	7A.1d	7A.1e
A	3	4		5		6	7	8	02	0 01 %	Yes [X] No [ ]
7A.2a	7A.2b	1		2					7A.2c	7A.2d	7A.2e
	3	4		5		6	7	8		%	Yes [ ] No [ ]
7A.3a	7A.3b	1		2					7A.3c	7A.3d	7A.3e
	3	4		5		6	7	8		%	Yes [ ] No [ ]
7A.4a	7A.4b	1		2					7A.4c	7A.4d	7A.4e
	3	4		5		6	7	8		%	Yes [ ] No [ ]
7A.5a	7A.5b	1		2					7A.5c	7A.5d	7A.5e
	3	4		5		6	7	8		%	Yes [ ] No [ ]

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐
and indicate the Part II, Section 6.2/7A page number in this box: ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category, or Generic Name
Ammonia

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [R99] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	347	382	386	390
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	5041	6410	6538	6603
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	311	250	253	256
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			1 20	

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10.1 and answer Section 8 11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.
8.11	Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box)			Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

***Report releases pursuant to EPCRA Section 329 (8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment " Do not include any quantity treated onsite

BOE-501-HG (S1F) REV. 10 (1-99)

PO BOX 942879
SACRAMENTO, CA 94279-0057

(916) 323-9555

STATE OF CALIFORNIA
BOARD OF EQUALIZATION

HAZARDOUS WASTE GENERATOR FEE RETURN

BOARD USE ONLY		
RR-B/A	AUD	REG
RR-QS	FILE	REF
EFF		

DUE ON OR BEFORE 02/29/00 **FOR** JANUARY - DECEMBER, 1999 | 9199

HWCA **RVHG05** HA EF | YOUR ACCOUNT NO. 36-045719 | 4

BOARD OF EQUALIZATION
ENVIRONMENTAL FEES DIVISION
PO BOX 942879
SACRAMENTO CA 94279-6009

T-CHEM PRODUCTS INC.
ATTEN: GREG WIESE
9028 DICE ROAD
SANTA FE SPRINGS CA 90670

MAKE CHANGES IF NAME OR ADDRESS IS INCORRECT

READ INSTRUCTIONS BEFORE PREPARING

9028 DICE ROAD
CAL000028326

1. ☐ Please check this box if you no longer generate hazardous waste at this site. Enter the date of last generation _____. Your account will be closed as of the date entered. *For consolidated accounts, use the enclosed Schedule G to indicate the date each site last generated waste, if hazardous waste is no longer being generated at that site.*

A CLASSIFICATION OF GENERATING SITES (Based on amounts of hazardous waste generated during the calendar year or portion thereof)		B NUMBER OF SITES (Do not list tonnage)	C AMOUNT OF FEES	D TOTAL FEES DUE (Column B x C)
2. Generators which generate less than 5 tons	2.		0.00	$
3. Generators which generate an amount equal to or more than 5 tons, but less than 25 tons	3.		144.00	
4. Generators which generate an amount equal to or more than 25 tons, but less than 50 tons	4.	1	1148.00	1,148.00
5. Generators which generate an amount equal to or more than 50 tons, but less than 250 tons	5.		2871.00	
6. Generators which generate an amount equal to or more than 250 tons, but less than 500 tons	6.		14355.00	
7. Generators which generate an amount equal to or more than 500 tons, but less than 1,000 tons	7.		28710.00	
8. Generators which generate an amount equal to or more than 1,000 tons, but less than 2,000 tons	8.		43065.00	
9. Generators which generate an amount equal to or more than 2,000 tons	9.		57420.00	
10. Amount of fees *(add lines 2 through 9 in Column D)*	10.			$ 1,148.00
11. Less prepayment credit	11.			$ —
12. Total fee due *(subtract line 11 from line 10)*	12.			$ 1,148.00
13. Penalty *[multiply line 12 by 10% (.10) if payment is made after the due date shown above]*	PENALTY 13.			$ -0-
14. Interest of 11% per annum (0.009167 per month) is due if payment is made after the due date.	INTEREST 14.			$ -0-
15. TOTAL AMOUNT DUE AND PAYABLE *(add lines 12, 13 and 14)*	15.			$ 1,148.00

I hereby certify that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

PRINT/TYPE NAME AND TITLE	SIGNATURE	PHONE NUMBER	DATE
DERRICK JOHNSON SAFETY/ENV. SUPV.		562 906-2040	2/22/00

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION
Always write your account number on your check or money order. Make a copy of this document for your records

DRUMS SHIPPED	POUNDS SHIPPED	TYPE WASTE	DISPOSAL CODE	TRANSPORTER	MANIFEST #	OUTOF STATE	DATE	NO
				Reporting Period.	Jan - Dec	1998		
1	1000	A/B Pads	01	FILTER RECYC.	97422710	No	01/23/98	1
2	1600	O& A/B Pads	02	FILTER RECYC	97422248	No	03/20/98	2
1	550	A/B Pads	01	FILTER RECYC.	97420485	No	05/21/98	3
2	1200	O& A/B Pads	02	FILTER RECYC.	97420737	No	06/24/98	4
2	1000	Oil Pads	02	FILTER RECYC.	98033185	No	08/17/98	5
1	250	Waste water	01	INDUST.SER. OIL	98074453	No	08/26/98	6
1	1200	Oil Pads	01	FILTER RECYC.	98033287	No	10/21/98	7
2	1400	O& A/B Pads	02	FILTER RECYC	98033807	No	12/22/98	8
12	**8200**	**<<

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD051482784 | 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
T-Chem Products INC.
9028 Dice Rd. Santa Fe Springs, CA 90670

4 Generator's Phone: 562 946-6427

A. State Manifest Document Number: 93739394

B. State Generator's ID: CAD051482784

5 Transporter 1 Company Name: Odyssey Transp.

6. US EPA ID Number: CAD087211019

C. State Transporter's ID: 20541

D. Transporter's Phone: (310) 760-3336

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
D/K ENVIRONMENTAL
5650 E 26th ST.
VERNON, CA 90023

10 US EPA ID Number: CAT080033681

G. State Facility's ID: CAT080033681

H. Facility's Phone: (213) 268 5056

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 Numbers
a. WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PG II 8	001	TT	01000 ~~05500~~	G	State 122 EPA/Other D002
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE D/K ENVIRONMENTAL FACILITY IN LOS ANGELES, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAT080033681

J. Additional Descriptions for Materials Listed Above: SODIUM HYDROXIDE AND WATER 2.0 11.2, 06

K. Handling Codes for Wastes Listed Above: a. D-1 b. c. d.

15 Special Handling Instructions and Additional Information
WEAR PROTECTIVE CLOTHING AND USE PROPER SAFETY EQUIPMENT.

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	Signature	Month	Day	Year
JOHN HOUCK		01	15	99

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	01	15	99

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	Signature	Month	Day	Year
Claudia Perez		01	15	99

DO NOT WRITE BELOW THIS LINE

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS (Generators who submit hazardous waste for transport to out of state produce completed copy of this copy and send to DTSC within 30 days)

DTSC 8022A (9/93)
EPA 8700—22

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

93739394

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

T-CHEM PRODUCTS INC.

Manifest NO: 93739394 **Date: 01/15/99**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U.S. Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph P. Belfour **Date:** 1/20/99

State of California—Environmental Protection Agency
Form Approved OMB No 2050-0039 (Expires 9-30-96)
Please print or type — Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No	Manifest Document No	2. Page 1 of 1	Information in the shaded areas is not required by Federal law
CAD051148278		1 of 1	

96710231

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

GENERATOR

3 Generator's Name and Mailing Address
T-Chem Products Inc
328 Dice RD Santa Fe Springs CA 90670

4 Generator's Phone (562) 946-6427

A. State Manifest Document Number: 96710231

B. State Generator's ID:

5 Transporter 1 Company Name: Odyssey Trans

6 US EPA ID Number: CAD982121061

C. State Transporter's ID: 0541

D. Transporter's Phone: 310-268-3330

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
D/K Environmental
3650 E 26th St
Vernon CA 90023

10 US EPA ID Number: CAT080033681

G. State Facility's ID: CAT080033681

H. Facility's Phone: 213-268-3056

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 Number
a. WASTE Corrosive Liquid, N.O.S. (Sodium Hydroxide) UN1760, PG II &	001	T	015500	GAL	State 122 EPA/Other D002
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

THIS WASTE STREAM HAS BEEN QUALIFIED FOR RECYCLING/TREATMENT AT THE D/K ENVIRONMENTAL FACILITY IN LOS ANGELES, CALIFORNIA. THIS FACILITY HAS THE NECESSARY PERMITS TO RECEIVE YOUR WASTE STREAM AS QUALIFIED. OUR EPA NUMBER IS CAT080033681

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Wear protective clothing & use proper Safety equipment.

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	Signature	Month	Day	Year
Claudia Perez		01	14	97

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE A. CANTU	Jose A. Cantu	01	14	97

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	Signature	Month	Day	Year
Claudia Perez		01	17	97

DO NOT WRITE BELOW THIS LINE.

Yellow — DTSC SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS
Generators who submit hazardous waste for transport to in-state
produce completed copy of this copy and send to DTSC within 30 days

DTSC 8022A (1/95)
EPA 8700—22

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

T-CHEM PRODUCTS INC.

Manifest NO: 96710231 **Date: 01/14/99**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U.S. Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph P. Balfour **Date:** 1/20/99

a of California—Environmental Protection Agency
m Approved OMB No. 2050-0039 (Expires 9-30-94)
ase print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Contr
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. | Manifest Document No: CAD051482784 39235

2 Page 1 of 1

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

3. Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA. 90670

4. Generator's Phone (562) 946-6427

5. Transporter 1 Company Name: ODYSSEY TRANSPORTATION
6. US EPA ID Number: CAD087210019

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

9 Designated Facility Name and Site Address
D/K ENVIRONMENTAL
3650 E. 26TH ST.
VERNON, CA. 90023
10 US EPA ID Number: CAT080013681

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
a. WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PGII, 8	001	TT	05500	G
b.				
c.				
d.				

15. Special Handling Instructions and Additional Information
WEAR PROTECTIVE CLOTHING, AND USE OSHA APPROVED SAFETY PRECAUTIONS
#290112-06

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	Signature	Month	Day	Year
MANUEL HERRERA		01	12	99

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE CANTU	Jose Cantu	01	12	99

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	Signature	Month	Day	Year
Claudia Perez		01	13	99

DO NOT WRITE BELOW THIS LINE.

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

DTSC 8022A (9/93)
EPA 8700—22

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

of California—Environmental Protection Agency
Approved OMB No 2050-0039 (Expires 9-30-94)
ase print or type Form designed for use on elite (12-pitch) typewriter

See Instructions on back of page 6.

Department of Toxic Substances Contr
Sacramento, California

93739235

IN CASE OF 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: CAD051482784 | Manifest Document No: 39235 | 2 Page 1 of 1 | Information in the shaded areas is not required by Federal law

3 Generator's Name and Mailing Address
T-CHEM PRODUCTS, INC.
9028 DICE RD. SANTA FE SPRINGS, CA. 90670
4 Generator's Phone (562) 946-6427

A. State Manifest Document Number: 93739235
B. State Generator's ID: CAD051482784
C. State Transporter's ID: 0541
D. Transporter's Phone: (310) 768-3336
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAT080033681
H. Facility's Phone: (213) 268-5056

5 Transporter 1 Company Name: ODYSSEY TRANSPORTATION | 6 US EPA ID Number: CAD087211019
7. Transporter 2 Company Name | 8 US EPA ID Number
9 Designated Facility Name and Site Address: D/K ENVIRONMENTAL, 3650 E. 26TH ST., VERNON, CA. 90023 | 10 US EPA ID Number: CAT080033681

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 Number
a WASTE CORROSIVE LIQUID, N.O.S. (SODIUM HYDROXIDE) UN1760, PG II, 8	001	TT	05500	G	State 122 EPA/Other D002
b					State EPA/Other
c.					State EPA/Other
d					State EPA/Other

J. Additional Descriptions for Materials Listed Above: SODIUM HYDROXIDE AQUEOUS
K. Handling Codes for Wastes Listed Above: RQ - H

15 Special Handling Instructions and Additional Information
WEAR PROTECTIVE CLOTHING, WD USE OSHA APPROVED SAFETY PRECAUTIONS
#29012-06

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	Signature	Month	Day	Year
		01	12	99

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JOSE CANTU		01	12	99

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	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Yellow GENERATOR RETAINS

BUSINESS N PKG. CENTER TEL:1-909-672-6291

BOE-501-HG (S1F) REV. 10 (1-99)

PO BOX 942879
SACRAMENTO, CA 94279-00

HAZARDOUS WASTE GENERATOR FEE RETURN

DUE ON OR BEFORE 02/29/00 FOR JANUARY - D

HWCA RVHG05

HA

BOARD OF EQUALIZATION
ENVIRONMENTAL FEES DIVISION
PO BOX 942879
SACRAMENTO CA 94279-6009

KIK
~~T-CHEM PRO~~
ATTEN: GRE
9028 DICE I
SANTA FE SI

OWNERS
ALL 1999

9028 DICE ROAD
CAL000028326

1. ☐ Please check this box if you no longer generate hazardou _____. Your *consolidated accounts, use the enclosed Schedule G to indi waste is no longer being generated at that site.*

	A CLASSIFICATION OF GENERATING SITES (Based on amounts of hazardous waste generated during the calendar year or portion thereof)	
2.	Generators which generate less than 5 tons	2
3.	Generators which generate an amount equal to or more than 5 tons, but less than 25 tons	3
4.	Generators which generate an amount equal to or more than 25 tons, but less than 50 tons	4
5.	Generators which generate an amount equal to or more than 50 tons, but less than 250 tons	5
6.	Generators which generate an amount equal to or more than 250 tons, but less than 500 tons	6
7.	Generators which generate an amount equal to or more than 500 tons, but less than 1,000 tons	7
		8
		9

KIK- SoCal Inc

Accounts Payable Approval

General Ledger A/c	Amount
4366 1-050	1148 —
	1148 —

Coded by: SW

Entered by: SW

Transaction Code: 5375

due date shown	PENALTY	13.	$ —
	INTEREST	14.	$ —
		15.	$ 1148.00

...anying schedules and statements, has been ...belief is a true, correct and complete return.

PRINT/TYPE NAME AND TITLE | SIGNATURE | PHONE NUMBER | DATE

MAKE CHECK OR MONEY ORDER PAYABLE TO STATE BOARD OF EQUALIZATION
Always write your account number on your check or money order. Make a copy of this document for your records.

VENDOR BOAEQU

INVOICE NO.	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN	NET CHECK AMOUNT
HAZ-WASTE/1999	02/10/00	1,148.00	1,148.00	.00	1,148.00
			Check Total		1,148.00

KIK-SoCal Inc.

Check Date: 02/10/00

CHECK NO. 2969

Paperware® by Macola, Inc. Marion, Ohio 43302 To Facsimile Forms (1-800-468-0031) 1570

UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
RESEARCH AND SPECIAL PROGRAMS ADMINISTRATION

HAZARDOUS MATERIALS
CERTIFICATE OF REGISTRATION

DG
GW
NV
RW

Registrant: T CHEM PRODUCTS INC.
Attn: Don Thurmond
9028 Dice Rd.
Santa Fe Springs, CA 90670

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of Section 106(c)(1) of the Hazardous Materials Transportation Act, 49 App. U.S.C. 1801, et. seq. It is unlawful to alter or falsify this document.

Reg. No: 061197 004 010F Issued: 06/13/97 Expires: 06/30/98

Recordkeeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration

(1) A copy of the registration statement filed with RSPA; and
(2) This Certificate of Registration.

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U.S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made avialable, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, DHM-60 Research and Special Programs Administration, U.S. Department of Transportation, 400 Seventh Street, SW, Washington, DC 20590, telephone (202)366-4109.

T·CHEM
PRODUCTS, INC.

September 14, 1994

PERMITS

PARTIES	TERM
Air Quality Management (Permit)	01/03/95 – 01/16/96. ~~01/16/94-01/16/95~~ ~~01/03/94 – 01/16/96~~
Calif. State Board of Equalization (Seller's Permit)	06/92 ✓
City of Santa Fe Springs (Storage of Hazardous Chemicals - 2 Permits)	12/12/77-04/27/77 ✓
City of Santa Fe Springs (Fire and Industrial Waste Permits)	01/25/95 – 04/25/96 ~~07/01/94-12/31/94~~ ~~01/01/95 – 12/31/95~~
County of Los Angeles (Public Health License - Hazardous Waste Control)	~~07/01/94-04/30/95~~ ✓ 09/16/94 – 06/30/95
Dept. of Public Works (Underground Storage Tank Permit)	~~12/12/93-12/11/94~~ Tank Removed 6/15/95
OCC Safety/Health (Permit to Operate Steam Boiler) 2 – permits	08/23/94 – 08/23/95 ~~05/11/94-05/11/95~~
OCC Safety/Health Permit to Operate Air Pressure Tank)	03/30/94-03/30/1999 ✓
Sanitation District (Wastewater Treatment)	08/15/94 ~~in~~ Compliance

Attachments

9028 Dice Road, Santa Fe Springs, CA 90670 • (310) 946-6427 FAX: (310) 941-9780

South Coast
AIR QUALITY MANAGEMENT DISTRICT
21865 E. Copley Drive, Diamond Bar, CA 91765-4182 (909) 396-2000

FEBRUARY 01, 1994

RECEIVED
FEB 8 1994
T-CHEM PRODUCTS
FRONT OFFICE

ID - 092873
T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS CA 90670

OFFICIAL DOCUMENT

ACKNOWLEDGMENT OF ANNUAL OPERATING PERMIT FEE PAYMENT

Dear Permit Holder:

This letter is official acknowledgment of your annual operating permit fee payment for the Permit(s) to Operate listed on the enclosed attachment. A Facility Permit shall serve as a comprehensive Permit to Operate for all equipment at a Regional Clean Air Incentives Market (RECLAIM) facility.

For the holder of a Permit to Operate, pursuant to District Rule 203(b), equipment shall not be operated contrary to the conditions specified in the permit to operate. A Facility Permit holder shall, pursuant to District Rule 2004(f), at all times comply with all applicable District rules and shall comply with all permit conditions as specified in the Facility Permit.

You may consider the Permit(s) to Operate listed on the enclosed attachment renewed; the permit expiration date is stated on the attachment.

If you have any questions about this payment acknowledgment letter, please call Customer Service at (909) 396-2900.

Sincerely,

James M. Lents, Ph.D.
Executive Officer

Attachment

South Coast
AIR QUALITY MANAGEMENT DISTRICT
21865 E. Copley Drive, Diamond Bar, CA 91765-4182 (909) 396-2000

FEBRUARY 01, 1994

ID - 092873
T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS CA 90670

PERMIT RENEWALS

PERMIT NUMBER	DESCRIPTION	APPLIC NUMBER	EXPIRATION DATE
D60668	STORAGE TANK MISC INORGANIC CHEMICALS	272042	01/16/95
D60669	STORAGE TANK MISC INORGANIC CHEMICALS	272043	01/16/95
D60670	BLEACH PACKAGING	272044	01/16/95
D60671	STORAGE TANK SODA ASH	272045	01/16/95
D60672	STORAGE TANK MISC INORGANIC CHEMICALS	272046	01/16/95
D60673	STORAGE TANK MISC INORGANIC CHEMICALS	272047	01/16/95
D60674	STORAGE TANK MISC INORGANIC CHEMICALS	272048	01/16/95
D60675	DETERGENTS AND CLEAN COMPOUNDS BLENDING	272049	01/16/95
D60734	SCRUBBER, OTHER VENTING S.S.	272050	01/16/95
D60676	STORAGE TANK MISC INORGANIC CHEMICALS	272051	01/16/95
D60678	BAGHOUSE, AMBIENT TEMP (>500 SQ FT)	272053	01/16/95
D60680	STORAGE TANK MISC INORGANIC CHEMICALS	272056	01/16/95
D75054	DETERGENTS AND CLEAN COMPOUNDS BLENDING	276821	01/16/95

CALIFORNIA STATE BOARD OF EQUALIZATION

SELLER'S PERMIT

THIS PERMIT DOES NOT AUTHORIZE THE HOLDER TO ENGAGE IN ANY BUSINESS CONTRARY TO LAWS REGULATING THAT BUSINESS OR TO POSSESS OR OPERATE ANY ILLEGAL DEVICE.

ACCOUNT NUMBER

06/92 SR AD 24-950995

T-CHEM PRODUCTS, INC
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

IS HEREBY AUTHORIZED PURSUANT TO SALES AND USE TAX LAW TO ENGAGE IN THE BUSINESS OF SELLING TANGIBLE PERSONAL PROPERTY AT THE ABOVE LOCATION

THIS PERMIT IS VALID UNTIL REVOKED OR CANCELLED BUT IS NOT TRANSFERABLE. IF YOU SELL YOUR BUSINESS, OR DROP OUT OF A PARTNERSHIP, NOTIFY US OR YOU COULD BE RESPONSIBLE FOR SALES AND USE TAXES OWED BY THE NEW OPERATOR OF THE BUSINESS.

Not valid at any other address

BT-442-R Rev. 10 (6-90)

DISPLAY CONSPICUOUSLY AT THE PLACE OF BUSINESS FOR WHICH ISSUED 90 89982

Fire Department
CITY OF SANTA FE SPRINGS
PERMIT

For Keeping, Storage, Use, Manufacture, Handling, Transportation, or Other Disposition of Highly Inflammable, Combustible, or Explosive Materials, as stated below:

NO. 2399 — APRIL 27, 1977 (Date)

TO WHOM IT MAY CONCERN:

By virtue of the provisions of the Fire Prevention Regulations of the City of Santa Fe Springs, California, T - CHEM (Name of Concern)

No. 9028 Street, DICE ROAD conducting a TYPE 22 (Business)

having made application in due form, and as the conditions, surroundings, and arrangements are, in my opinion, such that the intent of the Regulations can be observed, authority is hereby given and this PERMIT is GRANTED for

ONE (1) 12,000 GALLON CAPACITY UNDERGROUND DIESEL STORAGE TANK,
L.A.F.D. 72-60-6, MANUFACTURED BY KEE SEE.

This PERMIT is issued and accepted on condition that all Regulations now adopted, or that may hereafter be adopted, shall be complied with.

This permit does not take the place of any license required by law and is not transferable. Any change in the use or occupancy of premises shall require a new permit.

BERNARD T. CANNARD, Chief of Fire Department
BY: HARRY A. GREEN, FIRE SAFETY INSPECTOR

THIS PERMIT MUST AT ALL TIMES BE KEPT POSTED ON THE PREMISES MENTIONED ABOVE

FORM 082

Fire Department
CITY OF SANTA FE SPRINGS
PERMIT

For Keeping, Storage, Use, Manufacture, Handling, Transportation, or Other Disposition of Highly Inflammable, Combustible, or Explosive Materials, as stated below:

NO. 2501 — DECEMBER 12, 1977 (Date)

TO WHOM IT MAY CONCERN:

By virtue of the provisions of the Fire Prevention Regulations of the City of Santa Fe Springs, California, T-CHEM PRODUCTS (Name of Concern)

No. 9028 Street, DICE ROAD conducting a TYPE 26 (Business)

having made application in due form, and as the conditions, surroundings, and arrangements are, in my opinion, such that the intent of the Regulations can be observed, authority is hereby given and this PERMIT is GRANTED for

STORAGE AND USE OF HAZARDOUS CHEMICALS (Sodium Hydroxide - 10,000 gallons 50%,
20,000 gallons 20%, 25,000 gallons 5.5%; Amonium Hydroxide - 21,000 gallons 5%,
7,000 gallons 29%; Liquid Chlorine - 1 tank car).

This PERMIT is issued and accepted on condition that all Regulations now adopted, or that may hereafter be adopted, shall be complied with.

This permit does not take the place of any license required by law and is not transferable. Any change in the use or occupancy of premises shall require a new permit.

Diana Jimenez
BERNARD T. CANNARD, Chief of Fire Department
BY: DIANA JIMENEZ, FIRE INSPECTOR

THIS PERMIT MUST AT ALL TIMES BE KEPT POSTED ON THE PREMISES MENTIONED ABOVE

FORM 082

SANTA FE SPRINGS FIRE DEPARTMENT

FIRE AND ENVIRONMENTAL PROTECTION BUREAU
11300 GREENSTONE AVE., SANTA FE SPRINGS, CA 90670
(310) 944-9713

FIRE AND INDUSTRIAL WASTE PERMIT FEES

TO:
T-CHEM PRODUCTS
9028 DICE
SANTA FE SPRINGS CA 90670

FOR FACILITY LOCATED AT:
9028 DICE

ACCOUNT NUMBER	FEE PERIOD	DATE ISSUED	DATE DUE
00000423	FROM 07/01/94 TO 12/31/94	07/01/94	08/01/94

CODE	ACTIVITIES	PERMIT NUMBER	FEE
	*** FIRE PERMITS ***		
PC.8	CHEMICAL MANUFACTURING/PROCESS		800.00
PF.3	FLAM/COMB LIQUIDS AND TANKS		.00
PH.1	HAZARDOUS MATERIALS		.00
	*** INDUSTRIAL WASTE PERMITS ***		
011.6	CHEMICAL PLANTS	5140	313.00
	*** RAIN DIVERSION SYSTEM ***		
	RDS FEE		78.00

For Department Use Only

FEE PAID _____ CHECK NUMBER _____ REMARKS
PENALTY _____ DATED _____ _____
TOTAL PAID _____ _____ _____

MAKE CHECKS PAYABLE TO THE CITY OF SANTA FE SPRINGS

TOTAL PAYMENT DUE 1,191.00

A 10%/MO PENALTY WILL BE ASSESSED FOR "TOTAL FEE(S)" NOT RECEIVED BY 08/01/94

CUSTOMER COPY

COUNTY OF LOS ANGELES

DISPLAY THIS RECORD

TO AVOID A PENALTY - PAYMENTS SHOULD BE MAILED WITH THIS NOTICE NOT LATER THAN 30 DAYS FROM DATE OF ISSUE
MAKE CHECKS PAYABLE AND MAIL TO: L.A. COUNTY TREASURER TAX COLLECTOR
P.O. Box 54978
Los Angeles, CA. 90054-0978

ISSUE DATE 07-01-94

ANNUAL BILL NOTICE OF PUBLIC HEALTH LICENSE FEE DUE

CURRENT FEE DUE $ 488.00

THURMAND DON G., MANAGER
T-CHEM PRODUCTS
9028 DICE RD
SANTA FE SPRING CA 90670

PAY THIS AMOUNT $ 488.00

TYPE OF BUSINESS HAZARDOUS WASTE CTRL (20-100)

SIC-NO SIC 2842

LOCATION 9028 DICE RD SFS 90670

ENTERED AUG 3 0 1994

017083

1010 508346 JUL 13
940930

There will be a $12 00 service charge for any check returned by the bank for any reason. Additional penalties may apply and your license may be cancelled.

IF ANY OF THE ABOVE INFORMATION IS INCORRECT, PLEASE COMPLETE THE REVERSE SIDE AND RETURN THE FORM TO US. IF YOU HAVE ANY QUESTIONS PLEASE CALL (213) 881-4108.

T-CHEM PRODUCTS
9028 S DICE RD
SANTA FE SPRINGS, CA 90670

HAZARDOUS MATERIAL UNDERGROUND STORAGE PERMIT FEE
FOR PERMIT PERIOD: 12/12/93 THROUGH 12/11/94

PERMIT NO: P00001935T
FILE NO: 004353 004511
AREA: 1H
DATE: 10/28/93

12/31/93

PERMITTEE MAILING ADDRESS: T-CHEM PRODUCTS
9028 S DICE RD
SANTA FE SPRINGS, CA 90670

RETURN TO: LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
CASHIER UNIT
P. O. BOX 1460
ALHAMBRA, CA 91802

ENTERED NOV 12 1993

MAKE CHECK PAYABLE TO: L.A. COUNTY DEPARTMENT OF PUBLIC WORKS

****
* AMOUNT DUE: $128.00 *
* DUE DATE: 01/12/94 *
****

NUMBER OF PERMITTED TANKS: 1

FEE TYPE	FEE DESCRIPTION	BALANCE FORWARD	ANNUAL FEE	AMOUNT OWING	
1	ANNUAL PERMIT FEE		$128.00	$128.00	
	TOTALS		$128.00	$128.00	DUE DATE: 01/12/94

PAYMENTS MUST BE RECEIVED BY 02/12/94. FEE SUBJECT TO A 10% PENALTY FOR EVERY 30 DAYS DELIQUENT PAST THE DUE DATE. PERMITS DELINQUENT 90 DAYS PAST THE DUE DATE ARE SUBJECT TO SUSPENSION.

REFER ALL INQUIRES TO: L.A. COUNTY DEPARTMENT OF PUBLIC WORKS (818) 458-3517
* RETAIN THIS PORTION FOR YOUR RECORDS *

FORM S-159-B (REV. 8-91)

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

P.O. BOX 420603 • SAN FRANCISCO 94142

INVOICE No. B 24127 SF

PERMIT TO OPERATE STEAM BOILER

T-CHEM PRODUCTS
9028 Dice Road
Santa Fe Springs, CA 90670

BOILER NO. 27774-85
NB#31937

NR INSPECTED BY J. W. Peelle

Owner or User	Location of Boiler
Same	N. Side 9028 Dice Rd., Sta Fe Springs

Date of Inspection	Date of Invoice
5-11-94	5-27-94

Inspection Fee	$
Permit Processing Fee	$ 15.00
Total	$

This Permit to Operate shall be kept conspicuously posted under glass on or near the tank or at a convenient location near the tank and shall be made available to any authorized person.

This Permit expires one year from date of inspection.

PAID

DIVISION OF OCCUPATIONAL

This is to Certify that the above described Steam Boiler has been inspected and may be operated at a pressure not to exceed 125 pounds per square inch.

Inspection Agency:

Div. of Occupational Safety & Health

KemperNational

(Other)

A 22917 SF

4-29-94

FORM S-608-(REV. 4-82)

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
PRESSURE VESSEL UNIT
P.O. BOX 603, SAN FRANCISCO, CA 94101

Permit to Operate Air Pressure Tank

TANK NO. 21756-56
NB NO. 462

T-CHEM PRODUCTS INC.
9028 DICE RD
SANTA FE SPRINGS, CA 90670

NR

Owner or User	Location of Tank
SAME	TANK FARM 9028 DICE RD, SANTA FE SPRINGS

This Permit to Operate shall be kept conspicuously posted under glass on or near the tank or at a convenient location near the tank, and shall be made available to any authorized person.

This Permit expires

☐ three years from date of inspection
☒ five years from date of inspection

Labor Code, Division 5, Part 6

PAID
MAY 13 1994
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

MARCH 30, 1994
DATE OF INSPECTION

THIS IS TO CERTIFY *that the above described Air Pressure Tank has been inspected by the Division of Industrial Safety and may be operated at a pressure not to exceed* 125 *pounds per square inch.*

NAME OF INSPECTOR: J. PEELLE

EMPLOYED BY: KEMPER GROUP
(NAME OF INSPECTION AGENCY)

88 48267

COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY
1955 Workman Mill Rd., P. O. Box 4998, Whittier, California 90607-4998
Charles W. Carry, Chief Engineer and General Manager

SHORT FORM 1993-94

WASTEWATER TREATMENT SURCHARGE STATEMENT
For Fiscal Year July 1, 1993 to June 30, 1994

Claim that less than one million gallons of wastewater was discharged to the sewer during fiscal year 1993-94.

☐ Check here to make this claim, and fill in the exemption form on the back page of this form.

(This form may be used by only those companies discharging less than six million gallons of wastewater with average concentrations of COD and SS during fiscal year 1993-94).

7. COMPANY NAME: T-Chem Products, Inc.
8. COMPANY ADDRESS: 9028 Dice Rd, SFS, 90670
9. ADDRESS OF WASTEWATER DISCHARGE: Same

9028*DICE*RDSANTA*FE*SPRINGS*90670**
TO: 'T-CHEM PRODUCTS INC D
9028 DICE RD
SANTA FE SPRINGS CA 90670
18 1975174 8168/007/029

10. PROPERTY IDENTIFICATION: 0048 (Map Book No) 011 (Page No) 3+4 (Parcel No)

Return This Copy To The Sanitation Districts

11. FEDERAL STANDARD INDUSTRIAL CLASSIFICATION (SIC) NO(S). 2840, N/A, , ,

PLEASE RETURN THIS COPY WITH YOUR PAYMENT — DO NOT SEND CASH
USE THE PREVIOUS PAGE AS YOUR WORKSHEET

TOTAL YEARLY WASTEWATER QUANTITIES

12. DISCHARGE OUTLETS TO SEWER	No. 1	No. 2	No. 3	No. 4	
Sanitation Districts' Permit No.	Temporary	13623	N/A		
13. FLOW VOLUME, (In millions of gallons to two decimal places) (NOTE: Sanitary flow should not be included in this figure — See Table 2B)	.99	[illegible]	[illegible]	[illegible]	13a .99

DETAILS OF WASTEWATER DETERMINATIONS

14. METHOD OF FLOW VOLUME DETERMINATION (Submit copies of water bills if metered or adjusted metered water supply method is used.)
☐ Direct measurement ☒ Metered water supply (Fill in Tables 2A and 2B) ☐ Adjusted metered water supply (Fill in Tables 2A and 2B)

15. SOURCE OF WATER SUPPLY ☐ Water well ☒ Water purveyor — Name CITY OF S.F.S. WATER UTILITY

CALCULATION OF WASTEWATER TREATMENT SURCHARGE PAYABLE

16. FLOW VOLUME CHARGE (Multiply Line 13a by $1.62700) ..... 16a $ 1 6 10 [illegible]
17. NUMBER OF DISCHARGE DAYS PER YEAR 17a 286
(NOTE: This figure should match that used to calculate Line 7 of Table 2B)
18. AVERAGE NUMBER OF EMPLOYEES PER DISCHARGE DAY NOT CONTRIBUTING TO THE REPORTED FLOW VOLUME ON LINE 13a 18a 135
(NOTE: This figure should match that used to calculate Line 7 of Table 2B)
19. SANITARY FLOW CHARGE (Multiply Line 17a by Line 18a by $0.016) ..... 19a $ 6.17 [illegible]
20. TOTAL WASTEWATER TREATMENT SURCHARGE PAYABLE (The sum of Lines 16a and 19a) ..... 20a $ 2228 [illegible]

CERTIFIED CORRECT BY COMPANY ADMINISTRATIVE OFFICER
I hereby certify under the penalty of perjury that this statement and supporting data are complete and correct.

21. SIGNATURE Greg J Wiese 22. DATE (Mo) (Day) (Year)
23. PRINT NAME and POSITION GREG WIESE, EXEC. VICE PRES.
24. PREPARED BY SCOTT CHANCELLOR
25. TELEPHONE NO OF DISCHARGER (Include Area Code) 310-946-6427

Please enclose a check in the full amount shown on Line 20a. Make the check payable to the County Sanitation Districts of Los Angeles County.

Please use the pre-addressed envelope for return. For more information call the Industrial Waste Section at: (310) 699 7411 or (213) 685 5217, ext 2600.
Please pay by August 15, 1994, to avoid penalty and interest penalty charges

AUG August 15, 1994
Postmarked August 15, 1994

City of Santa Fe Springs
Fire Protection Division - Environmental Protection Division
11300 Greenstone Avenue, Santa Fe Springs, CA 90670-4619
(562) 944-9713 FAX (562) 941-1817 fire@santafesprings.org

Fire Department CUPA Permit

Mailing Address:

KIK INTERNATIONAL SO-CAL INC.
9028 DICE
SANTA FE SPRINGS CA 90670

This permit is issued and accepted on condition that all provisions of the CUPA, Uniform Fire Code, and/or any other regulations of the City of Santa Fe Springs as now adopted, or as may hereafter be adopted shall be complied with. Any violation of these provisions may be grounds for revocation of this permit. Permit is only valid if attached conditions and limitations are met. Compliance with CUPA provisions does not ensure compliance with Uniform Fire Code conditions.

FACILITY ID NO: 600091

Permit Issue Date: 01/01/2004

Site Address:

Permit Expiration Date: 03/01/2005

9028 DICE , SANTA FE SPRINGS, CA 90670

THIS PERMIT MUST BE POSTED AT ALL TIMES - PERMITTED PROGRAMS ARE MARKED WITH A CHECK

- ☑ Hazardous Materials Business Plan
- ☑ Hazardous Waste Generator
- ☐ Tiered Permit
- ☐ Underground Storage Tanks
- ☑ Accidental Release Prevention Program
- ☐ Aboveground Petroleum Storage Tanks
- ☑ Industrial Waste Permit
- ☑ Rain Water Diversion System
- ☑ Uniform Fire Code Permit

This permit does not take the place of any license required by law and is not transferable Any changes in the use or occupancy of premises shall require a new permit.

NEAL WELLAND
Name

FIRE CHIEF
Title

PERMIT CONDITIONS

If your facility is subject to any of the following programs, the program specific conditions apply as well as conditions adopted in Local Ordinance 907. For specific conditions regarding these programs, please contract the Environmental Protection Division of the Santa Fe Springs Fire Department. Compliance with the following specific program requirements does not ensure compliance with any additional codes which may be applicable.

HAZARDOUS MATERIALS BUSINESS PLAN PROGRAM

Businesses shall meet all requirements for the Hazardous Materials Business Plan as identified in the California Health and Safety Code, Chapter 6.95 (commencing with §25500), the California Code of Regulations, Title 19 (commencing with §2729), and the Uniform Fire Code, Part IX, Appendix II-E. Applies to facilities which store or handle hazardous materials in quantities equal to or greater than 55 gallons, 500 pounds, 200 cubic feet, or Regulated Substances in quantities equal to or greater than their Threshold Planning Quantity.

HAZARDOUS WASTE GENERATOR PROGRAM

Businesses shall meet all requirements for the generation of hazardous waste as described in the California Health and Safety Code, Chapter 6.5 (commencing with §25100) and the California Code of Regulations, Title 22, Division 4.5. Applies to facilities that generate any quantity of a hazardous waste. Requirements include waste determination, accumulation time, labeling requirements, container management, documentation of disposal records, contingency plan and hazardous waste personnel training documentation.

ACCIDENTAL RELEASE PREVENTION PROGRAM (ARP/RMP)

Business shall meet all the requirements of the accidental release prevention program as identified in the California Health and Safety Code, Chapter 6.95 (commencing with §25531) and the California Code of Regulations, Title 19, Division 2, Chapter 4.5. Facilities subject to this program shall complete the Regulated Substances Registration Form in the Santa Fe Springs Consolidated Forms Package. Applies to facilities that handle or store greater than or equal to the Threshold Planning Quantity of a Regulated Substance in a single process.

INDUSTRIAL WASTE PROGRAM

Businesses shall meet all applicable industrial waste requirements in Chapter 97 of the City Code. The City Code adopts, by reference, for matters pertaining to industrial waste, Los Angeles County Code, Title 20, Division 2, entitled "Sanitary Sewers and Industrial Waste," as amended on July 27, 1989. Applies to facilities that generate and/or discharge significant quantities of wastewater of non-human origin.

ONSITE HAZARDOUS WASTE TREATMENT PROGRAM (TIERED PERMITTING)

Businesses shall meet all requirements for the treatment of hazardous waste onsite as described in the California Health and Safety Code, Chapter 6.5 (commencing with §25200) and the California Code of Regulations, Title 22, Division 4.5. Applies to most facilities that treat any quantity of a hazardous waste on site.

UNIFORM FIRE CODE

Businesses shall meet all applicable requirements in the Uniform Fire Code. Specifically, Articles 79 and 80 deal with flammable and combustible liquids, and hazardous materials. Other articles in the code may be applicable as well.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to

DEPT OF TOXIC SUBSTANCES
1001 I STREET, 8TH FLOOR
SACRAMENTO CA
95812-0806

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X WEBB, J. ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

JUL 2 2004

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7002 2410 0001 7703 7001

PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$
Certified Fee	
Return Reciept Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6/30/04

Postmark Here

Sent To TRI Data Processing Center
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7002 2410 0001 7703 6998

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$
Certified Fee	
Return Reciept Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6/30/04

Postmark Here

Sent To Dept of Toxic Substance
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7002 2410 0001 7703 7001

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TRI DATA PROCESSING
8400 CORPORATE DRIVE
STE 300
LANDOVER, MD
20785-2294

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
JUL 07 2004

D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No
8400 CORPORATE DRIVE
SUITE 300
NEW CARROLLTON, MD 20785

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser

PS Form 3811, Au

Certified Mail Provides:
- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:
- Certified Mail may ONLY be combined with First-Class Mail® or Priority Mail®.
- Certified Mail is *not* available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement *"Restricted Delivery"*.
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry. Internet access to delivery information is not available on mail addressed to APOs and FPOs.

PS Form 3800, June 2002 (Reverse)
102595-02-M-1692

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

KIK INTERNATIONAL SOCAL
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

Derrell

426 22

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

KIK INTERNATIONAL SOCAL
9028 DICE ROAD
SANTA FE SPRINGS, CA 90670

Derrell

21

Certified Mail Provides:
- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:
- Certified Mail may ONLY be combined with First-Class Mail® or Priority Mail®
- Certified Mail is *not* available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement *"Restricted Delivery"*.
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry. Internet access to delivery information is not available on mail addressed to APOs and FPOs.

PS Form 3800, June 2002 (Reverse)
102595-02-M-1692

File Copy -- DO NOT Submit to EPA

United States Environmental Protection Agency

FORM R

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Ammonia

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P O Box 1513, Lanham, MD 20703-1513 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2003

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2 2, Attach substantiation forms) [X] NO (Do not answer 2 2, Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report

Name and official title of owner/operator or senior management official	Signature	Date Signed
Bob Brown General Manager		06/30/2004

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name	TRI Facility ID Number	Facility or Establishment Name or Mailing Address (if different from street address)
KIK-SoCal Inc	90670TCHMP9028D	
Street: 9028 Dice Road	Mailing Address: NA	
City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670	City/State/Zip Code	Country (Non-US)

4.2 This report contains information for (Important check a or b, check c or d if applicable) a [X] An entire facility b. [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

4.3	Technical Contact Name	Derrell Johnson				Telephone Number (include area code) (562) 946-6427	
	Email Address	NA					
4.4	Public Contact Name	United States Compliance Corp				Telephone Number (include area code) (952) 252-3000	
4.5	SIC Code (s) (4 digits)	Primary a. 2841	b.	c.	d.	e.	f.

		Degrees	Minutes	Seconds		Degrees	Minutes	Seconds
4.6	Latitude	33	57	26	Longitude	118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	**4.8** EPA Identification Number (RCRA I D No) (12 characters)	**4.9** Facility NPDES Permit Number(s) (9 characters)	**4.10** Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc	
5.2	Parent Company's Dun & Bradstreet Number	NA [X]		

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number: [illegible]

Toxic Chemical, Category or Generic Name: Ammonia

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

7664-41-7

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Ammonia

1.3 Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.)

NA

1.4 **Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.**
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
☐																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical.

- a. ☐ Produce b. ☐ Import
- If produce or import:
- c. ☐ For on-site use/processing
- d. ☐ For sale/distribution
- e. ☐ As a byproduct
- f. ☐ As an impurity

3.2 Process the toxic chemical.

- a. ☐ As a reactant
- b. ☒ As a formulation component
- c. ☐ As an article component
- d. ☐ Repackaging
- e. ☐ As an impurity

3.3 Otherwise use the toxic chemical

- a. ☐ As a chemical processing aid
- b. ☐ As a manufacturing aid
- c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 04 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA ☐	2	M	
5.2	Stack or point air emissions	NA ☐	98	M	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐ and indicate the Part II, Section 5.3 page number in this box ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

TRI Facility ID Number: 90670CHMIP9028S

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No)	NA						
Off-Site Location Name	NA						
Off-site Address							
City		State		County		Zip	Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 90707CHLRF9028D

Toxic Chemical, Category, or Generic Name: Ammonia

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3	3.
4.	4	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b: 1	A03	2	NA	3	4	5	6	7	8	7A.1c	7A.1d	7A.1e
A											02	0 01 %	Yes [X] No [ ]
7A.2a	7A.2b: 1		2		3	4	5	6	7	8	7A.2c	7A.2d	7A.2e
												%	Yes [ ] No [ ]
7A.3a	7A.3b: 1		2		3	4	5	6	7	8	7A.3c	7A.3d	7A.3e
												%	Yes [ ] No [ ]
7A.4a	7A.4b: 1		2		3	4	5	6	7	8	7A.4c	7A.4d	7A.4e
												%	Yes [ ] No [ ]
7A.5a	7A.5b: 1		2		3	4	5	6	7	8	7A.5c	7A.5d	7A.5e
												%	Yes [ ] No [ ]

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐ and indicate the Part II, Section 6.2/7A page number in this box: ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II CHEMICAL SPECIFIC INFORMATION CONTINUED

TRI Facility ID Number	
90276TCHM1902S	
Toxic Chemical, Category, or Generic Name	
Ammonia	

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1	R99	2		3		4		5	
6		7		8		9		10	

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	382	100	90	90
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	6410	8203	7383	7383
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	250	141	127	127
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with productionprocesses (pounds/year)	NA			
8.9	Production ratio or activity index	0.56			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8 11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box) — Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

EPA Copy -- Do Not Submit to EPA

United States Environmental Protection Agency

FORM R

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
Chlorine

WHERE TO SEND COMPLETED FORMS: 1 TRI Data Processing Center, P O Box 1513, Lanham, MD 20703-1513 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2003

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2 2, Attach substantiation forms) [X] NO (Do not answer 2 2, Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2 1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report.

Name and official title of owner/operator or senior management official	Signature	Date Signed
Bob Brown General Manager		06/30/2004

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 90670TCHMP9028D

Facility or Establishment Name	Facility or Establishment Name or Mailing Address (if different from street address)
KIK-SoCal Inc	
Street: 9028 Dice Road	Mailing Address: NA
City/County/State/Zip Code: Sante Fe Springs Los Angeles CA 90670	City/State/Zip Code: Country (Non-US)

4.2 This report contains information for (Important check a or b, check c or d if applicable) a [X] An entire facility b [ ] Part of a facility c [ ] A Federal facility d [ ] GOCO

4.3	Technical Contact Name: Derrell Johnson		Telephone Number (include area code): (562) 946-6427
	Email Address: NA		
4.4	Public Contact Name: United States Compliance Corp		Telephone Number (include area code): (952) 252-3000

4.5 SIC Code (s) (4 digits)

Primary					
a. 2841	b.	c.	d.	e.	f.

4.6

Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
	33	57	26		118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I D No) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	KIK International, Inc	
5.2	Parent Company's Dun & Bradstreet Number	NA [X]		

File Copy - Do Not Submit to EPA

EPA FORM R

TRI Facility ID Number: [illegible]

Toxic Chemical, Category or Generic Name: Chlorine

PART II. CHEMICAL - SPECIFIC INFORMATION

SECTION 1. TOXIC CHEMICAL IDENTITY (Important. DO NOT complete this section if you completed Section 2 below)

1.1	CAS Number (Important Enter only one number exactly as it appears on the Section 313 list Enter category code if reporting a chemical category): 7782-50-5
1.2	Toxic Chemical or Chemical Category Name (Important Enter only one name exactly as it appears on the Section 313 list): Chlorine
1.3	Generic Chemical Name (Important Complete only if Part 1, Section 2 1 is checked "Yes" Generic Name must be structurally descriptive): NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0 01 and 100 Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA ☐																

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important Maximum of 70 characters, including numbers, letters, spaces, and punctuation): NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical.	3.2 Process the toxic chemical.	3.3 Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import		
If produce or import	a. ☒ As a reactant	a. ☐ As a chemical processing aid
c. ☐ For on-site use/processing	b. ☐ As a formulation component	b. ☐ As a manufacturing aid
d. ☐ For sale/distribution	c. ☐ As an article component	c. ☐ Ancillary or other use
e. ☐ As a byproduct	d. ☐ Repackaging	
f. ☐ As an impurity	e. ☐ As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 [05] (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA ☐	1	E	
5.2	Stack or point air emissions	NA ☐	0	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box ☐ and indicate the Part II, Section 5.3 page number in this box. ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

TRI Facility ID Number: 90270CHLIF9028J

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		N	A. Total Release (pounds/year*) (enter range code** or estimate)	B Basis of Estimate (enter code)
5.4.1	Underground Injection onsite	X		
5.4.2	Underground Injection onsite	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3A	RCRA Subtitle C Surface Impoundments	X		
5.5.3B	Other surface impoundments	X		
5.5.4	Other disposal		0	M

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B 1	POTW Name	NA					
	POTW Address						
	City		State		County	Zip	
6.1.B	POTW Name						
	POTW Address						
	City		State		County	Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No)	NA							
	Off-Site Location Name	NA							
	Off-site Address								
	City		State		County		Zip		Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R

PART II. CHEMICAL SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 60470CHLIF9028D

Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3	3.	3.
4.	4.	4.

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-site Address

City | State | County | Zip | Country (Non-

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e Based on Operating Data ?
7A.1a	7A.1b: 1 2 3 4 5 6 7 8	7A.1c	7A.1d	7A.1e
			%	Yes ☐ No ☐
7A.2a	7A.2b: 1 2 3 4 5 6 7 8	7A.2c	7A.2d	7A.2e
			%	Yes ☐ No ☐
7A.3a	7A.3b: 1 2 3 4 5 6 7 8	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b: 1 2 3 4 5 6 7 8	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b: 1 2 3 4 5 6 7 8	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box ☐

and indicate the Part II, Section 6.2/7A page number in this box: ☐ (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A= 1- 10 pounds, B= 11- 499 pounds, C= 500 - 999 pounds

File Copy - Do Not Submit to EPA

EPA FORM R
PART II. CHEMICAL SPECIFIC INFORMATION CONTINUED

TRI Facility ID Number: 30770CHMT902S
Toxic Chemical, Category, or Generic Name: Chlorine

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	1	1	1	1
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	*Quantity treated offsite*	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with productionprocesses (pounds/year)			NA	
8.9	Production ratio or activity index			0 98	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8 11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box) — Yes [ ] No [X]

*For Dioxin or Dioxin-like compounds, report in grams/year

Signature Certification for State Diskette Submission

KIK-SOCAL INC.
9028 DICE ROAD
SANTE FE SPRINGS, CA 90670
90670TCHMP9028D

June 22, 2004

Coordinator
Department of Toxic Substance Control
Attn Office of Environmental Information Management
1001 I Street, 8th Floor
Sacramento, CA 95812-0806

To Whom It May Concern

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK-SOCAL INC.

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990.

We are submitting a total of 2 chemical report(s) for our facility.

These 2 chemical report(s) are described below:

TRI Chemical or Chemical Category	Reporting Year	CAS Number	Report
Ammonia	2003	7664-41-7	Form R
Chlorine	2003	7782-50-5	Form R

Our technical point of contact is:

DERRELL JOHNSON
(562) 946-6427
NA

and is available should any questions or problems arise in the processing of this diskette.

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s).

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372.27(a) did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed or otherwise used in an amount not exceeding 1 million pounds during the reporting year

Sincerely,

BOB BROWN
GENERAL MANAGER

Enclosure· Diskette

90670TCHMP9028D
KIK-SOCAL INC

City of Santa Fe Springs
Fire Protection Division - Environmental Protection Division
11300 Greenstone Avenue, Santa Fe Springs, CA 90670-4619
(562) 944-9713 FAX (562) 941-1817 fire@santafesprings.org

Fire Department CUPA Permit

Mailing Address

KIK INTERNATIONAL SO-CAL INC.
9028 DICE
SANTA FE SPRINGS CA 90670

This permit is issued and accepted on condition that all provisions of the CUPA, Uniform Fire Code, and/or any other regulations of the City of Santa Fe Springs as now adopted, or as may hereafter be adopted shall be complied with Any violation of these provisions may be grounds for revocation of this permit. Permit is only valid if attached conditions and limitations are met Compliance with CUPA provisions does not ensure compliance with Uniform Fire Code conditions

FACILITY ID NO: 600091 Permit Issue Date: 01/01/2003

Site Address: Permit Expiration Date. 03/01/2004

9028 DICE , SANTA FE SPRINGS, CA 90670

THIS PERMIT MUST BE POSTED AT ALL TIMES - PERMITTED PROGRAMS ARE MARKED WITH A CHECK

- ☑ Hazardous Materials Business Plan
- ☑ Hazardous Waste Generator
- ☐ Tiered Permit
- ☐ Underground Storage Tanks
- ☑ Accidental Release Prevention Program
- ☐ Aboveground Petroleum Storage Tanks
- ☑ Industrial Waste Permit
- ☑ Rain Water Diversion System
- ☑ Uniform Fire Code Permit

This permit does not take the place of any license required by law and is not transferable. Any changes in the use or occupancy of premises shall require a new permit

NEAL WELLAND
Name

FIRE CHIEF
Title

UTAH DEPARTMENT of AGRICULTURE and FOOD
PO Box 146500
Salt Lake City, UT 84114-6500
(801) 538-7185

DJ
File
Nita

CERTIFICATE of REGISTRATION - PESTICIDE PRODUCTS

Supplier: 30000

Attn: GREG WIESE

T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS CA 90670-1807

The Utah Department of Agriculture & Food does hereby grant registration for these pesticide products. They shall be officially registered through June 30, 2001, unless cancelled for due cause prior to that date.

PESTICIDE PRODUCTS - 2001

No.	Brand Name
1	PURE BRIGHT INSTITUTIONAL SANITIZER (DISC 1) (11321-6)
2	RYKOFF SEXTON SERCO SER-CHLOR (DISC 1) (11321-6-11430)

7/13/2000

Utah Department of Agriculture & Food, State Pesticide Mgr.
Email: agmain.spierce@.state.ut.us

PROVISIONAL
HAZARDOUS MATERIALS UNDERGROUND STORAGE PERMIT
COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
WASTE MANAGEMENT DIVISION
2250 ALCAZAR STREET
LOS ANGELES, CALIFORNIA 90033

PERMIT NO. 1935

EXPIRATION DATE NOV 16 1987

PERMISSION IS HEREBY GRANTED UNDER LACC TITLE 11, DIVISION 4 TO:

004511-1H <<<<<<<< FILE NUMBER
<<<<<<<< PERMITTEE

T-CHEM PRODUCTS
09028 S DICE ROAD
SANTA FE SPRINGS CA 90670

<<<<<<<< FACILITY ADDRESS

RE: 09028 S DICE ROAD

TO STORE HAZARDOUS MATERIALS IN UNDERGROUND TANK(S) LOCATED AT THE FACILITY ABOVE.

NUMBER OF PERMITTED TANKS: 1

THIS PROVISIONAL PERMIT IS SUBJECT TO THE FOLLOWING REQUIREMENTS:

PART A — GENERAL CONDITIONS AND LIMITATIONS (ATTACHED).

PART B — AUTHORIZED HAZARDOUS MATERIAL STORAGE TANKS (ATTACHED).

PART C — SPECIFIC CONDITIONS AND LIMITATIONS:

1. THE PERMITTEE SHALL SUBMIT FOR APPROVAL AND IMPLEMENT A LEAK DETECTION PROGRAM (LDP) AND A TANK MONITORING PROGRAM (TMP) PREPARED IN ACCORDANCE WITH "UNDERGROUND STORAGE OF HAZARDOUS MATERIALS - GUIDELINES FOR EXISTING FACILITIES, OCTOBER 1986."

2. THE FOLLOWING TIME SCHEDULE SHALL APPLY TO SUBMITTALS REQUIRED BY THIS PROVISIONAL PERMIT:

   a. PERMIT FEE DUE BY (SEE INVOICE) To Be Billed

   b. TANK INTEGRITY TEST RESULTS DUE BY N/A

   c. PROPOSALS FOR LDP AND TMP DUE BY N/A

3. PERMIT EFFECTIVE DATE 12-12-85
   NOTE: THE EFFECTIVE DATE IS DETERMINED BY ORIGINAL DATE OF PERMIT APPLICATION.

PART D — SPECIAL CONDITIONS AND LIMITATIONS ATTACHED. YES [X] NO [ ]

This Provisional Permit is valid only for the continued operation of tanks providing suitable storage and expires six (6) months from the date of issue. Permittee has until the expiration date to complete an approved LDP and to install and be in compliance with an approved TMP. Upon full compliance with the approved LDP and TMP and all other conditions and limitations, this Provisional Permit will be replaced by a full term Operational Permit for the remainder of the unexpired five (5) year term from the effective date unless otherwise noted in Part D above.

T. A. TIDEMANSON
DIRECTOR OF PUBLIC WORKS

BY _____ MAY 15 1987
WASTE MANAGEMENT DIVISION

PP801 10/86

PART B — TANK DATA
HAZARDOUS MATERIALS UNDERGROUND STORAGE PERMIT NO. 1935

AUTHORIZED HAZARDOUS MATERIAL STORAGE TANKS

TANK NUMBER	CAPACITY (GALLONS)	CONTENTS
1	12,000	Diesel

PART D -- SPECIAL CONDITIONS AND LIMITATIONS
HAZARDOUS MATERIALS UNDERGROUND STORAGE PERMIT NO. 1935

1. Permittee shall provide certification by an authorized independent technician that the monitoring system is installed and operational before the expiration of this Provisional Permit. The technician shall be certified by the manufacturer of the monitoring system to install, calibrate, service and inspect the monitoring system.

2. Monitoring system installation shall comply with all local fire, building, mechanical and electrical code and permit requirements.

KIK-SoCal Inc.
SARA 2003

Product / Chemical Constituent	Maximum Storage (lbs.) / Percent of Chemical In Product	Average Storage (lbs.)	Annual Pounds Used
Acetylene (7.56 #/cuft)	22055.5 cuft	11310.5cuft	42411.6 cuft
Ammonia (Household) (8.18 #/g)	229,040	163,600	10,119,011
(1336-21-6) Ammonia	2.5%		252,975
Anti Freeze Summer Coolant (9.47 #/g)	521	313	947
(107-21-1) Ethanediol	95.0%		900
Aqua Ammonia (8.18 #/g) (l)	48,080	32,720	741,769
(7664-41-7) Ammonia	29.0%		215,113
	311/312: C		
Argon (0.103#/cu ft)(g)	3	3	0
Bleach & Ammonia Product Fragrances (8.73 #/g)	9,603 10,750 *311/312.F*	6,722	4,508
Carbon Dioxide (0.114#/cu ft)(g)	0	0	NA 0
Caustic Soda 50% (12.68 #/g) (l)	2,916,400 *311/312: A, C*	126,800	32,812,038
Caustic Potash 50% (12.1#/gal) (l)	145,200	96,800	334,780
Chlorine (12.24 #/g)	900,000	13,792,833	16,755,947
(7782-50-5) Chlorine	100.0%		16,755,947
	SARA 302. Chlorine *311/312: A,C,R,P*		
DGC WinSurf (Aqueous Synthetic Detere *MSDS Unavailable*	440 gal	N/A	N/A
Dyes *MSDS Unavailable*	25	N/A	N/A

Helium (s.g. .010)	300 cu.ft. *311/312: P*	N/A	N/A
Hydrogen Peroxide (9.98 #/g)	99,810 259,000 #	49,900	66,866
Multi Gear Oil API GL-S SAE 85 W150 *MSDS Unavailable*	330 gal	N/A	N/A
Nitrogen (0.0724#/cu ft)(g)	264	22	10,800
Oxygen (0.082 #/cu ft)(g)	61	29	103,448
Phosphoric Acid (13.2#/g)	94 726	594	55
Potassium Hypochlorite (9.60#/gal) (l)	57,600	19,200	523,487
Propane (0.095#/cu ft) (l)	1,731	1,039	69,804
(115-07-1) Propylene		1.0%	698
Rain Clean Type Fragrance (8.73#/g) (trade secret)	0	0	0
Soda Ash (21.1 #/g)	8,250 2,000	500	7,000
Sodium Hypochlorite 13% (9.6 #/g)	N/A *311/312.A,C*	N/A	29,628,969
Sodium Hypochlorite 10% (9.6 #/g)	N/A *311/312.A,C*	N/A	14,220,969
Sodium Hypochlorite 5% (9.6 #/g)	N/A *311/312:A,C*	N/A	78,845,078
Sodium Hypochlorite 3%, 6%, 7% (9.6 #/g)	N/A *311/312:A,C*	N/A	159,135,993
Sodium Hypochlorite TOTAL (9.6 #/g)	1,996,176 *311/312:A,C*	1,996,176	281,831,009
Styrene/Acrylic Emulsion Polymer	55 *311/312· A,C*	N/A	N/A

		21,000			
Surfonic N-102		100,200		41,750	0
(8.35 3/g)					
(9016-45-9)	Poly (Oxy-1,2-Ethnaediyl) ALPH		100.0%		0
Surfonic N-60 (Nonionic Surfactant-Alkyl		1100 gal		N/A	N/A
		311/312: A,C			
T-1010FS Hydrochloric Acid Solution		2,451		1,225	8,912
(11.14 #/g)					
(7647-01-0)	Hydrochloric Acid		100.0%		8,912
Versonal ® 120 Cleating Agent		1,185		592	3,000
(10.77 #/g)					
Versene 100		220 gal 76		N/A	N/A
(s.g. 1.31)		*311/312: A,C*			
#2 Diesel Oil		869		799	2,904
7.05 #/gal					
68476-30-2	No. 2 Fuel Oil		100%		2904
91-20-3	Napthalene		0.10%		0.00
191-24-2	Benzo(g,h,I)perylene		5.0E-6%		0.0001452
N590	Polycyclic Aromatic Compounds		0.001%		0.00
N458	Mercury Compounds		1.0E-7%		1.452E-13
313 By-products of Combustion				gallons used	412
N150	Dioxin-like compounds		3.22E-11 lb/gal		0.00
N458	Mercury		1.13E-07 lb/gal		0.00
191-24-2	Benzo(g,h,I)perylene		2.26E-09 lb/gal		0.00
N590	Polycyclic Aromatic Compounds		1.65E-08 lb/gal		0.00
N420	Lead		1.51E-06 lb/gal		0.00
		311/312: A, C, F			

KIK-SoCal Inc.
SARA 2002

Product / Chemical Constituent		Maximum Storage (lbs.) / Percent of Chemical In Product	Average Storage (lbs.)	Annual Pounds Used
Acetylene		22,056	11,311	42,412
(7.56 #/g)				
(74-86-2)	Acetylene	100.0%		42,412
Ammonia (Household)		229,040	163,600	1,237,045 9.4 ~~194,859,136~~
(8.18 #/g)				
(1336-21-6)	Ammonia	2.5%		4,871,478
Anti Freeze Summer Coolant		521	313	947
(9.47 #/g)				
(107-21-1)	Ethanediol	95.0%		900
Aqua Ammonia		49,069	32,720	745769 # ~~1,037,560~~
(8.18 #/g) (l)				215.113 #
(7664-41-7)	Ammonia	29.0%		300,892
		SARA 311/312: Chronic		
Argon		26	26	0
(0.103#/cu ft)(g)				
(7440-37-1)	Argon	100.0%		0
Bleach & Ammonia Product Fragr:		3,361	6,722	4,508
(8.73 #/g)				
(trade secret)				NA
		SARA 311/312: Acute, Fire		

Carbon Dioxide		0	0	0
(0.114#/cu ft)(g)				
(124-38-9)	Carbon Dioxide	100.0%		0
Caustic Soda 50%		253,680	126,800	32,814,038 ~~39,008,856~~
(12.68 #/g) (l)				
(1310-73-2)	Sodium Hydroxide	50.0%		19,504,428

SARA 311/312: Acute, Chronic

Caustic Potash 50%		145,200	96,800	334,780 0
(12.1#/gal) (l)				
7732-18-5	Potassium Hydroxide	50.0%		
Chlorine		177,336,426	13,792,833	16,755,947 ~~16,558,800~~
(12.24 #/g)				16,755,947
(7782-50-5)	Chlorine	100.0%		~~16,558,800~~

SARA 302: Chlorine
SARA 311/312: Acute, Chronic, Pressure, Reactive

Hydrogen Peroxide		99,810	49,900	66,866
(9.98 #/g)				
(7722-84-1)	Hydrogen Peroxide	50.0%		33,433
Nitrogen		264	22	10,800
(0.0724#/cu ft)(g)				
(7727-37-9)	Nitrogen	100.0%		10,800
Oxygen		51,526	24,140	103,448
(0.082 #/cu ft)(g)				
(7782-44-7)	Oxygen	100.0%		103,448

Phosphoric Acid		55		45	55
(13.2#/g)					
(7664-38-2)	Phosphoric Acid		75.0%		41
Potassium Hypochlorite		57,600		19,200	~~0~~ 523,487 #
(9.60#/gal) (l)					
(7778-66-7)	Potassium Hypochlorite		15.0%		0
Propane		580,968		348,944	69,804
(0.095#/cu (l)					
(74-98-6)	Propane		97.0%		67,710
(74-84-0)	Ethane		1.0%		698
(115-07-1)	Propylene		1.0%		698
(106-97-8)	Butane		1.0%		698
Rain Clean Type Fragrance		0		0	0
(8.73#/g)					
(trade secret)					
Soda Ash		2,000		500	7,000
(21.1 #/g)					
(497-19-8)	Sodium Carbonate		99.8%		6,986
Sodium Hypochlorite		1,996,176		1,996,176	~~123,526,435~~
(9.6 #/g)					3,086,537 g.a
(7681-52-9)	Sodium Hypochlorite		13.0%		~~16,058,437~~
(1310-73-2)	Sodium Hydroxide		0.5% — 8,213,029 GA		~~617,632~~
"			10% — 1,451,351 gA		
	SARA 311/312: Acute, Chronic				
"			7,0, 6.0 + 3.0% — 16,576,666 gA		
Surfonic N-102		58,415		41,750	0
(8.35 3/g)					
(9016-45-9)	Poly (Oxy-1,2-Ethnaediyl) ALPH		100.0%		0

T-1010FS Hydrochloric Acid Soluti (11.14 #/g)		2,451		1,225	8,912
(7647-01-0)	Hydrochloric Acid		100.0%		8,912
Versonal ® 120 Cleating Agent (10.77 #/g)		1,181		592	3,000
(139-89-9)	Trisodium		38.0%		1,140
(62099-15-4)	Disodium		2.0%		60
(1310-73-2)	Trisodium nitrilotriacetate		1.0%		30
(2836-32-0)	Sodium hydroxide		2.0%		60
(7732-18-5)	Sodium glycolate		56.0%		1,680

#2 Diesel Fuel		799		799	2,904
7.05 #/gal					
68476-30-2	No. 2 Fuel Oil	100%			2904
91-20-3	Napthalene	0.10%			0.00
191-24-2	Benzo(g,h,I)perylene	5.0E-6%			0.0001452
N590	Polycyclic Aromatic Compounds	0.001%			0.00
N458	Mercury Compounds	1.0E-7%			1.452E-13
313 By-products of Combustion				gallons used	412
N150	Dioxin-like compounds	3.22E-11	lb/gal		0.00
N458	Mercury	1.13E-07	lb/gal		0.00
191-24-2	Benzo(g,h,I)perylene	2.26E-09	lb/gal		0.00
N590	Polycyclic Aromatic Compounds	1.65E-08	lb/gal		0.00
N420	Lead	1.51E-06	lb/gal		0.00

SARA 311/312: Acute, Chronic, Fire

Confirmation Report - Memory Send

Time : 09-19-02 07:00am
Tel line : 5629419780
Name : KIK INTERNATIONAL SOCAL

Job number	:	752
Date	:	09-19 06:58am
To	:	18185512809
Document pages	:	03
Start time	:	09-19 06:58am
End time	:	09-19 07:00am
Pages sent	:	03
Status	:	OK

Job number : 752 *** SEND SUCCESSFUL ***

9028 Dice Road
Santa Fe Springs, CA 90670
(562) 946-6427, Fax # (562) 941-9780

KIK INTERNATIONAL SO-CAL

Fax

To: Joanna Rykiel From: Dennis Cabrera
Fax: 1-818-551-2809 Pages: 3
Phone: 818-551-2904 Date: 9/18/02
Re: Claim for Shortage Manifest # 2173565 CC:

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• Comments:

This was the amount that was short for Rokya on the manifest by Cecilia Green 9/06/02. I believe you may all ready have a copy with them in however if you need please call me at ph # 562-906-2240 - ext 562-906-2240 & Marcella will page me. - TX

9028 Dice Road
Santa Fe Springs, CA 90670
(562) 946-6427, Fax # (562) 941-9780

KIK INTERNATIONAL SO-CAL

Fax

To: Joanna Rykiff **From:** Dennis Johnson

Fax: 1-818-551-2809 **Pages:** 3

Phone: 818-551-2904 **Date:** 9/18/02

Re: Clarifier Sludge MANIFEST # 2195168 **CC:**

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• **Comments:**

This was the manifest that was used for Pickup on the incident - w/ Circle Green - 9/06/02 - I believe you may already have a copy with often more However if you needed please Call me AT plant # 562-906-2240 - ext 562-906-2240 6 Marcella will page me - TX

DL

CERTIFICATE OF TREATMENT/RECYCLING

PRESENTED TO

KIK SO CAL INT.

Manifest No: 21195168 **Date: 09/06/01**

The waste stream(s) received on the above manifest has been treated/handled to standards mandated by the applicable federal and/or state regulations. Waste treatment is performed under permits granted to D/K ENVIRONMENTAL, a California corporation, by the California EPA in coordination with the U.S. Environmental Protection Agency, in the accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations.

When the above described material is accepted by D/K ENVIRONMENTAL, the responsibility for the material becomes that of D/K ENVIRONMENTAL for the treatment/recycling.

Issued By

D/K ENVIRONMENTAL

Signed: Joseph F. Kaufman **Date: 09/14/01**

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

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No. 9 2 8 2 2 | 2. Page 1 of 1 | Pw 8/948

GENERATOR

3. Generator's Name and Mailing Address
KIK SOCAL INC.
9028 DICE RD. SANTA FE SPRINGS, CA 90670

4. Generator's Phone (562) 946-6427

5. Transporter 1 Company Name	6 US EPA ID Number	A Transporter's Phone
CIRCLE GREEN ENVIRONMENTAL		(626)398-4400
7. Transporter 2 Company Name	8 US EPA ID Number	B Transporter's Phone
WESTERN ENVIRONMENTAL		(626)339-2340
9. Designated Facility Name and Site Address D/K ENVIRONMENTAL 3650 E.26TH ST. LOS ANGELES, CA 90023	10 US EPA ID Number	C Facility's Phone (323)268-5056

11. Waste Shipping Name and Description	12. Containers No.	Type	13 Total Quantity	14 Unit Wt/Vol
a. NON-HAZARDOUS WASTE, LIQUID	001	TT	02800	G
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above
11.A CLARIFIER WASTEWATER AND SLUDGE

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE OSHA APPROVED SAFETY PRECAUTIONS

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name	Signature	Month	Day	Year
Richard Cohnson		7	06	01

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Lani Enisio		07	06	01

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Matt Guerrero		07	06	01

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year

Printed by J.J. KELLER & ASSOCIATES, INC
Neenah, WI 54957-0368

GENERATOR'S COPY

KIK INTERNATIONAL SOCAL INC. ANNUAL SARA 313 EMISSIONS REPORT
FOR: 2000

AQUA AMMONIA

PRODUCT DESCRIPTION	ANNUAL VOLUME(CS)	ANNUAL VOLUME(GL)	AVG PROD PER HR	ANNUAL PROD /HR
12/28 oz Ammonia	93,778	246,167	300	312.5933
12/32 oz Ammonia	2,569	7,707	300	8.5633
9/56oz Ammonia	138,164	544,020	300	460.5466
8/64 oz Ammonia	221,831	887,324	400	554.5775
6/128 oz Ammonia	46,512	279,072	600	77.5200
TOTALS	502,854	1,964,290		1423.8007
10% Reportable	**50,285**	**196,429**		**142.3800**
Pounds received (from PO log)		2,060,280		
10% Reportable		**206,028**		

CALCULATIONS

STACK EMISSIONS: 30PPM X 0.00147 X 142.3800 X 60= 376.7374 lbs/yr

FUGITIVE EMISSIONS: 80ppm MONITORED In 25 sq ft.:
(2 x 5280x(5x5) x80 ppm/359x17lbs/mole)=1 lb NH3/hr

ASSUME TANK OFFLOAD IS 1 HR:
1 X 1 hr x 50 = 50 (5 0)lbs

QUANTITY RELEASED **381.7374** lbs/yr

QUANTITY RECYCLED: Ammonia Purchased: 206,028 x 0.3 = 61,808 lbs/yr
Ammonia Production: 196,429 x 8.2 x 0.03 = 48,322 lbs/yr

Quantity Recycled on Site 61,808 - 48,322 + 483 = 13,969 lbs/yr

QUANITY TREATED ON-SITE: 0.01 LOSS FACTOR
48322 x 0.01 = 483 lbs/yr

PRODUCTION RATIO: 2,086,830 / 1,964,290 = .9412

FOR CALCULATION OF 2001 & 2002 WILL USE 3%INCREASE AND 2002 & 2003 3% Increase

KIK INTERNATIONAL SOCAL, INC. ANNUAL SARA 313 EMISSIONS REPORT
FOR: 2000

CHLORINE

PRODUCT DESCRIPTION		ANNUAL VOLUME(CS)	ANNUAL VOLUME(GA)	AVG PROD PER/HR	ANNUAL PROD./HR
BULK 14%	BLEACH	670 Loads	3,348,905	1	670.0000
2/2.5 Gal	BLEACH	41,865	209,325	252	1661.1309
5/ 15/30 & 55 Gal	BLEACH	185,996	1,711,751	252	738.0793
2/174 Oz	BLEACH	260,779	708,993	600	434.6316
12/32 Oz	BLEACH	6,822	20,466	350	19.4914
8/48 Oz	BLEACH	63,412	190,236	450	140.9155
8/64 Oz	BLEACH	89,400	357,600	450	198.6666
6/56 Oz	BLEACH	1,267,379	5,703,205	750	1689.8386
6/128 Oz	BLEACH	2,107,315	12,458,760	750	2809.7533
TOTAL			24,709,241		8362.5072

PRODUCTION TOTAL	1999	2000
	24,396,745	24,709,241

Pounds Received: No. of Railcars: 90 (App 180000#/Railcar)

CALCULATIONS:

FUGITIVE EMISSIONS: 90 Rail Cars x .015 = **1.35** lbs/yr

PRODUCTION RATIO: 24,396,745 / 24,709,241 = 1.01

FOR CALCULATION OF 2001 & 2002 USE 3% INCREASE

ANNUAL SARA 313 EMISSIONS REPORT PRODUCTS FOR 2000						11xls.rev6/13/01dj		
				AMMONIA				
SIZE		12/28 oz	12/32oz	9/56 oz	8/64 oz	6/128oz		
2000 TOTAL CASES		93,778	2,569	138,164	221,831	46,512		
				BLEACH				
SIZE	5.25% Bulk	Bulk	2/174 oz	12/32oz	8/48oz	8/64oz	6/96oz	Behr128oz
TOTAL Cs	559,833	2,789,072	260,779	6,822	63,412	89,400	1,267,379	30,855
SIZE	Behr2/2.5	6/128oz	2/2.5 Gal	5 Gal	15 Ga	30 Ga	5% 52 Gal.	10% 55 Gal
2000Total	4,731	2,076,460	37,134	166,651	5,800	5,360	1,825	6,360
				2000 VOLUME'S				
Product	Volume (Cs)	Volume(ga)		Volume	Volume(gal)		No. Contnrs	Volume(Gal)
Ammonia			Bleach			Bleach		
12/28oz	93,778	246,167	Bulk 5.25%	112 Loads	559,833	2/2.5 Behr	4,731	23655
12/32oz	2,569	7,707	Bulk 14%	558 Loads	2,789,072	2/2.5 gal	37,134	185,670
9/56oz	138,164	544,020	2/174oz	260,779	708,993	5 Gal	166,651	833,255
8/64oz	221,831	887,324	12/32oz	6,822	20,466	15 Gal.	5,800	87,000
6/128oz	46,512	279,072	8/48oz	63,412	190,236	30 Gal	5,360	160,800
			8/64oz	89,400	357,600	5% 52 Gal	1,825	94,900
			6/56oz	1,267,379	5,703,205	10% 55 Gal	6,360	349,800
			6/128oz Bh	30,855	185,130			
			6/128oz	2,076,460	12,458,760			
Total GAL.		1,964,290			22,973,295			1,735,080

			KIK SOCAL TANK FARM RECEIVINGS				11xls.rev6/11/01dj	
			29% AQUA AMMONIA					
	POUNDS PER MONTH PER VENDOR AND TOTAL POUNDS RECEIVED							
				2000				
VENDOR	JAN.	FEB.	MAR.	APR.	MAY	JUN	TOTAL	G. TOTAL
HILL BROS.				73,210	72,150		145,360	
LAROCHE			36,780	37,020	37,250	36,060	147,110	
W STATES	74,080	37,090	73,830			147,160	332,160	
PVS	37,620	108,800	75,830	74,330	37,060	73,600	407,240	
PFIC PIAZO								
TOTAL	**111,700**	**145,890**	**186,440**	**184,560**	**146,460**	**256,820**	**1,031,870**	**1,031,870**
VENDOR	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.		
HILL BROS								
LAROCHE	74,050		35,760				109,810	
W.STATES	36,750	143,710	73,830	110,840	111,470	148,440	625,040	
PVS	36,640	36,520	111,440	37,340	35,340		257,280	
PFIC PIAZO						36,280	36,280	
TOTAL	**147,440**	**180,230**	**221,030**	**148,180**	**146,810**	**184,720**	**1,028,410**	**1,028,410**
2000 GRAND TOTAL								**2,060,280**
Loads		2,060,280/8.35= 246,740 G/5000G=49.34 loads-round off to 50						**50**
				2000				
				CHLORINE				
VENDOR	JAN.	FEB.	MAR.	APR.	MAY	JUN.	TOTAL	G. TOTAL
ElfAtoChem	898,800	1,258,900	1,808,600	899,000	1,080,800	1,618,900	7,565,000	
PIONEER								
P.C.A.	180,000						180,000	
O. METALL	170,700						170,700	
ARENOT						168,400	168400	
DOW								
VULCAN								
TOTAL	**1,249,500**	**1,258,900**	**1,808,600**	**899,000**	**1,080,800**	**1,787,300**	**8,084,100**	**8,084,100**
RAILCARS	7	7	10	5	6	10	**45**	
VENDOR	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.		
ElfAtoChem	866,540	1,616,000	1,793,300	717,300	1,440,100	1,251,200	7,684,440	
VULCAN	179,500						179,500	
ARENOT	172,900						172,900	
TOTAL	**1,218,940**	**1,616,000**	**1,793,300**	**717,300**	**1,440,100**	**1,251,200**	**8,036,840**	**8,036,840**
RAILCARS	7	9	10	4	8	7	**45**	
2000 GRAND TOTAL								**16,120,940**
RAILCARS								**90**

EPCRA Reporting Center
P.O. Box 3348
Merrifield, VA 22116 - 3348
Attn: Toxic Chemical Release Inventory
Magnetic Media Submission

KIK INTERNATIONAL SOCAL
9028 DICE RD
SANTA FE SPRINGS
CA 906702520
TRI Fac. ID: 90670-TCHMP-9028D
06/18/2001

To Whom It May Concern

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

KIK INTERNATIONAL SOCAL

This information is submitted as required under Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990.

We are submitting a total of **2** Chemical Report(s) for our facility
These **2** chemical report(s) are described below

Chemical Name	Report Year	CAS Number	Report Type
CHLORINE	2000	7782505	5-page Form R
AMMONIA	2000	7664417	5-page Form R

Our technical point of contact is

DERRELL JOHNSON Phone Number. **562-906-2240**

and is available if any questions or problems arise in your processing of these diskettes

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Sincerely,

GREG WIESE
GENERAL MANAGER

EPA FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

United States Environmental Protection Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1. EPCRA Reporting Center, P O Box 3348, Merrifield, VA 22116-3348, ATTN TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2000

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized
(Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report

Name and official title of owner/operator or senior management official	Signature	Date Signed:
GREG WIESE GENERAL MANAGER		06/27/2001

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name	TRI Facility ID Number	Facility or Establishment Name or Mailing Address(if different from street address)
KIK INTERNATIONAL SOCAL	90670TCHMP9028D	NA

Street	Mailing Address
9028 DICE RD	

City/County/State/Zip Code	City/State/Zip Code	Country (Non-US)
SANTA FE SPRINGS LOS ANGELES CA 90670-2520		

4.2 This report contains information for. (Important : check a or b; check c or d if applicable)
a. [X] An entire facility b. [ ] Part of a facility c. [ ] A Federal facility d. [ ] GOCO

4.3	Technical Contact Name: DERRELL JOHNSON	Telephone Number (include area code): 562-906-2240
4.4	Public Contact Name: GREG WIESE	Telephone Number (include area code): (562) 946-6427

4.5 SIC Code (s) (4 digits)

Primary					
a. 2841	b.	c.	d.	e.	f.

4.6

Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
	33	57	26		118	03	56

4.7 Dun & Bradstreet Number(s) (9 digits)	**4.8** EPA Identification Number (RCRA I D No) (12 characters)	**4.9** Facility NPDES Permit Number(s) (9 characters)	**4.10** Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a. 051482784	a. CAD051482784	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [X]	
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
CHLORINE

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

7782505

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

CHLORINE

1.3 Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive.)

NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA [X]																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:

a. [ ] Produce b. [ ] Import

If produce or import.

c. [ ] For on-site use/processing
d. [ ] For sale/distribution
e. [ ] As a byproduct
f. [ ] As an impurity

3.2 Process the toxic chemical:

a. [X] As a reactant
b. [ ] As a formulation component
c. [ ] As an article component
d. [ ] Repackaging
e. [ ] As an impurity

3.3 Otherwise use the toxic chemical

a. [ ] As a chemical processing aid
b. [ ] As a manufacturing aid
c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 05 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA [ ]	A	M	
5.2	Stack or point air emissions	NA [X]	NA		
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1 - 10 pounds, B= 11 - 499 pounds; C= 500 - 999 pounds

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
CHLORINE

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X	NA	
5.4.2	Underground Injection onsite to Class II-V Wells	X	NA	
5.5	Disposal to land onsite			
5.5.1A	RCRA Subtitle C landfills	X	NA	
5.5.1B	Other landfills	X	NA	
5.5.2	Land treatment/application farming	X	NA	
5.5.3	Surface Impoundment	X	NA	
5.5.4	Other disposal	X	NA	

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B.1	POTW Name	NA					
POTW Address							
City		State		County		Zip	-
6.1.B.2	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box 1 **and indicate the Part II, Section 6.1 page number in this box** 1 **(example: 1,2,3. etc.)**

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 Off-Site EPA Identification Number (RCRA ID No)	NA
Off-Site Location Name	NA
Off-Site Address	
	Country

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A = 1 - 10 pounds, B = 11 - 499 pounds; C = 500 - 999 pounds

EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)	TRI Facility ID Number 90670TCHMP9028D Toxic Chemical, Category or Generic Name CHLORINE

City		State		County		Zip		(Non-US)	

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A = 1 - 10 pounds, B = 11 - 499 pounds, C = 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
CHLORINE

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-Site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☒ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a. General Waste Stream (enter code)	b Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c Range of Influent Concentration	d Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b: 1 2 3 4 5 6 7 8	7A.1c	7A.1d	7A.1e
NA			%	Yes ☐ No ☐
7A.2a	7A.2b: 1 2 3 4 5 6 7 8	7A.2c	7A.2d	7A.2e
			%	Yes ☐ No ☐
7A.3a	7A.3b: 1 2 3 4 5 6 7 8	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b: 1 2 3 4 5 6 7 8	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b: 1 2 3 4 5 6 7 8	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box: 1

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A = 1 - 10 pounds, B = 11 - 499 pounds; C = 500 - 999 pounds

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
CHLORINE

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 NA | 2 | 3 | 4

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1. NA | 2. | 3. | 4. | 5.

6. | 7. | 8. | 9. | 10.

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	2	2	2	2
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	0	0	0	0
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	0	0	0	0
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			0	
8.9	Production ratio or activity index			0000001 01	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10.1 and answer Section 8 11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one box) — YES [ ] NO [X]

* For Dioxin or Dioxin-like compounds, report in grams/year

*** Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment " Do not include any quantity treated onsite

EPA
United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1 EPCRA Reporting Center, P O Box 3348, Merrifield, VA 22116-3348, ATTN TOXIC CHEMICAL RELEASE INVENTORY; 2 APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2000

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2, Go to Section 3)	2.2	Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official.	Signature.	Date Signed
GREG WIESE GENERAL MANAGER		06/27/2001

SECTION 4. FACILITY IDENTIFICATION

4.1		TRI Facility ID Number	90670TCHMP9028D
Facility or Establishment Name	KIK INTERNATIONAL SOCAL	Facility or Establishment Name or Mailing Address(if different from street address)	NA
Street	9028 DICE RD	Mailing Address	
City/County/State/Zip Code	SANTA FE SPRINGS LOS ANGELES CA 90670-2520	City/State/Zip Code / Country (Non-US)	

4.2	This report contains information for (Important check a or b; check c or d if applicable)	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility	d. [ ] GOCO		
4.3	Technical Contact Name	DERRELL JOHNSON				Telephone Number (include area code)	562-906-2240
4.4	Public Contact Name	GREG WIESE				Telephone Number (include area code)	(562) 946-6427
4.5	SIC Code (s) (4 digits)	Primary a. 2841	b.	c.	d.	e.	f.

		Degrees	Minutes	Seconds		Degrees	Minutes	Seconds
4.6	Latitude / Longitude	33	57	26		118	03	56

4.7	Dun & Bradstreet Number(s) (9 digits)	4.8	EPA Identification Number (RCRA I D. No) (12 characters)	4.9	Facility NPDES Permit Number(s) (9 characters)	4.10	Underground Injection Well Code (UIC) I D Number(s) (12 digits)
a.	051482784	a.	CAD051482784	a.	NA	a.	NA
b.		b.		b.		b.	

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [X]	
5.2	Parent Company's Dun & Bradstreet Number	NA [X]	

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
AMMONIA

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

7664417

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

AMMONIA

1.3 Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive.)

NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100% If you do not have speciation data available, indicate NA.)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA [X]																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:

- a. [ ] Produce
- b. [ ] Import

If produce or import:

- c. [ ] For on-site use/processing
- d. [ ] For sale/distribution
- e. [ ] As a byproduct
- f. [ ] As an impurity

3.2 Process the toxic chemical:

- a. [ ] As a reactant
- b. [X] As a formulation component
- c. [ ] As an article component
- d. [ ] Repackaging
- e. [ ] As an impurity

3.3 Otherwise use the toxic chemical:

- a. [ ] As a chemical processing aid
- b. [ ] As a manufacturing aid
- c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 04 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA [ ]	B	M	
5.2	Stack or point air emissions	NA [ ]	377	M	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1 - 10 pounds; B= 11 - 499 pounds, C= 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
AMMONIA

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X	NA	
5.4.2	Underground Injection onsite to Class II-V Wells	X	NA	
5.5	Disposal to land onsite			
5.5.1A	RCRA Subtitle C landfills	X	NA	
5.5.1B	Other landfills	X	NA	
5.5.2	Land treatment/application farming	X	NA	
5.5.3	Surface Impoundment	X	NA	
5.5.4	Other disposal	X	NA	

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B.1	POTW Name	NA					
POTW Address							
City		State		County		Zip	-
6.1.B.2	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [1] **and indicate the Part II, Section 6.1 page number in this box** [1] **(example: 1,2,3, etc.)**

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 Off-Site EPA Identification Number (RCRA ID No.)	NA
Off-Site Location Name	NA
Off-Site Address	

								Country

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds

EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)	TRI Facility ID Number 90670TCHMP9028D Toxic Chemical, Category or Generic Name AMMONIA

City		State		County		Zip		(Non-US)	

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A = 1 - 10 pounds, B = 11 - 499 pounds; C = 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
AMMONIA

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. NA	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-Site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b: 1 A03, 2 NA, 3, 4, 5, 6, 7, 8	7A.1c	7A.1d	7A.1e
W		2	0.01 %	Yes X / No
7A.2a	7A.2b: 1, 2, 3, 4, 5, 6, 7, 8	7A.2c	7A.2d	7A.2e
			%	Yes / No
7A.3a	7A.3b: 1, 2, 3, 4, 5, 6, 7, 8	7A.3c	7A.3d	7A.3e
			%	Yes / No
7A.4a	7A.4b: 1, 2, 3, 4, 5, 6, 7, 8	7A.4c	7A.4d	7A.4e
			%	Yes / No
7A.5a	7A.5b: 1, 2, 3, 4, 5, 6, 7, 8	7A.5c	7A.5d	7A.5e
			%	Yes / No

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box: 1

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes A = 1 - 10 pounds, B = 11 - 499 pounds, C = 500 - 999 pounds

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
90670TCHMP9028D
Toxic Chemical, Category or Generic Name
AMMONIA

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 NA | 2 | 3 | 4

SECTION 7C. ON-SITE RECYCLING PROCESSES

[ ] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category

Recycling Methods [enter 3-character code(s)]

1. R99 | 2. | 3. | 4. | 5.

6. | 7. | 8. | 9. | 10.

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	459	382	400	412
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	8758	13969	14388	14819
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	513	483	497	512
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			0	
8.9	Production ratio or activity index			0000000 94	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8 10 1 and answer Section 8.11

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one box) — YES [ ] NO [X]

* For Dioxin or Dioxin-like compounds, report in grams/year

*** Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment " Do not include any quantity treated onsite

KIK INTERNATIONAL SOCAL, INC. ANNUAL SARA 313 EMISSIONS REPORT
FOR: 2000

CHLORINE

PRODUCT DESCRIPTION		ANNUAL VOLUME(CS)	ANNUAL VOLUME(GA)	AVG PROD PER/HR	ANNUAL PROD./HR
BULK 14%	BLEACH	670 Loads	3,348,905	1	670.0000
2/2.5 Gal	BLEACH	41,865	209,325	252	1661.1309
5/ 15/30 & 55 Gal	BLEACH	185,996	1,711,751	252	738.0793
2/174 Oz	BLEACH	260,779	708,993	600	434.6316
12/32 Oz	BLEACH	6,822	20,466	350	19.4914
8/48 Oz	BLEACH	63,412	190,236	450	140.9155
8/64 Oz	BLEACH	89,400	357,600	450	198.6666
6/56 Oz	BLEACH	1,267,379	5,703,205	750	1689.8386
6/128 Oz	BLEACH	2,107,315	12,458,760	750	2809.7533
TOTAL			24,709,241		8362.5072

PRODUCTION TOTAL	1999	2000
	24,396,745	24,709,241

Pounds Received: No. of Railcars: 90 (App 180000#/Railcar)

CALCULATIONS:

FUGITIVE EMISSIONS. 90 Rail Cars x .015 = **1.35** lbs/yr

PRODUCTION RATIO: 24,396,745 / 24,709,241 = 1.01

FOR CALCULATION OF 2001 & 2002 USE 3% INCREASE

KIK INTERNATIONAL SOCAL INC. ANNUAL SARA 313 EMISSIONS REPORT
FOR: 2000

AQUA AMMONIA

PRODUCT DESCRIPTION	ANNUAL VOLUME(CS)	ANNUAL VOLUME(GL)	AVG PROD PER HR	ANNUAL PROD./HR
12/28 oz Ammonia	93,778	246,167	300	312.5933
12/32 oz Ammonia	2,569	7,707	300	8.5633
9/56oz Ammonia	138,164	544,020	300	460.5466
8/64 oz Ammonia	221,831	887,324	400	554.5775
6/128 oz Ammonia	46,512	279,072	600	77.5200
TOTALS	502,854	1,964,290		1423.8007
10% Reportable	**50,285**	**196,429**		**142.3800**
Pounds received (from PO log)		2,060,280		
10% Reportable		**206,028**		

CALCULATIONS

STACK EMISSIONS 30PPM X 0 00147 X 142.3800 X 60= 376.7374 lbs/yr

FUGITIVE EMISSIONS. 80ppm MONITORED In 25 sq. ft.:
(2 x 5280x(5x5) x80 ppm/359x17lbs/mole)=1 lb NH3/hr

ASSUME TANK OFFLOAD IS 1 HR
1 X 1 hr x 50 = 50 (5.0)lbs

QUANTITY RELEASED **381.7374** lbs/yr

QUANTITY RECYCLED. Ammonia Purchased. 206,028 x 0.3 = 61,808 lbs/yr
Ammonia Production: 196,429 x 8 2 x 0 03 = 48,322 lbs/yr

Quantity Recycled on Site 61,808 - 48,322 + 483 = 13,969 lbs/yr

QUANITY TREATED ON-SITE: 0.01 LOSS FACTOR
48322 x 0.01 = 483 lbs/yr

PRODUCTION RATIO. 2,086,830 / 1,964,290 = 9412

FOR CALCULATION OF 2001 & 2002 WILL USE 3%INCREASE AND 2002 & 2003 3% Increase

ANNUAL SARA 313 EMISSIONS REPORT PRODUCTS FOR 2000						11xls.rev6/13/01dj		
				AMMONIA				
SIZE		12/28 oz	12/32oz	9/56 oz	8/64 oz	6/128oz		
2000 TOTAL CASES		93,778	2,569	138,164	221,831	46,512		
				BLEACH				
SIZE	5.25% Bulk	Bulk	2/174 oz	12/32oz	8/48oz	8/64oz	6/96oz	Behr128oz
TOTAL Cs	559,833	2,789,072	260,779	6,822	63,412	89,400	1,267,379	30,855
SIZE	Behr2/2.5	6/128oz	2/2.5 Gal	5 Gal	15 Ga	30 Ga	5% 52 Gal.	10% 55 Gal
2000Total	4,731	2,076,460	37,134	166,651	5,800	5,360	1,825	6,360
				2000 VOLUME'S				
Product	Volume (Cs)	Volume(ga)		Volume	Volume(gal)		No. Contnrs	Volume(Gal)
Ammonia			Bleach			Bleach		
12/28oz	93,778	246,167	Bulk 5.25%	112 Loads	559,833	2/2.5 Behr	4,731	23655
12/32oz	2,569	7,707	Bulk 14%	558 Loads	2,789,072	2/2.5 gal	37,134	185,670
9/56oz	138,164	544,020	2/174oz	260,779	708,993	5 Gal	166,651	833,255
8/64oz	221,831	887,324	12/32oz	6,822	20,466	15 Gal.	5,800	87,000
6/128oz	46,512	279,072	8/48oz	63,412	190,236	30 Gal	5,360	160,800
			8/64oz	89,400	357,600	5% 52 Gal	1,825	94,900
			6/56oz	1,267,379	5,703,205	10% 55 Gal	6,360	349,800
			6/128oz Bh	30,855	185,130			
			6/128oz	2,076,460	12,458,760			
Total GAL.		1,964,290			22,973,295			1,735,080

			KIK SOCAL TANK FARM RECEIVINGS				11xls.rev6/11/01dj	
			29% AQUA AMMONIA					
	POUNDS PER MONTH PER VENDOR AND TOTAL POUNDS RECEIVED							
				2000				
VENDOR	**JAN.**	**FEB.**	**MAR.**	**APR.**	**MAY**	**JUN**	**TOTAL**	**G. TOTAL**
HILL BROS.				73,210	72,150		145,360	
LAROCHE			36,780	37,020	37,250	36,060	147,110	
W. STATES	74,080	37,090	73,830			147,160	332,160	
PVS	37,620	108,800	75,830	74,330	37,060	73,600	407,240	
PFIC PIAZO								
TOTAL	**111,700**	**145,890**	**186,440**	**184,560**	**146,460**	**256,820**	**1,031,870**	**1,031,870**
VENDOR	**JULY**	**AUG.**	**SEPT.**	**OCT.**	**NOV.**	**DEC.**		
HILL BROS								
LAROCHE	74,050		35,760				109,810	
W.STATES	36,750	143,710	73,830	110,840	111,470	148,440	625,040	
PVS	36,640	36,520	111,440	37,340	35,340		257,280	
PFIC PIAZO						36,280	36,280	
TOTAL	**147,440**	**180,230**	**221,030**	**148,180**	**146,810**	**184,720**	**1,028,410**	**1,028,410**
2000 GRAND TOTAL								**2,060,280**
Loads		2,060,280/8.35= 246,740 G/5000G=49.34 loads-round off to 50						**50**
				2000				
				CHLORINE				
VENDOR	**JAN.**	**FEB.**	**MAR.**	**APR.**	**MAY**	**JUN.**	**TOTAL**	**G. TOTAL**
ElfAtoChem	898,800	1,258,900	1,808,600	899,000	1,080,800	1,618,900	7,565,000	
PIONEER								
P.C.A.	180,000						180,000	
O. METALL	170,700						170,700	
ARENOT						168,400	168400	
DOW								
VULCAN								
TOTAL	**1,249,500**	**1,258,900**	**1,808,600**	**899,000**	**1,080,800**	**1,787,300**	**8,084,100**	**8,084,100**
RAILCARS	7	7	10	5	6	10	**45**	
VENDOR	**JULY**	**AUG.**	**SEPT.**	**OCT.**	**NOV.**	**DEC.**		
ElfAtoChem	866,540	1,616,000	1,793,300	717,300	1,440,100	1,251,200	7,684,440	
VULCAN	179,500						179,500	
ARENOT	172,900						172,900	
TOTAL	**1,218,940**	**1,616,000**	**1,793,300**	**717,300**	**1,440,100**	**1,251,200**	**8,036,840**	**8,036,840**
RAILCARS	7	9	10	4	8	7	**45**	
2000 GRAND TOTAL								**16,120,940**
RAILCARS								**90**

Fire Department
CITY OF SANTA FE SPRINGS

HEADQUARTERS FIRE STATION · (562) 944-9713 · FAX (562) 941-1817
11300 GREENSTONE AVE · SANTA FE SPRINGS 90670-4619

Dear Business Owner/Operator:

On July 1, 1997, the Santa Fe Springs Fire Department was designated a Certified Unified Program Agency (CUPA) by the State of California. Our Department applied for, and received this certification in response to the numerous concerns raised by our business community that there was too much duplication, and too many points of contact for environmental regulations. As a CUPA, our Department has combined into one program the following previously separate environmental programs:

- Hazardous Waste Generator
- Tiered Treatment Permits
- Underground Storage Tanks
- Aboveground Storage Tanks Spill Prevention Control and Countermeasure (SPCC)
- Hazardous Materials Business Plan
- California Accidental Release Prevention Program (CalARP)
- Industrial Waste Permits
- Stormwater Program
- portions of the Uniform Fire Code

In the past, State, County, and local agencies administered the above programs. The Santa Fe Springs Fire Department is now the "one stop shop" for all of these mandated programs.

In addition to combining oversight on these programs, the State is developing a package of standardized reporting forms. **As required by the State, all businesses must update existing information onto the new standardized forms.** These forms will be available in December, and will be mailed to all businesses in early 1999. To assist businesses in filling out the new forms, our Department will be offering several free workshops. Dates and times for the workshops will be included with the standardized forms.

Federal, State, and local requirements give underground storage tank owners and operators until December 22, 1998 to upgrade, replace, or close their underground tank systems. Upgrading, closing, or replacing your underground storage tank can take several months and the deadline is drawing near. Please do not wait to contact the Fire Department and secure the necessary permits to comply with the December 22, 1998 deadline.

The Santa Fe Springs Fire Department is committed to providing a high level of service to the community and believes the CUPA is a major element benefiting local businesses for environmental regulations.

If you have any questions regarding your bill, please call our office **before** the bill due date. An inspector from our office will respond to your location to help resolve the matter. We welcome your written suggestions of how we can improve our level of service to your business. Although we can not promise immediate changes, your input is extremely valuable to us, and all written comments will be recorded and reviewed by this office. Thank you for your support.

Sincerely,

NORBERT P. SCHNABEL
Fire Chief

David R. Klunk
Director of Environmental Protection

DRK/bc

FORM S-449 (REV. 3-93)

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
PRESSURE VESSEL UNIT
P.O. BOX 420603, SAN FRANCISCO, CA 94142

Permit to Operate Steam Boiler

JIM RISSMAN MAINTENANCE SUPERVISOR
T- CHEM PRODUCTS INC
9028 DICE RD
SANTA FFE SPRINGS CA 906702520

BOILER NO. 34155-94
National Board Number 44122

Owner or User	Location of Boiler
SAME	BOILER AREA

This Permit to Operate shall be kept conspicuously posted under glass on or near the boiler or at a convenient location [illegible] shall be made available to any authorized representative.

This Permit expires one year from date of inspection

[illegible] Code, Division 5, Part 6

9/1/98
DATE OF INSPECTION

THIS IS TO CERTIFY *that the above-designated Steam Boiler has been inspected by the Division of Industrial Safety and may be operated at a pressure not to exceed* 125 *pounds per square inch.*

NAME OF INSPECTOR: J. W. PEELLE

EMPLOYED BY: HSB I&I CO.
(NAME OF INSPECTION AGENCY)

94 85753

FORM S-449 (REV. 3-93)

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
PRESSURE VESSEL UNIT
P.O. BOX 420603, SAN FRANCISCO, CA 94142

Permit to Operate Steam Boiler

JIM RISSMAN MAINTENANCE SUPERVISOR
T- CHEM PRODUCTS INC
9028 DICE RD
SANTA FFE SPRINGS CA 906702520

BOILER NO. 34155-94
National Board Number 44122

Owner or User	Location of Boiler
SAME	BOILER AREA

This Permit to Operate shall be kept conspicuously posted under glass on or near the boiler or at a convenient location [illegible] shall be made available to any authorized person.

This Permit expires one year from date of inspection

[illegible] Code, Division 5, Part 6

9/1/98
DATE OF INSPECTION

THIS IS TO CERTIFY *that the above-designated Steam Boiler has been inspected by the Division of Industrial Safety and may be operated at a pressure not to exceed* 125 *pounds per square inch.*

NAME OF INSPECTOR: J. W. PEELLE

EMPLOYED BY: HSB I&I CO.
(NAME OF INSPECTION AGENCY)

94 85753

AQMD

SOUTH COAST AIR QUALTIY MANAGEMENT DISTRICT

ANNUAL OPERATING PERMIT FEES INVOICE

INVOICE NO. 819890

California Health and Safety Code Section 40510 and South Coast Air Quality Management District Rule 301 authorizes AQMD to charge permit fees on the equipment identified below.

EQUIPMENT LOCATED AT: 9028 DICE RD
SANTA FE SPRINGS, CA, 90670

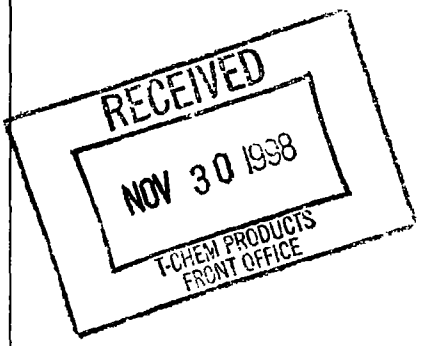
INVOICE DATE: 11/17/98

FACILITY ID: 92873

LEGAL OWNER OR OPERATOR:
T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS, CA, 90670

ORIGINAL INVOICE

TRANSACTION NUMBER	TRANSACTION DATE	REFERENCE NUMBER	DESCRIPTION	TRANSACTION AMOUNT	TRANSACTION BALANCE
5039372	11/17/98	F7083	BLEACH BLENDING	175.60	175.60
5039368	11/17/98	D60670	BLEACH PACKAGING	175.60	175.60
5039371	11/17/98	F5835	I C E (50-500 HP) EM ELEC GEN-DIESEL	175.60	175.60
5039366	11/17/98	D60668	STORAGE TANK MISC INORGANIC CHEMICALS	175.60	175.60
5039367	11/17/98	D60669	STORAGE TANK MISC INORGANIC CHEMICALS	175.60	175.60
5039369	11/17/98	D60676	STORAGE TANK MISC INORGANIC CHEMICALS	175.60	175.60
5039370	11/17/98	D60680	STORAGE TANK MISC INORGANIC CHEMICALS	175 60	175.60



REMARKS

PLEASE RETURN THE DUPLICATE COPY OF THIS INVOICE WITH YOUR REMITTANCE TO ENSURE PROPER CREDIT TO YOUR ACCOUNT RETURNED CHECKS MAY BE SUBJECT TO A $25.50 SERVICE CHARGE IF YOU HAVE ANY QUESTIONS, PLEASE CALL (909) 396-2900.

INVOICE TOTAL: $1229.20

If payment not received by **01/16/99** application/permit will be delinquent.
If payment not received by **02/16/99** application/permit will expire. Operation of equipment without a permit subjects owner or operator to misdemeanor or civil penalties for each day of operation.

Please return duplicate copy with remittance. Make check payable to South Coast A.Q.M.D.

For Information Call - (909) 396-2900

Mail Remittance to. P O Box 4943 Diamond Bar CA, 91765-0943

T-CHEM Products Inc. 9028 Dice Rd. Santa Fe Springs, Ca. 90670

1997 SCAQMD Air Emmisions Permits List

Reference/ Permit No.	Description	Expiration Date
D 60668	Storage Tank Misc. Inorganic C	01/16/99
D 60669	Storage Tank Misc. Inorganic C	01/16/99
D 60670	Bleach Packaging	01/16/99
D 60676	Storage Tank Misc. Inorganic C	01/16/99
D 60680	Storage Tank Misc. Inorganic C	01/16/99
F 5835	Emergency Backup Generator	01/16/99
F 7083	Household Bleach Manufacturing System	01/16/99

THIS HEALTH LICENSE MUST BE CONSPICUOUSLY DISPLAYED AT PLACE OF BUSINESS

76P861 (REV 11/92)

COUNTY OF LOS ANGELES

01970

PUBLIC HEALTH LICENSE

See Reverse Side

Issued to:

X THURMAND DON G., MANAGER
T-CHEM PRODUCTS
09028 DICE RD
SANTA FE SPRING CA 90670

1010 JUL
508346

EXPIRATION DATE
JUNE 30, 1995

SIC.NO.
SIC 2842
13

ISSUE DATE
SEPT 16, 1994

HAZARDOUS WASTE CTRL (20-100)

LOCATION OF BUSINESS BEING LICENSED

09028 DICE RD SFS 90670

COUNTY OF LOS ANGELES
By

LARRY J MONTEILH
COUNTY TAX COLLECTOR

ALAN T SASAKI
COUNTY AUDITOR

OWNERSHIP OF THIS LICENSE IS NOT TRANSFERABLE.

THIS HAZARDOUS WASTE LICENSE MUST BE CONSPICUOUSLY DISPLAYED AT PLACE OF BUSINESS

COUNTY OF LOS ANGELES

101
508346

HAZARDOUS WASTE LICENSE

See Reverse Side

LOCATION OF BUSINESS BEING LICENSED

09028 DICE RD SFS

Fiscal year 1996-97

EXPIRATION DATE
June 30, 1997

ISSUE DATE
March 6, 1997

THURMOND, DON G.(PRESIDENT)
T-CHEM PRODUCTS
9028 DICE RD
SANTA FE SPRINGS, CA 90670

P. MICHAEL FREEMAN
L.A. COUNTY FIRE CHIEF

THIS LICENSE IS NOT TRANSFERABLE. VOID UPON CHANGE IN OWNERSHIP OR LOCATION.

South Coast
Air Quality Management District

21865 E. Copley Drive, Diamond Bar, CA 91765-4182 (909) 396-2000

ON TANKS & PROCESS, Room

FEBRUARY 01, 1996

ID - 092873
T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS CA 90670

OFFICIAL DOCUMENT

ACKNOWLEDGMENT OF ANNUAL OPERATING PERMIT FEE PAYMENT

Dear Permit Holder:

This letter is official acknowledgment of your annual operating permit fee payment for the Permit(s) to Operate listed on the enclosed attachment. A Facility Permit shall serve as a comprehensive Permit to Operate for all equipment at a Regional Clean Air Incentives Market (RECLAIM) facility.

For the holder of a Permit to Operate, pursuant to District Rule 203(b), equipment shall not be operated contrary to the conditions specified in the permit to operate. A Facility Permit holder shall, pursuant to Air Quality Management District (AQMD) Rule 2004(f), at all times comply with all applicable District rules and shall comply with all permit conditions as specified in the Facility Permit.

You may consider the Permit(s) to Operate listed on the enclosed attachment renewed; the permit expiration date is stated on the attachment. Pursuant to AQMD Rule 206, a person granted a permit under Rule 202 or 203 shall not operate or use any equipment unless the entire permit to operate or a legible facsimile of the entire permit is affixed upon the equipment in such manner that the permit number, equipment description, and the specified operating conditions are clearly visible and accessible. In the event that the equipment is so constructed or operated that the permit to operate or a legible facsimile cannot be so placed, the entire permit to operate or the legible facsimile of the entire permit shall be mounted so as to be clearly visible in an accessible place within 8 meters (26 feet) of the equipment, or as otherwise approved in writing by AQMD's Executive Officer.

If you have any questions about this payment acknowledgment letter or if you need a copy of your Permit to Operate, please call Customer Service at (909) 396-2900.

South Coast
Air Quality Management District

21865 E. Copley Drive, Diamond Bar, CA 91765-4182 (909) 396-2000

FEBRUARY 01, 1996

ID - 092873
T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS CA 90670

PERMIT RENEWALS

PERMIT NUMBER	DESCRIPTION	APPLIC NUMBER	EXPIRATION DATE
D60668	STORAGE TANK MISC INORGANIC CHEMICALS	272042	01/16/97
D60669	STORAGE TANK MISC INORGANIC CHEMICALS	272043	01/16/97
D60670	BLEACH PACKAGING	272044	01/16/97
D60676	STORAGE TANK MISC INORGANIC CHEMICALS	272051	01/16/97
D60680	STORAGE TANK MISC INORGANIC CHEMICALS	272056	01/16/97

RE-ORDER FROM PIONEER BUSINESS FORMS, INC (310) 944-0611

T - CHEM PRODUCTS

Vendor No: SOUT10 / Name: South Coast Air Quality Mgmt. Dist. 8420 08420

Invoice	Ref	Inv Date	Inv Amt	Amt Paid	Discount	Adj Amt	Net Amt
0928731495	JAN ANNL	12/02/95	3463.47	796.65	0.00	0.00	796.65

(Acct 10015-001) Check Date = 01/19/96 Check Total 796.65

T - CHEM PRODUCTS
9028 DICE RD. P.O. BOX 3807
SANTA FE SPRINGS, CA 90670-1807

BANK OF AMERICA
CITY OF COMMERCE
5600 S EASTERN AVE
CITY OF COMMERCE, CA 90040
16-66-1222

08420
8420

***Seven Hundred Ninety-Six & 65/100 Dollars

DATE	AMOUNT
01/19/96	****796.65

PAY TO THE ORDER OF

South Coast Air Quality Mgmt. Dist.
P. O. Box 4943
Diamond Bar, CA 91765-0943

VOID AFTER 90 DAYS

FOIA ex 6, Personal Privacy

T-CHEM
PRODUCTS, INC.

January 17, 1996

South Coast Air Quality Management District
P. O. Box 4943
Diamond Bar, CA 91765-0943

Re: Permit #092873-14-95

Gentlemen:

This correspondence is intended to notify you of significant changes that have occurred in the operations at T-Chem. On or about December 15, 1994, T-chem sold off a major portion of its business and assets to an out of state competitor. As a result, T-Chem ceased operating all liquid and dry detergent manufacturing equipment.

Currently, T-Chem only produces chlorine based bleaches, household ammonia cleaners and fabric softeners. Therefore, we no longer own the equipment permitted as noted. In addition to the reduction of our annual permit fee, we were hoping that we would be entitled to a credit for prior year permit fees.

Sincerely,

Greg J Wiese

Greg Wiese
Executive V.P.

GW:pp
scaqmd gw

cc: Don Thurmond
Derrell Johnson

9028 Dice Road, Santa Fe Springs, CA 90670 • (310) 946-6427 FAX (310) 941-9780

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT

INVOICE

For Information Call - 909-396-2900
Mail Remittance To: P.O Box 4943 Diamond Bar Ca, 91765-0943

INVOICE NO. 092873-14-95

California Health and Safety Code Section 40510 and South Coast Air Quality Management District Rule 301 authorizes the District to charge permit fees on the equipment identified below.

EQUIPMENT LOCATED AT: 9028 DICE RD
SANTA FE SPRINGS CA 90670

INVOICE DATE 11/16/95

ANNUAL BILL MONTH JANUARY

LEGAL OWNER OR OPERATOR. CO. ID. 092873
T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS CA 90670

DUPLICATE COPY - RETURN WITH PAYMENT

TRANSACTION NUMBER	TRANSACTION DATE	REFERENCE NUMBER	DESCRIPTION	TRANSACTION AMOUNT	TRANSACTION BALANCE
			STORAGE TANK MISC INORGANIC C		
02535304	111695	D60668	ANNUAL BILLING	165.97	165.97
02535305	111695	D60668	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			STORAGE TANK MISC INORGANIC C		
02535306	111695	D60669	ANNUAL BILLING	165.97	165.97
02535307	111695	D60669	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			BLEACH PACKAGING		
02535308	111695	D60670	ANNUAL BILLING	165.97	165.97
02535309	111695	D60670	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			STORAGE TANK SODA ASH		
02535310	111695	D60671	ANNUAL BILLING	165.97	165.97
02535311	111695	D60671	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			STORAGE TANK MISC INORGANIC C		
02535312	111695	D60672	ANNUAL BILLING	165.97	165.97
02535313	111695	D60672	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			STORAGE TANK MISC INORGANIC C		
02535314	111695	D60673	ANNUAL BILLING	165.97	165.97
02535315	111695	D60673	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			STORAGE TANK MISC INORGANIC C		
02535316	111695	D60674	ANNUAL BILLING	165.97	165.97
02535317	111695	D60674	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			DETERGENTS AND CLEAN COMPOUND		
02535318	111695	D60675	ANNUAL BILLING	165.97	165.97
02535319	111695	D60675	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			STORAGE TANK MISC INORGANIC C		
02535320	111695	D60676	ANNUAL BILLING	165.97	165.97
02535321	111695	D60676	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			BAGHOUSE, AMBIENT TEMP (>500		
02535322	111695	D60678	ANNUAL BILLING	594.04	594.04
02535323	111695	D60678	FY9596 ANNUAL BILLING REBATE	23.76-	23.76-

EMARKS

If you are a new owner or operator of the equipment at this location, Pursuant to District Rules 203 and 209 you may need a new permit to operate. Before paying this invoice please call Customer Service at (909) 396-2900.

BALANCE NOW DUE

CONTINUED

If payment not received by application/permit will be delinquent.
If payment not received by application/permit will expire. Operation of equipment without a permit subjects owner or operator to misdemeanor or civil penalties for each day of operation.

Please return duplicate copy with remittance. "Make check payable to South Coast A.Q.M.D."

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT

INVOICE

For Information Call - 909-396-2900
Mail Remittance To: P.O. Box 4943 Diamond Bar Ca, 91765-0943

INVOICE NO.
092873-14-95

California Health and Safety Code Section 40510 and South Coast Air Quality Management District Rule 301 authorizes the District to charge permit fees on the equipment identified below.

EQUIPMENT LOCATED AT: 9028 DICE RD
SANTA FE SPRINGS CA 90670

INVOICE DATE 11/16/95

ANNUAL BILL MONTH
JANUARY

LEGAL OWNER OR OPERATOR: CO. ID. 092873
T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS CA 90670

DUPLICATE COPY - RETURN WITH PAYMENT

TRANSACTION NUMBER	TRANSACTION DATE	REFERENCE NUMBER	DESCRIPTION	TRANSACTION AMOUNT	TRANSACTION BALANCE
			STORAGE TANK MISC INORGANIC C		
02535324	111695	D60680	ANNUAL BILLING	165.97-	165.97-
02535325	111695	D60680	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			SCRUBBER, OTHER VENTING S.S.		
02535326	111695	D60734	ANNUAL BILLING	594.04	594.04
02535327	111695	D60734	FY9596 ANNUAL BILLING REBATE	23.76-	23.76-
			DETERGENTS AND CLEAN COMPOUND		
02535328	111695	D75054	ANNUAL BILLING	165.97	165.97
02535329	111695	D75054	FY9596 ANNUAL BILLING REBATE	6.64-	6.64-
			BAGHOUSE, AMBIENT TEMP (>500		
02535330	111695	D88030	ANNUAL BILLING	594.04	594.04
02535331	111695	D88030	FY9596 ANNUAL BILLING REBATE	23.76-	23.76-

or operator of the equipment at this location,
s 203 and 209 you may need a new permit to
this invoice please call Customer Service at (909) 396-2900.

BALANCE NOW DUE
$3,463.47

01/16/96 application/permit will be delinquent.
02/16/96 application/permit will expire. Operation of equipment without a operator to misdemeanor or civil penalties for each day of operation.

copy with remittance. "Make check payable to South Coast A.Q.M.D."

01417

EMERGENCY

BUSINESS

PLAN

1992

T-CHEM PRODUCTS *for the Home*

9028 DICE ROAD, P.O. BOX 3807
SANTA FE SPRINGS, CA 90670-1807

October 29, 1992

Mr. M. Benjamin
Department of Health Services
Hazardous Materials Control Program
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007

Re: *Notice of Violation and Order to Comply Dated October 11, 1992*

Dear Mr. Benjamin:

This is written confirmation that the required correction has been completed for all the items listed:

1. Disposal: The small release of chlorine was stopped on October 11, 1992 by evacuating flex connecting line.

2. Management: Enclosed is an updated hazardous materials contingency plan and employees training plan.

3. Other: The repair to the flex line was completed on October 11, 1992 before putting the system back in operation.

If you need any further information, please contact me.

Sincerely,

Don C. Thurmond
President

DCT/lc

cc: Greg Wiese

FACSIMILE: (213) 941-9780 TELEPHONE: (213) 946-6427

No. 010344

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

HAZARDOUS MATERIALS CONTROL PROGRAM

Owner DON THURMOND (PRESIDENT)
Business T-CHEM PRODUCTS
Address 9029 DICE ROAD
City, Zip Code SANTA FE SPRINGS CA 90670

Date 11 OCT 92
Refer Reply To: M. BENJAMIN
2615 South Grand Avenue, Room 607
Los Angeles, CA 90007
(213) ~~744-3222~~ 890-4317
(213) 748-1605 (FAX)

NOTICE OF VIOLATION AND ORDER TO COMPLY

The following conditions or practices observed at your facility are violations of the California Code of Regulations (CCR), Title 26, Division 22 or the California Health and Safety Code, Division 20, Chapter 6.5, (H&S) which relate to the storage, management, transportation, and disposal of hazardous waste. YOU ARE DIRECTED TO CORRECT THE VIOLATIONS WITHIN THE TIMES SPECIFIED BELOW.

CORRECTION DATE		
		DISPOSAL:
11 OCT 92	☒	1. Discontinue the disposal of hazardous waste to an unauthorized point(s) (H&S 25189.5) CHLORINE GAS RESULTING FROM LEAK IN THE FLEX LINE LINKING RAIL CAR TO PROCESSING OPERATION.
_____	☐	2. Legally dispose of all hazardous waste and contaminated materials (H&S 25189.5) _____ (☐ stored at/ ☐ discharged to) _____ (H&S 25189.5) & (H&S 25186.2)
		MANAGEMENT:
30 OCT 92	☒	3. Submit to this office a copy of your facility's hazardous materials contingency plan and employee training plan. (CCR 67105, 67120-67126, 67140-67145) TO REFLECT UPDATE WHERE APPLICABLE
		TRANSPORTATION:
_____	☐	4. Discontinue the transport of hazardous waste until the following have been met:
_____	☐	A. Obtain an EPA Identification Number from the State Department of Health Services at (916) 324-1781 (CCR 66472)
_____	☐	B. Complete a uniform Hazardous Waste Manifest or obtain a receipt when applicable under State Department of Health Services variance procedures.
_____	☐	C. Transport all hazardous waste by a State registered hauler. (H&S 25163)
_____	☐	5. Submit to this office a copy of the completed hazardous waste manifest(s) used to dispose of _____ (CCR) 66328)
_____	☐	6. Keep copies at your facility of all completed manifests, receipts or both for a minimum of 3 years and make documents available for agency review. (CCR-66492)
		STORAGE:
_____	☐	7. Discontinue the storage of hazardous waste for longer than 90 days without a permit from the State Department of Health Services (CCR 66508)
_____	☐	8. Store all hazardous waste in compatible containers which are closed and in good condition. (CCR 66241-67243)
_____	☐	9. Properly label all hazardous waste containers with the following: the words, "HAZARDOUS WASTE"; name and address of generator; hazardous properties; a composition and physical state of the waste; and the accumulation date. (CCR 66693-66746) _____
		OTHER:
_____	☐	10. Provide this office with a site assessment and mitigation plan for the contamination at your facility (H&S 25245-25249) _____
_____	☐	11. Provide this office with a copy of a waste determination conducted by a state certified laboratory or waste documentation in accordance to the regulations. (CCR 66693-66746) _____
11 OCT 92	☒	12. COMPLETE NECESSARY REPAIR TO THE FLEX LINE BEFORE PUTTING THE SYSTEM BACK IN OPERATION.

Failure to fully comply with this Notice and Order may result in further legal action.

PATRICK O'DONNELL

Owner or Authorized Representative

Hazardous Material Specialist

T-CHEM PRODUCTS *for the Home*

9028 DICE ROAD, P.O. BOX 3807
SANTA FE SPRINGS, CA 90670-1807

January 8, 1992

Mr. Robert C. Wilson
Fire Chief
11300 Greenstone Avenue
Santa Fe Springs, Ca 90670-4619

Attn: Mr. Dave Klunk

Dear Chief Wilson:

Pursuant to Chapter 6.95 of the California Health & Safety Code, T-Chem Products submits the enclosed hazardous materials business emergency plan. T-Chem has a trained, eight man hazardous materials emergency response team. The team possesses the necessary equipment to handle emergency response situations involving the materials handled by T-Chem Products.

We certify that we have demonstrated reasonable care in preparing our emergency plan. All plans and procedures should be adequate in the event of an emergency involving our materials.

If you have any questions, please call.

Sincerely,

Greg J. Wiese

Greg J. Wiese
General Manager

GJW/lc

FACSIMILE: (213) 941-9780 TELEPHONE: (213) 946-6427

T-CHEM PRODUCTS
HAZARDOUS MATERIALS RELEASE RESPONSE
BUSINESS PLAN

Chapter 6.95 of the California Health & Safety Code requires all businesses that handle hazardous materials in greater than threshold quantities to prepare, and update as required, an emergency response plan. This document constitutes T-Chem Product's business plan in compliance with this statutory requirement. This document also incorporates T-Chem Product's compliance strategies to appropriate Federal emergency response requirements. This plan is also incorporated by reference into T-Chem's Hazard Communication Program required under OSHA regulations.

This business plan contains three parts. Part 1 is an inventory of all hazardous material handled at T-Chem Product's manufacturing facility. Part 2 is the statement of the emergency response procedures that will be followed in the event of a reportable release of hazardous materials. Part 3 is the outline of the training program for T-Chem employees.

It is the intent of T-Chem Products to comply fully with the emergency response requirements imposed by State and Federal law.

Part 1

T-CHEM PRODUCTS
HAZARDOUS MATERIALS RELEASE RESPONSE
BUSINESS PLAN

Part 1: HAZARDOUS MATERIALS INVENTORY

A. Purpose

Pursuant to Chapter 6.95 of the California Health and Safety Code, T-Chem Products identifies the following substances as being in its inventory of hazardous materials used, stored or otherwise at T-Chem's facility or on its property.

See Attached

For office use only:
Date Received

Hazardous Material Business Plan Statement

City of Santa Fe Springs Fire Department
11300 Greenstone Ave., Santa Fe Springs, CA 90670
(310)944-9713

Reporting Year
1/1 to 12/31, 19 93

SECTION 1

Company Name: T-Chem Products, Inc. Phone: 310-946-6427

Site Address: 9028 Dice Road, Santa Fe Springs, CA 90670 Unit #:

Mailing Address: Same as above

SECTION 2

If your business is exempt from the reporting requirements, complete this section.

An exemption is claimed for the following reason (check one).

1) ☐ No hazardous materials are handled.
2) ☐ Hazardous materials handled are less than 500 lbs., 55 gal. or 200 cu. ft. (STP) and Acutely Hazardous Materials (AHMs) are handled in quantities less than the Threshold Planning Quantities specified in 40 C.F.R., § 355, Appendix A.
3) ☐ Hazardous materials are for sale to and use by the general public (contained in packages of 5 gallons or less).

If items 2 or 3 were checked please read the following paragraph.

4) ☐ Please check box 4 if you have already contacted the Fire Prevention Division of the Fire Department to determine if a Uniform Fire Code Permit is required. The Uniform Fire Code requires permits for handling hazardous materials as well as operations which are hazardous in nature. Uniform Fire Code Permits may be required for hazardous materials in quantities less than the above diclosable amounts. Common chemical hazard classes which require a permit include: flammable and combustible materials, cryogens, compressed gases, oxidizers, water reactive and unstable materials, carcinogens, toxic and highly toxic materials, explosives, irritants, corrosive and radioactive materials, etc.

SECTION 3

If your business is not exempt, complete this section.

Facility and Owner/Operator Identification

Standard Industrial Classification(SIC) Code(4 digit #): 2 8 4 1 | | | | Dun and Bradstreet #: 05-148-2784

Nature of business:

Owner/Operator Name: Phone #:

Other adjoining addresses used by your firm:

Subsidiary or other business occupying this location:

Company Name:

Contact Name: Phone #:

Emergency Contact Information

Name of Facility Emergency Coordinator :

Primary Contact	Secondary Contact
Name:	Name:
Title:	Title:
Business Phone:	Business Phone:
24-hour Phone:	24-hour Phone:

Acutely Hazardous Material Information

Acutely Hazardous Materials/Extremely Hazardous Substances (from SARA 302, see pages 13-15 for Acutely Hazardous Materials list) are handled at your facility (check one).

☐ Yes ☐ No

If you checked yes, is the amount

A) ☐ above Threshold Planning Quantities(TPQ)? (If above TPQ, fill out Acutely Hazardous Materials Registration Form available at the Fire Department.)

B) ☐ below TPQ?

SECTION 4

Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the submitted information is true, accurate, and complete.

Print Name of Document Preparer Greg J. Wiese, Executive Vice President

Signature of Owner/Operator Greg J Wiese Date 12-1-92

(3)

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 1 of 33

Common Name Sodium Hypochlorite Bleach DOT# 1791

Manufacturers Name Same Phone (310) 946-6427

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)
Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____
Gas ☐

Physical and Health Hazards

NFPA 704 placard — Fire 0, Health 2, Reactivity 1, Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 208,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS
Average daily amount 208,000 Number of days on site a year 365 Largest container 22500 gal

Storage Codes

Storage Code: A K N
Pressure Code: 1
Temperature Code: 4

Hazardous component(s)	% Composition	CAS #
Sodium Hypochlorite	5.6-14.0	7681-52-9
Sodium Hydroxide	0.14-0.5	1310-73-2

Storage Location Tank Farm, Warehouse

Product Identification TRADE SECRET ☐ | Material Number 2 of 33

Common Name Caustic Soda 50% DOT# 1824

Manufacturers Name Occidental Chemical Phone (800) 733-3665

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)
Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____
Gas ☐

Physical and Health Hazards

NFPA 704 placard — Fire 0, Health 3, Reactivity 2, Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 20,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS
Average daily amount 10,000 Number of days on site a year 365 Largest container 10,000 gal.

Storage Codes

Storage Code: A
Pressure Code: 1
Temperature Code: 4

Hazardous component(s)	% Composition	CAS #
Sodium Hydroxide	50	1310-73-2

Storage Location Tank Farm

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ Material Number 3 of 33

Common Name Chlorine DOT# 1017

Manufacturers Name Occidental Chemical Phone (800) 733-3665

Physical State

Solid ☐ Radioactive ☐ Liquid [X] Curies _____ Gas ☐

Pure [X] Mixture ☐

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 3 Reactivity 1 Special Hazards _____

Check all that apply: Sudden pressure release [X] Health delayed, chronic ☐ Health Immediate, acute [X]

Amount / Time at Facility

Maximum daily amount 540,000 units of measure: gallons ☐ LIQUID pounds [X] SOLID cubic feet ☐ GAS

Average daily amount 280,000 Number of days on site a year 365 Largest container 180,000 lbs.

Storage Codes

Storage Code Q

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Chlorine	100	7782-50-5

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ Material Number 4 of 33

Common Name Hydrogen Peroxide 50% DOT# 2014

Manufacturers Name Interox America Phone (800) INTEROX

Physical State

Solid ☐ Radioactive ☐ Liquid [X] Curies _____ Gas ☐

Pure ☐ Mixture [X]

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 3 Reactivity 3 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health Immediate, acute [X]

Amount / Time at Facility

Maximum daily amount 10,000 units of measure: gallons [X] LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 5,000 Number of days on site a year 365 Largest container 10,000 Gal.

Storage Codes

Storage Code A

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Hydrogen Peroxide	50	7722-84-1

Storage Location Tank Farm

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 5 of 33

Common Name Ammonia Baume DOT# 2672

Manufacturers Name La Roche Industries, Inc. Phone (714) 521-9811

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 1 Health 3 Reactivity 0 Special Hazards 1

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 6000 / 4000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount _____ Number of days on site a year 365 Largest container 6000

Storage Codes

Storage Code: A

Pressure Code: 1

Temperature Code: 4

Hazardous component(s)	% Composition	CAS #
Ammonia	29	7664-41-7

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 6 of 33

Common Name Household Ammonia DOT# _____

Manufacturers Name T-Chem Products, Inc. Phone (310) 946-6427

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 2 Reactivity 0 Special Hazards 1

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 28,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 20,000 Number of days on site a year 365 Largest container 6,200 gal.

Storage Codes

Storage Code: K N

Pressure Code: 1

Temperature Code: 4

Hazardous component(s)	% Composition	CAS #
Ammonium Hydroxide	4-8	1336-21-6

Storage Location Tank Farm, Warehouse

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 7 of 33

Common Name Sulfonic Acid 97% DOT# 2584

Manufacturers Name Dial Phone (602) 991-3000

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 1 Health 3 0 Reactivity — Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health Immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 32,500 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 12,000 Number of days on site a year 365 Largest container 20,000

Storage Codes

Storage Code A 0

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Dodecylbenzene Sulfonic Acid	97	27176-87-0
Sulfuric Acid	1.25	7664-93-9

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 8 of 33

Common Name Coconut Diethanolamide, Modified DOT# _____

Manufacturers Name Pilot Chemical Phone (310) 723-0036

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 1 Health 1 0 Reactivity — Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health Immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 3,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 1,500 Number of days on site a year 365 Largest container 3,000 gal.

Storage Codes

Storage Code A

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Diethanolamine	8	111-42-2

Storage Location Tank Farm

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 9 of 33

Common Name Ammonium Ether Sulfate DOT# 1993

Manufacturers Name Lonza or Chemron Phone (310) 537-0451 (800) 227-3919

Physical State

Solid ☐ Radioactive ☐ Liquid ☒ Curies _____ Gas ☐

Pure ☐ Mixture ☒

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard Fire 3 Health 3 0 Reactivity —

Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☒ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 11,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 5,000 Number of days on site a year 365 Largest container 11,000

Storage Codes

Storage Code A

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Alcohol Ethoxysulfate	60	67762-19-0
Ethanol	24	64-17-5

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 10 of 33

Common Name CDB Clearon Dry Chlorinating Compound DOT# _____

Manufacturers Name Olin Phone (800) OLIN-911

Physical State

Solid ☒ Radioactive ☐ Liquid ☐ Curies _____ Gas ☐

Pure ☐ Mixture ☒

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 3 1 Reactivity —

Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☒ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 40,000 units of measure: gallons ☐ LIQUID pounds ☒ SOLID cubic feet ☐ GAS

Average daily amount 10,000 Number of days on site a year 365 Largest container 300

Storage Codes

Storage Code T

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Sodium Dichloroisocyanurate Dihydrate	99-100	51580-86-0

Storage Location Dry Plant Raw Material Storage

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 11 of 33

Common Name Isopropyl Alcohol DOT# UN1219

Manufacturers Name Shell Chemical or Ashland (Ashland) (800) 274-5263 Phone (713) 241-4819

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☐ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 3 Health 3 0 Reactivity — Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 1,500 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 500 Number of days on site a year 365 Largest container 50 gal.

Storage Codes

Storage Code D

Pressure Code 1

Temperature Code 4 6

Hazardous component(s)	% Composition	CAS #
Isopropyl Alcohol	100	67-63-0

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 12 of 33

Common Name Phosphoric Acid DOT# UN1805

Manufacturers Name Cypress Chemical Phone (714) 952-9213

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 2 0 Reactivity — Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☒ Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 90 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 60 Number of days on site a year 365 Largest container 30 gal.

Storage Codes

Storage Code G

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Phosphoric Acid	75-85	7664-38-2

Storage Location Tank Farm

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 13 of 33

Common Name Sulfuric Acid DOT# UN1830

Manufacturers Name BP Minerals America Phone (801) 322-7000

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 3 2 Reactivity — Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☒ Health Immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 1500 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 700 Number of days on site a year 365 Largest container 1,500 gal.

Storage Codes

Storage Code A

Pressure Code 1

Temperature Code 46

Hazardous component(s)	% Composition	CAS #
Sulfuric Acid	90-95	7664-93-9

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 14 of 33

Common Name Diesel Fuel No.2 DOT# NA1993

Manufacturers Name Cosby Oil Co. - Texaco Phone (914) 831-3400x204

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☐ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 2 Health 2 0 Reactivity — Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☒ Health Immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 8,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount LT 8000 Number of days on site a year 365 Largest container 8,000 gal.

Storage Codes

Storage Code B

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Diesel Fuel #2	100	68476-34-6

Storage Location Tank Farm

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ Material Number 15 of 33

Common Name Carsosoft DT 95 (Fabric Softener Base) DOT# _____

Manufacturers Name Lonza Phone (800) 777-1875

Physical State

Solid ☐ Radioactive ☐ Pure ☐ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☒ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 2 Health 2 Reactivity 0 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 8,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 5,000 Number of days on site a year 365 Largest container 8,000

Storage Codes

Storage Code A

Pressure Code 1

Temperature Code 5

Hazardous component(s)	% Composition	CAS #
Ditallowamidoethylpolyoxyethylenemethyl-ammonium-methosulfate	90	68389-89-9
Isopropyl Alcohol	10	67-63-0

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ Material Number 16 of 33

Common Name Pine Oil DOT# _____

Manufacturers Name Ashland Chemical Phone (800) 274-5263

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ Mixture ☐ State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 2 Reactivity 0 Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 3,000 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 1,500 Number of days on site a year 365 Largest container 500 gal.

Storage Codes

Storage Code O

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Pine Oil	100 %	8002-09-3

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 17 of 33

Common Name Monoethanolamine DOT# _____

Manufacturers Name Ashland Chemical Phone (800) 274-5263

Physical State

Solid ☐ Radioactive ☐ | Pure ☒ | If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ | Mixture ☐ | State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard — Fire 2, Health 2, Reactivity 0, Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 220 units of measure: gallons ☒ (LIQUID) pounds ☐ (SOLID) cubic feet ☐ (GAS)

Average daily amount 165 Number of days on site a year 365 Largest container 55 gal

Storage Codes

Storage Code E

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Monoethanolamine	99	141-43-5

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 18 of 33

Common Name Triethanolamine DOT# _____

Manufacturers Name Union Carbide Phone (304) 744-3487

Physical State

Solid ☐ Radioactive ☐ | Pure ☐ | If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ | Mixture ☒ | State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard — Fire 1, Health 2, Reactivity 1, Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 7,000 units of measure: gallons ☒ (LIQUID) pounds ☐ (SOLID) cubic feet ☐ (GAS)

Average daily amount 5,000 Number of days on site a year 365 Largest container 12,000

Storage Codes

Storage Code A

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Triethanolamine	85	102-71-6
Diethanolamine	15	111-42-2

Storage Location Tank Farm

HAZARDOUS MATERIAL INVENTORY SHEET

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 19 of 33

Common Name Butyl Cellosolve DOT# NA1993

Manufacturers Name Union Carbide Phone (304) 744-3487

Physical State

Solid ☐ Radioactive ☐ | Pure ☒ | If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ | Mixture ☐ | State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard — Fire 2, Health 2, Reactivity 0, Special Hazards _____

Check all that apply: Sudden pressure release ☐; Health delayed, chronic ☒; Health immediate, acute ☒

Amount / Time at Facility

Maximum daily amount 2,400 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount 1,500 Number of days on site a year 365 Largest container 345 gal.

Storage Codes

Storage Code D

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
2-Butoxyethanol	100	111-76-2

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 20 of 33

Common Name Regal Oil R & O 32 DOT# _____

Manufacturers Name Texaco, Inc. Phone (914) 831-3400x204

Physical State

Solid ☐ Radioactive ☐ | Pure ☐ | If waste: annual amount generated 0.2 (tons)

Liquid ☒ Curies _____ | Mixture ☒ | State Waste Number CAL000028326

Gas ☐

Physical and Health Hazards

NFPA 704 placard — Fire 1, Health 0, Reactivity 0, Special Hazards _____

Check all that apply: Sudden pressure release ☐; Health delayed, chronic ☐; Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal.

Storage Codes

Storage Code D

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Solvent-dewaxed heavy paraffinic petroleum distillates	95.00-99.99	64742650

Storage Location Blow Mold

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 21 of 33

Common Name Propane DOT# 1075

Manufacturers Name Petrolane Phone (213) 685-3040

Physical State

Solid ☐ Radioactive ☐ | Pure ☐ | If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ | Mixture ☒ | State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard — Fire 4, Health 1, Reactivity 0, Special Hazards —

Check all that apply: Sudden pressure release ☒; Health delayed, chronic ☐; Health Immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 400 units of measure: gallons (LIQUID) ☐ pounds (SOLID) ☐ cubic feet (GAS) ☒

Average daily amount 200 Number of days on site a year 365 Largest container 400

Storage Codes

Storage Code A

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Ethane	0-6	74-84-0
Propane	87-97	74-98-6
Propylene	0-5	115-07-1
Butane	0-2.5	106-97-8

Storage Location Tank Farm

Product Identification TRADE SECRET ☐ | Material Number 22 of 33

Common Name Antifreeze and Summer Ccolant DOT# _____

Manufacturers Name Texaco Inc. Phone (914) 831-3400x204

Physical State

Solid ☐ Radioactive ☐ | Pure ☐ | If waste: annual amount generated 0 (tons)

Liquid ☒ Curies _____ | Mixture ☒ | State Waste Number _____

Gas ☐

Physical and Health Hazards

NFPA 704 placard — Fire 1, Health 2, Reactivity 0, Special Hazards —

Check all that apply: Sudden pressure release ☐; Health delayed, chronic ☐; Health Immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons (LIQUID) ☒ pounds (SOLID) ☐ cubic feet (GAS) ☐

Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal

Storage Codes

Storage Code D

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
1,2 Ethanediol	95.00-99.99	107211
Borax	1.00-2.99	1303964
NaOH	0.10-0.99	1310732
Nitric Acid, Sodium Salt	0.10-0.99	7631994

Storage Location Blow Mold

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 23 of 33

Common Name Acetylene DOT# _____

Manufacturers Name Union Carbide Phone 800- 822-4357

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire 4 Health 1 3 Reactivity

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health Immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 390 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 200 Number of days on site a year 365 Largest container 130

Storage Codes

Storage Code L

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Acetylene	100	74-86-2

Storage Location Maintenance Shop

Product Identification TRADE SECRET ☐ | Material Number 24 of 33

Common Name Argon DOT# _____

Manufacturers Name Union Carbide Phone 800 - 822-4357

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire _ Health _ _ Reactivity

Special Hazards Not Rated

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health Immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 250 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 150 Number of days on site a year 365 Largest container 250

Storage Codes

Storage Code T

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Argon	100	7440-37-1

Storage Location Maintenance Shop

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 25 of 33

Common Name Nitrogen DOT# _____

Manufacturers Name Union Carbide Phone 800- 822-4357

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire 0 Health 3 0 Reactivity — Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 600 units of measure: gallons ☐ (LIQUID) pounds ☐ (SOLID) cubic feet ☒ (GAS)

Average daily amount 300 Number of days on site a year 365 Largest container 300

Storage Codes

Storage Code L

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Nitrogen	100	7727-37-9

Storage Location Blow Mold

Product Identification TRADE SECRET ☐ | Material Number 26 of 33

Common Name Oxygen DOT# _____

Manufacturers Name Union Carbide Phone 800-822-4537

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Not Rated Fire — Health — Reactivity — Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 750 units of measure: gallons ☐ (LIQUID) pounds ☐ (SOLID) cubic feet ☒ (GAS)

Average daily amount 500 Number of days on site a year 365 Largest container 250

Storage Codes

Storage Code L

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Oxygen	100	7782-44-7

Storage Location Maintenance Shop

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 27 of 33

Common Name Hydrogen DOT# _____

Manufacturers Name Big Three Industries Phone (713) 868-0202

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Fire 4 Health 0 0 Reactivity

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 73 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 50 Number of days on site a year 365 Largest container 73

Storage Codes

Storage Code T

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Hydrogen	100	1333-74-0

Storage Location Upstairs Laboratory

Product Identification TRADE SECRET ☐ | Material Number 28 of 33

Common Name Helium DOT# _____

Manufacturers Name Union Carbide Phone 800-822-4537

Physical State

Solid ☐ Radioactive ☐ Pure ☒ If waste: annual amount generated 0 (tons)

Liquid ☐ Curies _____ Mixture ☐ State Waste Number _____

Gas ☒

Physical and Health Hazards

NFPA 704 placard Not Rated Fire Health Reactivity

Special Hazards _____

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 300 units of measure: gallons ☐ LIQUID pounds ☐ SOLID cubic feet ☒ GAS

Average daily amount 200 Number of days on site a year 365 Largest container 300

Storage Codes

Storage Code T

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Helium	100	7440-59-7

Storage Location Upstairs Laboratory

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 29 of 33

Common Name Air DOT# _____

Manufacturers Name Union Carbide Phone 800-822-4537

Physical State

Solid ☐ Radioactive ☐ Liquid ☐ Curies _____ Gas ☒

Pure ☐ Mixture ☒

If waste: annual amount generated 0 (tons)

State Waste Number _____

Physical and Health Hazards

NFPA 704 placard Not Rated. Special Hazards _____

Fire 0 Health 0 0 Reactivity —

Check all that apply: Sudden pressure release ☒ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 250 units of measure: gallons ☐ (LIQUID) pounds ☐ (SOLID) cubic feet ☒ (GAS)

Average daily amount 150 Number of days on site a year 365 Largest container 250

Storage Codes

Storage Code L

Pressure Code 2

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Oxygen	21	7782-44-7
Nitrogen	79	7727-37-9

Storage Location Upstairs Laboratory

Product Identification TRADE SECRET ☐ | Material Number 30 of 33

Common Name Regal Oil R & O 150 DOT# _____

Manufacturers Name Texaco Phone (914) 831-3400x204

Physical State

Solid ☐ Radioactive ☐ Liquid ☒ Curies _____ Gas ☐

Pure ☐ Mixture ☒

If waste: annual amount generated 0.2 (tons)

State Waste Number CAL000028326

Physical and Health Hazards

NFPA 704 placard Special Hazards _____

Fire 1 Health 0 0 Reactivity —

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons ☒ (LIQUID) pounds ☐ (SOLID) cubic feet ☐ (GAS)

Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal.

Storage Codes

Storage Code D

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Mineral Oil	>95	
Additive package - S, N, P	< 1	
Ditertiarybutylphenol	< 1	
Additive package - S	< 1	

Storage Location Blow Mold

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET ☐ | Material Number 31 of 33

Common Name Multi Gear Oil, API GL-5, SAE 85W140 DOT# _____

Manufacturers Name Lubricating Specialties Company Phone (213) 928-2311

Physical State

Solid ☐ Radioactive ☐ Liquid ☒ Curies _____ Gas ☐

Pure ☐ Mixture ☒

If waste: annual amount generated 0.3 (tons)

State Waste Number CAL000028326

Physical and Health Hazards

NFPA 704 placard Fire 1 Health 1 Reactivity 0 C Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal.

Storage Codes

Storage Code D

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Solv Ref Petr Base Stock	LT 95	64742-01-4
		64742-65-0
		64742-18-3

Storage Location Blow Mold

Product Identification TRADE SECRET ☐ | Material Number 32 of 33

Common Name Rando Oil HD 46 DOT# _____

Manufacturers Name Texaco Inc. Phone (914) 831-3400 x20

Physical State

Solid ☐ Radioactive ☐ Liquid ☒ Curies _____ Gas ☐

Pure ☐ Mixture ☒

If waste: annual amount generated 0.4 (tons)

State Waste Number CAL000028326

Physical and Health Hazards

NFPA 704 placard Fire 1 Health 1 Reactivity 0 C Special Hazards _____

Check all that apply: Sudden pressure release ☐ Health delayed, chronic ☐ Health immediate, acute ☐

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons ☒ LIQUID pounds ☐ SOLID cubic feet ☐ GAS

Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal.

Storage Codes

Storage Code D

Pressure Code 1

Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Solvent-dewaxed heavy paraffinic petroleum distillates	95.00-99.99	64742650

Storage Location Blow Mold

Business Name & Address _____ Date 1993

Product Identification TRADE SECRET [X] — Material Number 33 of 33

Common Name Ucon Heat Transfer Fluid 500 — DOT# _____

Manufacturers Name Union Carbide — Phone (800) 822-4357

Physical State

Solid [ ] Radioactive [ ] — Pure [ ] — If waste: annual amount generated _____ (tons)

Liquid [ ] Curies _____ — Mixture [X] — State Waste Number _____

Gas [X]

Physical and Health Hazards

NFPA 704 placard — Fire 1, Health 0, Reactivity 0, Special Hazards —

Check all that apply: Sudden pressure release [ ] Health delayed, chronic [ ] Health immediate, acute [ ]

Amount / Time at Facility

Maximum daily amount 55 units of measure: gallons [X] LIQUID pounds [ ] SOLID cubic feet [ ] GAS

Average daily amount LT 55 Number of days on site a year 365 Largest container 55 gal.

Storage Codes

Storage Code D — Pressure Code 1 — Temperature Code 4

Hazardous component(s)	% Composition	CAS #
Polyalkylene Glycol	100	

Storage Location Blow Mold

Product Identification TRADE SECRET [ ] — Material Number 34 of 34

Common Name Kathon CG/ICP — DOT# _____

Manufacturers Name Rohm And Haas Company — Phone (215) 592-3000

Physical State

Solid [ ] Radioactive [ ] — Pure [ ] — If waste: annual amount generated 0 (tons)

Liquid [X] Curies _____ — Mixture [X] — State Waste Number _____

Gas [ ]

Physical and Health Hazards

NFPA 704 placard — Fire 0, Health 3, Reactivity 0, Special Hazards —

Check all that apply: Sudden pressure release [ ] Health delayed, chronic [ ] Health immediate, acute [ ]

Amount / Time at Facility

Maximum daily amount 1000 units of measure: gallons [ ] LIQUID pounds [X] SOLID cubic feet [ ] GAS

Average daily amount 750 Number of days on site a year 365 Largest container 250 lbs.

Storage Codes

Storage Code E — Pressure Code 1 — Temperature Code 4

Hazardous component(s)	% Composition	CAS #
5-Chloro-2-methyl-4-isothiazolin-3-one	1.05-1.25	26172-55-4
2-Methyl-4-Isothiazolin-3-one	0.25-0.45	2682-20-4
Magnesium Chloride	0.5-1.0	7786-30-3
Magnesium Nitrate	21 - 23	10377-60-3
Water	74 - 77	7732-18-5

Storage Location Tank Farm

ACUTELY HAZARDOUS MATERIALS REGISTRATION FORM

This form **MUST** be completed by the owner or operator of **EACH** business in California which, at any time, handles Acutely Hazardous Material in quantities, or in a mixture, equal to or greater than the Federal Threshold Planning Quantities for Extremely Hazardous Substances. Submit this completed form to your local Administering Agency. (§25533 & 25536 Health & Safety Code)

Note instructions on reverse

BUSINESS NAME T-CHEM PRODUCTS, INC.

BUSINESS SITE ADDRESS 9028 Dice Road, Santa Fe Springs, CA 90670

BUSINESS MAILING ADDRESS (if different) _____

BUSINESS PHONE 310-946-6427 **BUSINESS PLAN SUBMISSION DATE** _____

PROCESS DESIGNATION _____

ACUTELY HAZARDOUS MATERIALS HANDLED **USE ADDITIONAL PAGES IF NECESSARY**

CHEMICAL NAME	QUANTITY
Aqua Ammonia	6000

GENERAL DESCRIPTION OF PROCESSES AND PRINCIPAL EQUIPMENT

Used to batch product of concentrations of 2-4% by transferring Aqua Ammonia with a centrifugal pump to an enclosed batch tank and diluting with water to achieve desired percentage.

SIGNATURE Greg J Wiese **TITLE** Executive Vice President

PRINTED NAME Greg J. Wiese **DATE** 12/01/92

ACUTELY HAZARDOUS MATERIALS REGISTRATION FORM

This form **MUST** be completed by the owner or operator of **EACH** business in California which, at any time, handles Acutely Hazardous Material in quantities, or in a mixture, equal to or greater than the Federal Threshold Planning Quantities for Extremely Hazardous Substances. Submit this completed form to your local Administering Agency. (§25533 & 25536 Health & Safety Code)

Note instructions on reverse

BUSINESS NAME T-CHEM PRODUCTS, INC.

BUSINESS SITE ADDRESS 9028 Dice Road, Santa Fe Springs, CA 90670

BUSINESS MAILING ADDRESS (if different) _____

BUSINESS PHONE 310-946-6427 **BUSINESS PLAN SUBMISSION DATE** _____

PROCESS DESIGNATION _____

ACUTELY HAZARDOUS MATERIALS HANDLED **USE ADDITIONAL PAGES IF NECESSARY**

CHEMICAL NAME	QUANTITY
Chlorine (liquid)	360,000# max.

This is a continuous process used for producing chlorine bleach at various concentrations. A typical strength would be household bleach. Raw materials involved,liquid chlorine, caustic soda 50%, operating pressure range. Chlorine is brought in at 150 p.s.i. and reacted at 20-30 p.s.i. Operating temperature is between 90 degrees and 100 degrees F. Process capacity at our plant is90,000 gallons of finished bleach stored in tanks. Critical process points are as follows: off loading ramps where rail cars are off loaded. Padding system for pressurizing rail cars for off loading. Recycle tank in bleach maker where water, caustic 50% and chlorine are reacted and mixed for titration tests, caustic line and pump for transferring caustic 50% for reachtion process bleach. Heat exchanger for keeping heat reaction down to process specification.

GENERAL DESCRIPTION OF PROCESSES AND PRINCIPAL EQUIPMENT

2 off loading ramps for rail cars, rail car padding system for pressurization, chlorine scrubber for blowing down chlorine lines; and empty rail cars if need be. Automatic bleach maker for chemical reaction, heat exchanger for reaction cooling. Marley water tower for cooling water. Raw material storage tanks and pumps for transfer, finished goods storage tanks with transfer pumps. Automatic shut off valves in the event

SIGNATURE Greg J. Wiese **TITLE** Executive Vice President

PRINTED NAME Greg J. Wiese **DATE** 12/01/92

(over)

of leaking valves on rail cars.

ACUTELY HAZARDOUS MATERIALS REGISTRATION FORM

This form **MUST** be completed by the owner or operator of **EACH** business in California which, at any time, handles Acutely Hazardous Material in quantities, or in a mixture, equal to or greater than the Federal Threshold Planning Quantities for Extremely Hazardous Substances. Submit this completed form to your local Administering Agency. (§25533 & 25536 Health & Safety Code)

Note instructions on reverse

BUSINESS NAME T-CHEM PRODUCTS, INC.

BUSINESS SITE ADDRESS 9028 Dice Road, Santa Fe Springs, CA 90670

BUSINESS MAILING ADDRESS (if different) _____

BUSINESS PHONE 310-946-6427 **BUSINESS PLAN SUBMISSION DATE** _____

PROCESS DESIGNATION _____

ACUTELY HAZARDOUS MATERIALS HANDLED **USE ADDITIONAL PAGES IF NECESSARY**

CHEMICAL NAME	QUANTITY
Dodecylbenzene Sulfonic Acid	32,500 gallons

The sulfonic acid is used in the blending of our liquid detergent process. It is stored in two F.R.P. containment tanks. Critical process points are as follows: Can have a severe exothermic reation in process with other raw material if temperature is not closely monitored. All valves in transfer line must be open to allow free flow. Any valves closed or partially open for aperiod of time while the transfer pump is renning can cause severe pressure build up, has the possibility of valve seal rupture, or the packings in the pump to rupture causing leakage and possible spill.

GENERAL DESCRIPTION OF PROCESSES AND PRINCIPAL EQUIPMENT

The sulfonic acid is one of the integral ingredients in the formulation of our liquid detergents. Its primary functions are its high active ingredient as a viscosity builder and neutralizer of the final products ph. Equipment is as follows: positive displacement pump with heavy duty lobes for transfer of this highly viscous product; three inch (3") diameter stainless steel pipe to aid in transfer due to high operating pressures

SIGNATURE Greg J Wiese **TITLE** Executive Vice President

PRINTED NAME Greg J. Wiese **DATE** 12/01/92

ACUTELY HAZARDOUS MATERIALS REGISTRATION FORM

This form **MUST** be completed by the owner or operator of **EACH** business in California which, at any time, handles Acutely Hazardous Material in quantities, or in a mixture, equal to or greater than the Federal Threshold Planning Quantities for Extremely Hazardous Substances. Submit this completed form to your local Administering Agency. (§25533 & 25536 Health & Safety Code)

Note instructions on reverse

BUSINESS NAME T-CHEM PRODUCTS, INC.

BUSINESS SITE ADDRESS 9028 Dice Road, Santa Fe Springs, CA 90670

BUSINESS MAILING ADDRESS (if different) _____

BUSINESS PHONE 310-946-6427 **BUSINESS PLAN SUBMISSION DATE** _____

PROCESS DESIGNATION _____

ACUTELY HAZARDOUS MATERIALS HANDLED **USE ADDITIONAL PAGES IF NECESSARY**

CHEMICAL NAME	QUANTITY
Sulfuric Acid 93%	8000 gal typical 1500 gal max.

This is a continuous process used for waste water neutralization operating pressure range is O.P.S.I. ambient temperature. Maximum capacity of the waste water tank in process is 22,000 gal. Typical waste water capacity is 800 gal. Critical process points are as follows: circulatroy pump with in line ph probe that gives ph read out as well as activating sulfuric acid pumps for neutralization.

GENERAL DESCRIPTION OF PROCESSES AND PRINCIPAL EQUIPMENT

The sulfuric acid is used for waste water neutralization. We circulate waste water with a diaphragm pump that discharges through pipe line with in line ph electrode that gives ph on continuous basis. When ph goes to low set point it activates sulfuric acid pump. Thus the higher the ph the harder the sulfuric acid pump works. Equipment is ad follows: circulation pump, ph sensor probe, NEMA, 4 digit read out,

SIGNATURE Greg J. Wiese **TITLE** Executive Vice President

PRINTED NAME Greg J. Wiese **DATE** 12/01/92

(over)

sulfuric acid pump, cross linked polyethlene tank for sulfuric acid storage.

Part 2

T-CHEM PRODUCTS
HAZARDOUS MATERIALS RELEASE RESPONSE
BUSINESS PLAN

Part 2: HAZARDOUS MATERIALS EMERGENCY RESPONSE

A. Purpose

Pursuant to Chapter 6.95 of the California Health and Safety Code, T-Chem Products, as a handler of hazardous materials, must prepare and implement certain emergency response plans and procedures in the event of an unintended or unpermitted release of these hazardous materials. Both Federal and State law require certain verbal and written notifications in these events. This section of the T-Chem Emergency Procedure Manual details the required plans and procedures to be followed by T-Chem Products personnel in the event of the release of hazardous materials.

T-Chem's plan requires immediate notification of appropriate local, State and Federal officials; the implementation of mitigation procedures; the implementation of evacuation procedures, in appropriate circumstances; and the training of all T-Chem employees in emergency response plans and procedures.

B. Scope

1. Covered Substances.

Hazardous substances include any chemical or substance which is required to have an MSDS and any chemical substance listed as extremely hazardous or acutely hazardous by EPA or California EPA.

Extremely hazardous substances are those chemicals listed by EPA pursuant to the Emergency Planning and Community Right-to-Know Act. **Acutely hazardous material** is the name used by California regulations for this same group of chemicals. **CERCLA reportable substances** include various EPA listed substances that require reporting under the Comprehensive Environmental Response, Compensation and Liability Act if there is an unpermitted release. Extremely hazardous substances, acutely hazardous materials and CERCLA reportable substances are all hazardous substances.

Extremely hazardous substances normally found at T-Chem include: chlorine, ammonia, sulfuric acid, formaldehyde, and sulfonic acid.

CERCLA reportable substances normally found at T-Chem include: the above listed extremely hazardous substances, sodium hydroxide, ammonium hydroxide, phosphoric acid, sodium hypochlorite and hydrogen peroxide.

2. Covered Events

Any time there is an unintended release of a hazardous material, an extremely hazardous substance or a CERCLA reportable substance, the provisions of this section shall be followed. Examples of unintended releases include rail car upset, storage or process tank failure, valve or coupling failure, truck accident or any other spill, release or failure that results in the escape of hazardous substances.

Unpermitted or unintended releases of extremely hazardous substances or CERCLA reportable substances are covered only if the release exceeds a certain threshold amount. These thresholds are:

chlorine	10 lbs
sodium hydroxide	1000 lbs
hydrogen peroxide	1 lb
ammonia	100 lbs
ammonium hydroxide	1000 lbs
sulfonic acid	1000 lbs
sulfuric acid	1000 lbs
phosphoric acid	5000 lbs
sodium hypochlorite	100 lbs

Under California law, unpermitted or unintended releases of **any** hazardous material is covered if, because of the material's quantity, concentration, physical or chemical characteristics, it poses a **significant present or potential threat to human health or safety or to the environment.**

C. Notification Procedures

Both Federal and California law require immediate verbal notification of an unpermitted release. The verbal notice must be followed by a written report. The information and procedures required for verbal reports will be posted conspicuously in the employee lunch room, outside the door of the quality control laboratory, in the office area and in the tank control shed. This information will also be part of T-Chem's regular training program.

1. California Hazardous Materials Notice

   Call the State Warning Center, Office of Emergency Services

   1-800-852-7550 or (916) 427-4341

   Required information:

   - location of the release
   - name of the person reporting
   - hazardous material involved
   - estimate of the quantity
   - potential hazards presented by material

   Call the Santa Fe Springs Fire Department

   213-944-9713

   For transportation related incidents, notify the California Highway Patrol.

   911

2. Extremely Hazardous Substances and CERCLA Substances

   Call the National Response Center

   1-800-424-8802

   Required information:

   - chemical name or identity of substance
   - whether chemical is section 302 listed (EHS)
   - estimate of the quantity
   - time and duration of release
   - media into which release occurred
   - acute/chronic health risks
   - medical treatment
   - needed precautions (evacuation, etc.)
   - contact name and phone number

Call the State Warning Center, Office of Emergency Services

1-800-852-7750 or (916) 427-4341

Same required information as above.

Call the Santa Fe Springs Fire Department

213-944-9713

If transportation related, notify the California Highway Patrol.

911

3. Written Reports

California written reports. California requires monthly written notification of any hazardous materials incidents. These are to be submitted to the Office of Emergency Services. Releases involving extremely hazardous materials or CERCLA substances must be reported within 30 days of the incident using the approved Office of Emergency Services reporting form. (Attachment A). (Cal. Code of Regs. § 2705(c)).

Federal written reports. It is T-Chem's policy that Federal reports will be submitted within 30 days of any release. The Federal report must describe:

- actions taken to respond to and contain release
- known or anticipated health risks
- need for medical attention for exposed individuals

D. Local Emergency Medical

Presbyterian Hospital

698-0811

E. Evacuation of Plant, Facility Site and Vicinity

Certain releases of extremely hazardous or CERCLA substances may present a threat to the health and safety of T-Chem employees and the adjacent neighborhood requiring the immediate evacuation of T-Chem's facility and, possibly, the neighborhood. The most likely scenario requiring evacuation would be in the event of a massive chlorine spill. While this section of the emergency response plan provides direction in the event of a release at T-Chem's facility, its provisions will apply in the case of a release at neighboring chemical or industrial facilities.

1. Evacuation decision

Either the plant manager or the shift supervisor on duty shall make the decision to evacuate.

2. In-plant communication

In the event, T-Chem employees must evacuate the facility, notice will be given by means of the terryphone or the interplant telephone intercom.

3. Neighborhood communication

If possible, and without jeopardizing employee safety, telephone or other notice shall be given to adjacent property owners of the need for evacuation.

4. Evacuation procedures

Evacuation shall be in accordance with the evacuation diagram posted in the employee lunch-room. This diagram shall be posted next to the in-plant lab and in the office area. The outdoor meeting place is in the Dice Road parking lot. In the event that meeting place is itself hazardous, the alternative meeting place shall be the vacant field east of the warehouse.

Shift supervisors shall pull the timecards for use in an employee roll call to verify the evacuation of all employees.

F. Mitigation and Clean-up

This section sets forth the responsibilities for basic mitigation and clean-up measures to be undertaken in the event of an unintended or unpermitted release of a hazardous, extremely hazardous or CERCLA substance. **In the event of any unusual or unfamiliar circumstances, T-Chem employees shall obtain the direction of the Santa Fe Springs Fire Department.**

Only members of the T-Chem emergency response team shall undertake mitigation or clean-up measures. Such actions will be in accordance with the team's training.

G. Special Considerations in the Event of an Earthquake

In the event of an earthquake, the following shut-down and facility securing steps shall be taken:

1. Each Department head shall secure the premises and evacuate personnel.

2. The emergency response team shall go to the tank farm area to assist tank farm personnel to secure tank farm.

3. As soon as possible, all employees shall gather at the Dice Road parking lot for roll call.

H. Hazardous Waste Disposal

All hazardous wastes gathered as a result of an emergency response action shall be disposed of in accordance with applicable Federal and California state law.

Alan

SANTA FE SPRINGS FIRE DEPARTMENT
FIRE & ENVIRONMENTAL PROTECTION BUREAU
11300 GREENSTONE AVENUE, SANTA FE SPRINGS, CA 90670
310/944-9713

NOT A Violation
~~NOTICE OF VIOLATION~~

HAZARDOUS MATERIALS/INDUSTRIAL WASTE

COMPANY: T-CHEM Products DATE: 5/15/92

SITE ADDRESS: 9028 Dice Rd UNIT #

MAILING ADDRESS: Same

CONTACT: Greg WIESE PHONE: 946-6427

You are not in compliance with Ch. 6.95 of the California Health and Safety Code, Section 25500 & Ordinance #685 (Hazardous Materials) and/or Chapter 18 of the City Municipal Code (Industrial Waste) for the following reasons:

- ☐ Hazardous Materials Business Plan has not been submitted or is incomplete.
- ☒ Hazardous Material Plot Plan has not been submitted or is inadequate.
- ☐ Emergency Response Plan has not been submitted or is inadequate.
- ☐ Hazardous Materials Inventory Sheet has not been submitted or is inadequate.
- ☐ Annual fee has not been submitted or is inadequate.
- ☐ Delinquent payment of annual fee. A penalty has now been applied- 50% for Hazardous Materials, 10% per month for Industrial Waste.
- ☐ Excessive oil/grease/solids in pretreatment facilities.
- ☐ pH of waste water is outside of established limits.
- ☐ Rain diversion system is not working properly.
- ☐ Discharging industrial waste to the ground.
- ☐ Not having a valid Industrial Waste Discharge Permit.
- ☐ Other Please make individual blow up plans w/ legends if necessary for Tank farm area, Tank farm warehouse, LAB, Maintenance Shop, and Dry plant storage. Also check if Lab is on Main plan. If there are any other storage areas please note them.

RECEIVED
MAY 18 1992
T-CHEM PRODUCTS
FRONT OFFICE

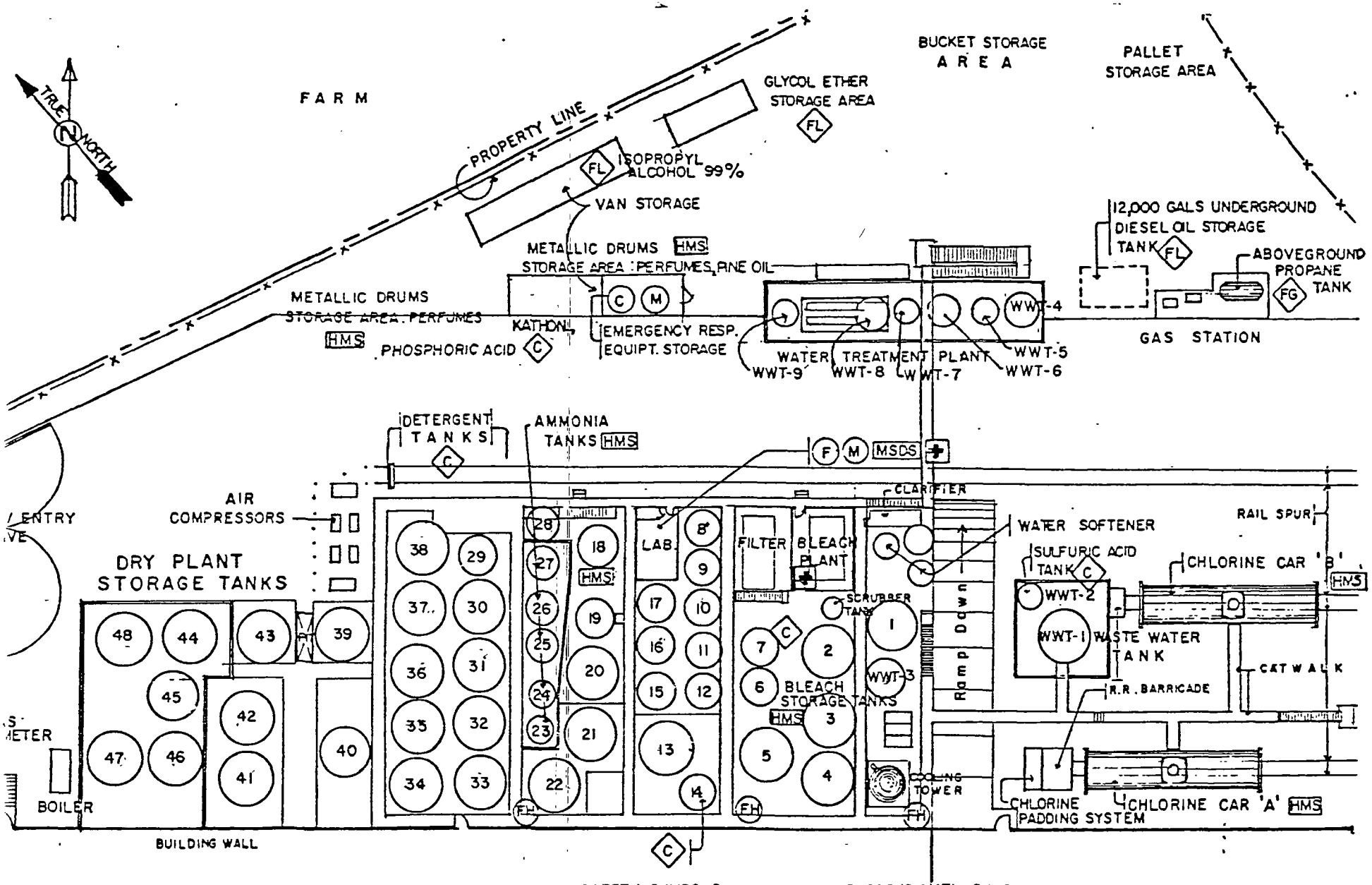
You must correct the above checked item(s) by: 6/17/92

Failure to correct the above violations by the specified due date may result in fines up to $2000.00 per day of violation and/or imprisonment.

Compliance with the Hazardous Material Business Plan Program does not ensure compliance with the Uniform Fire Code or other applicable regulations. The giving of this notice and the recent inspection of your facility is not a representation by the City that no other hazardous conditions exist on your premises.

Received by: x Sent by Mail By: Leonardo Gaino

Environmental Inspector



PLOT PLAN (TANK FARM)

SCALE: 1" = 30'-0"

OCT 18 1982

FIRE DEPT. ACCESS SYMBOL

MSDS MATL. SAFETY DATA SHEET

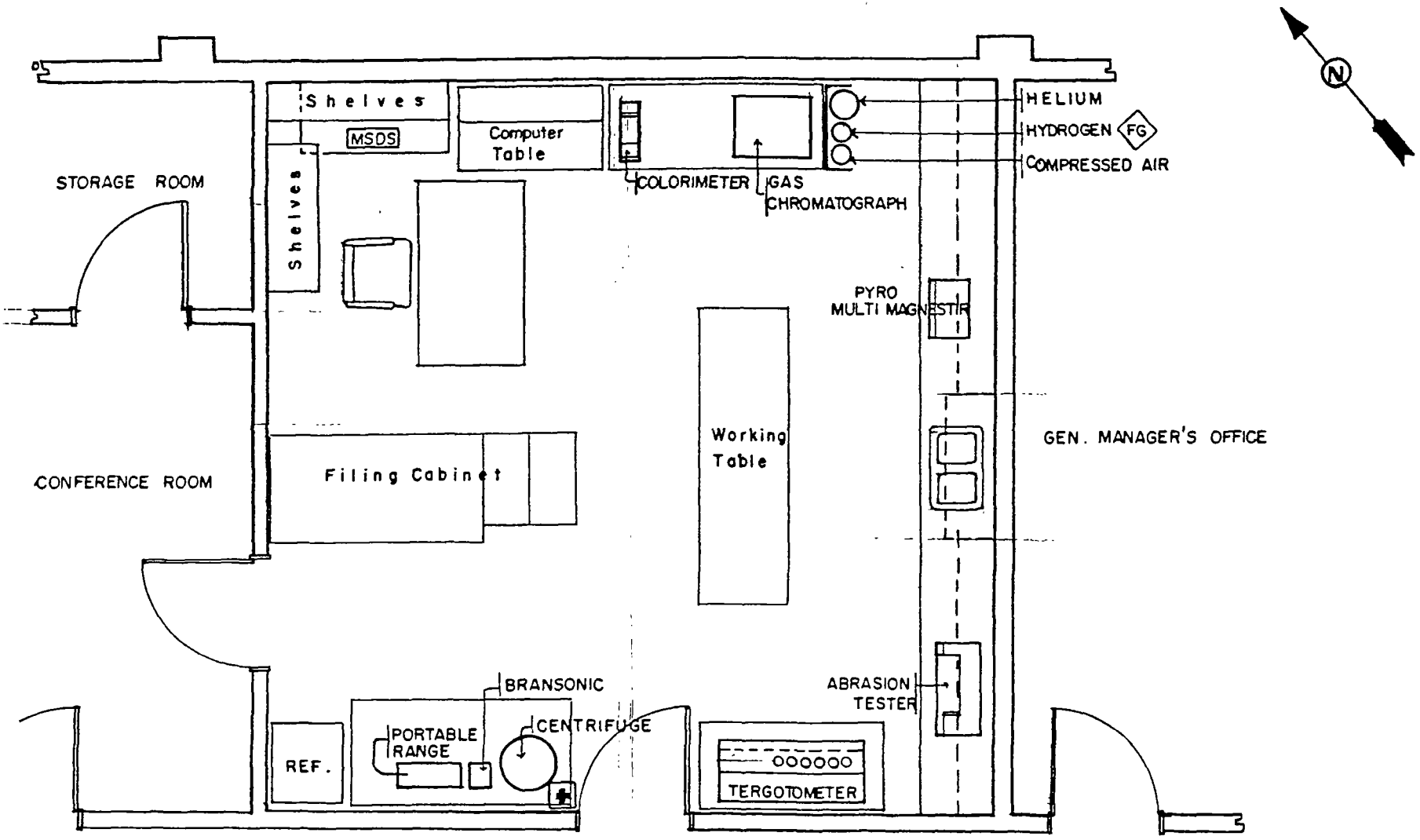
SAFETY SYMBOLS

- FH FIRE HOSE
- F FIRE EXTINGUISHER
- C PROTECTIVE CLOTHING
- M PROTECTIVE MASK
- ✚ FIRST AID

HAZARDOUS MATL. SYMBOLS

- ○ ABOVEGROUND TANK
- FL FLAMMABLE LIQUID
- FG FLAMMABLE GAS
- C CORROSIVE
- HMS HAZARDOUS MATL STORAGE

CHEMICAL PLANT-T-CHEM PROD. Sta. Fe Springs, California	
Scale:	By: Edison
Date: 6-23-77	
PLOT PLAN-TANK FARM	



SAFETY SYMBOL

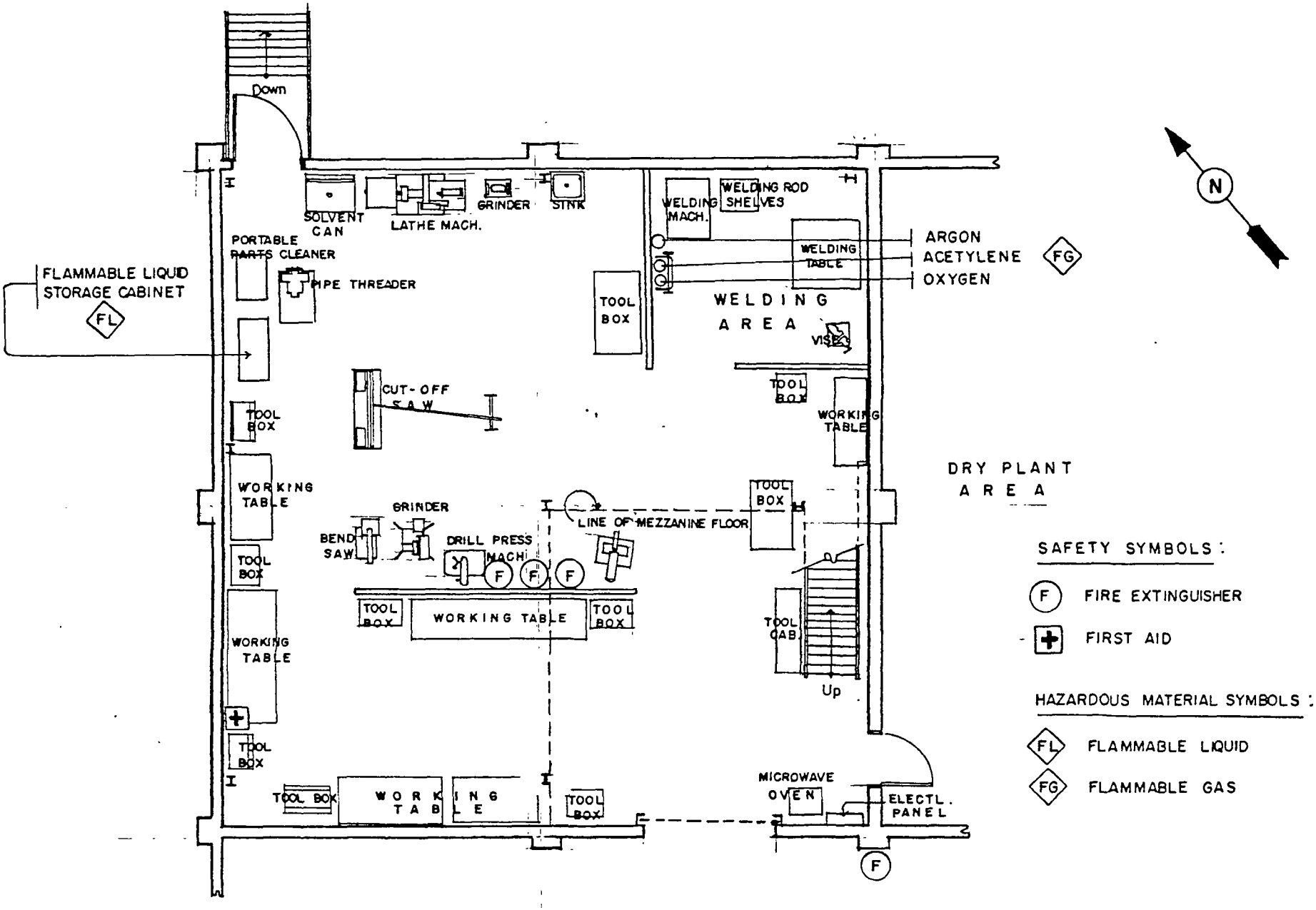
FIRST AID

FIRE DEPT. ACCESS SYMBOL

MSDS MATERIAL SAFETY DATA SHEET

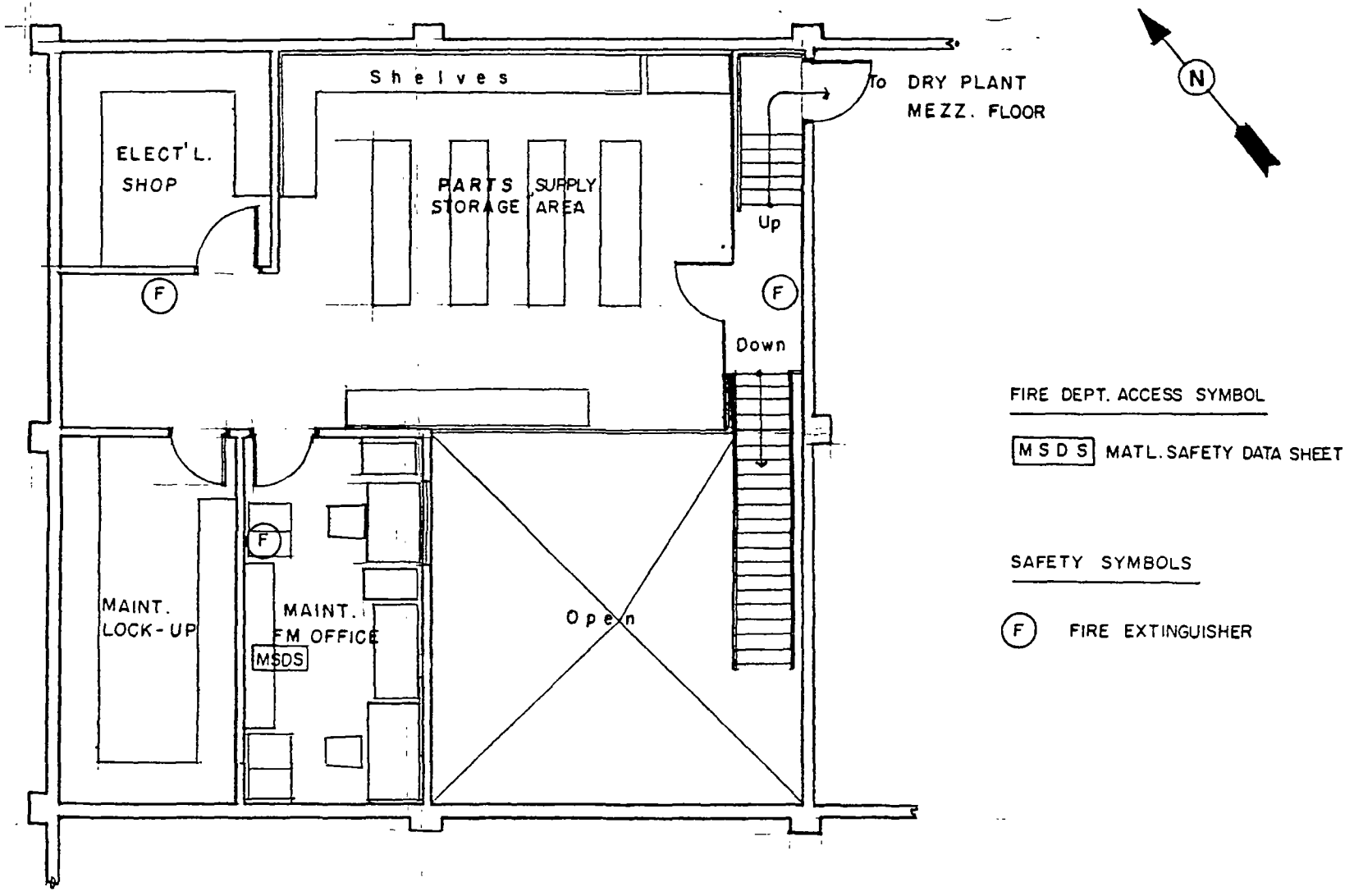
PLAN (LABORATORY)

SCALE : 1/4" = 1'-0"



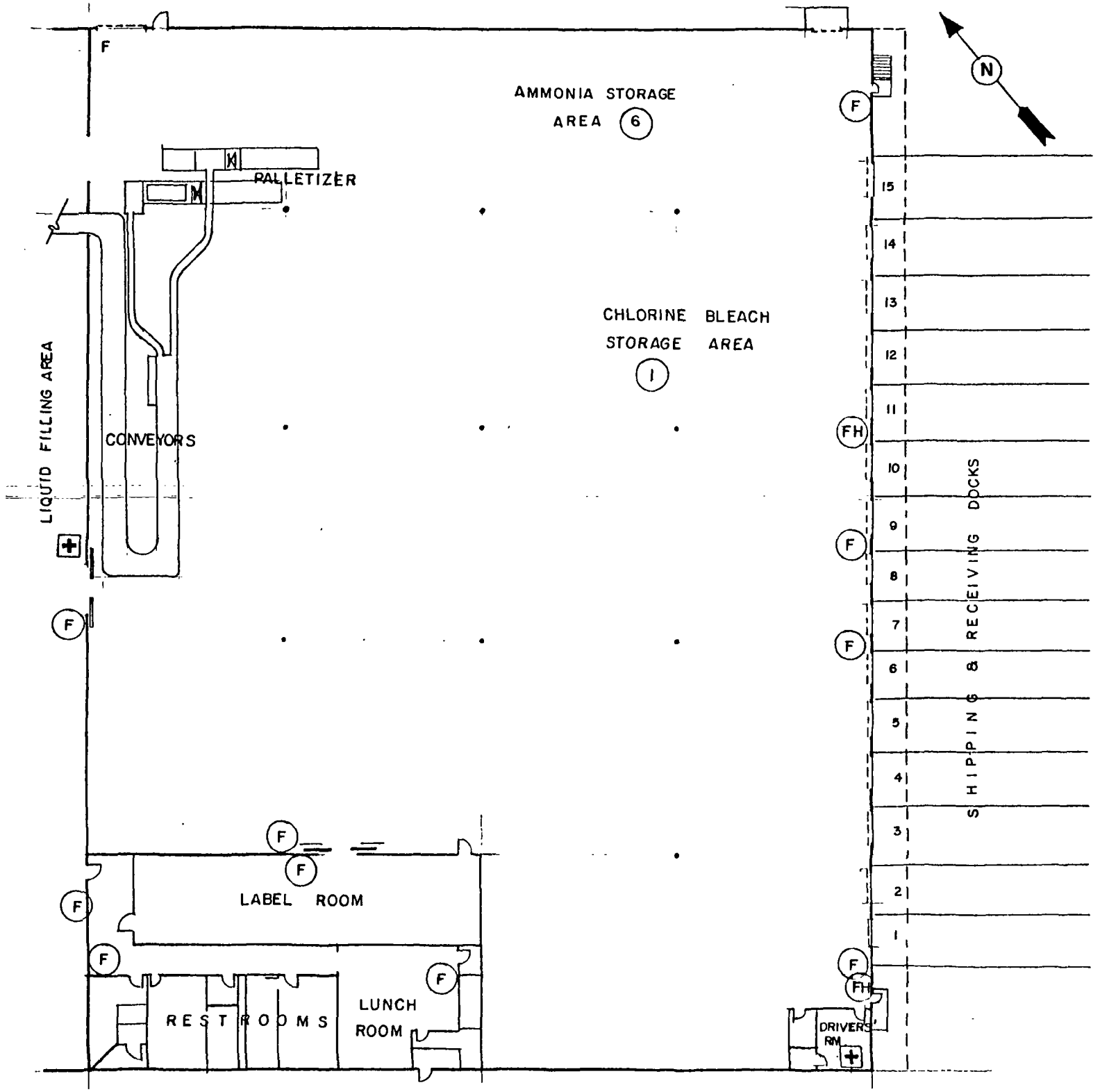
PLAN (MAINT. SHOP)

SCALE : 1/8" = 1'-0"



MEZZANINE PLAN (MAINT. SHOP)

SCALE : 1/8" = 1'-0"



PLAN (WAREHOUSE)

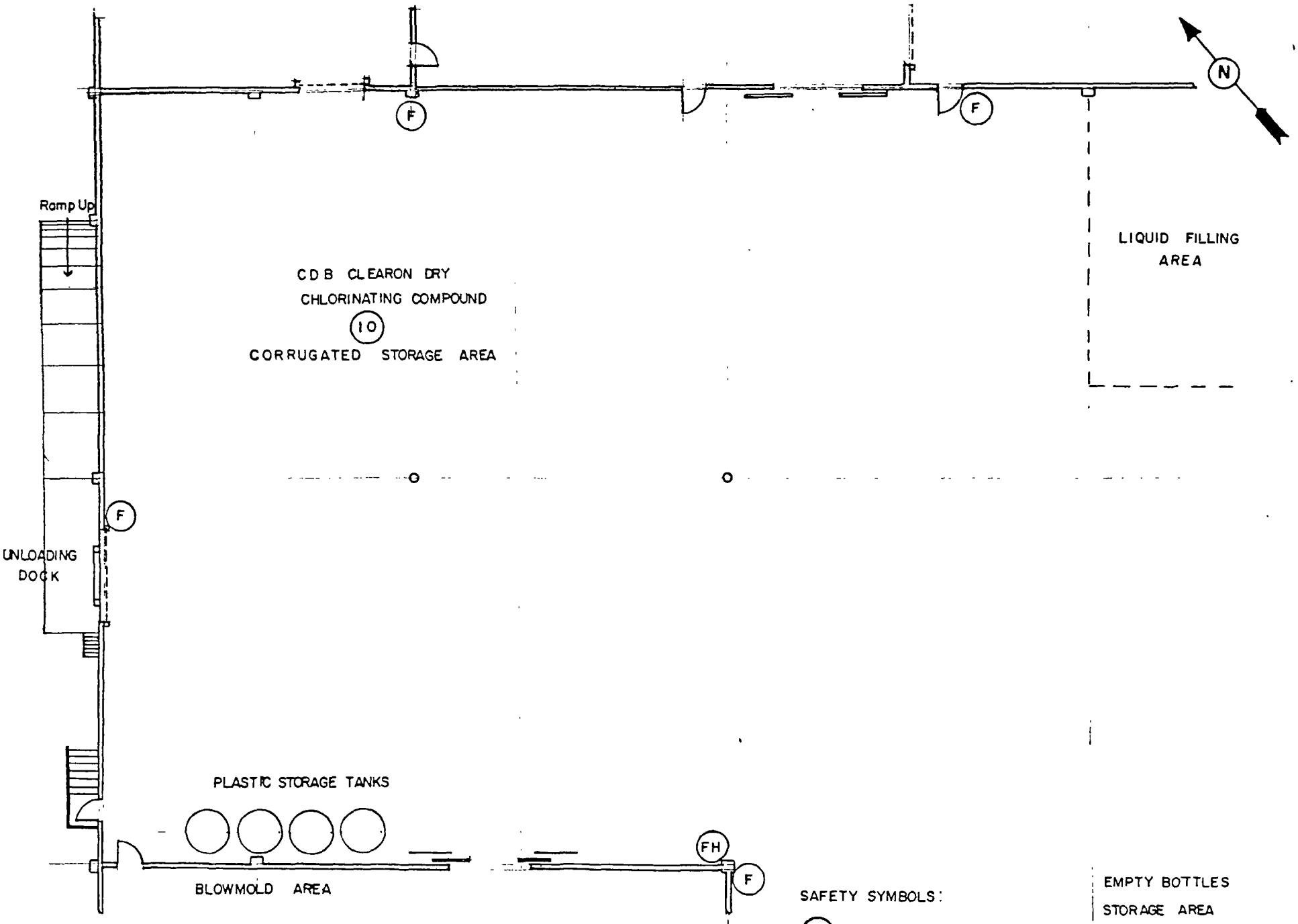
SCALE: 1" = 30'-0"

SAFETY SYMBOLS :

- FIRST AID
- (F) FIRE EXTINGUISHER
- (FH) FIRE HOSE

NOTE :

FOR PRODUCT IDENTIFICATION SEE ATTACHED SHEET.



PLAN (CORRUGATED STORAGE)
SCALE : 1/16" = 1'-0"

SAFETY SYMBOLS:

(F) FIRE EXTINGUISHER

(FH) FIRE HOSE

EMPTY BOTTLES
STORAGE AREA

NOTE :
FOR PRODUCT IDENTIFICATION
SEE ATTACHED SHEET.

TANK FARM LEGEND

1. 1-24,000 gals. of bleach on the north side of the building beside the ramp.

2.\
3. 1-23,000 gals. of bleach on the north side of the wall of the
4. building.
5./

6.\ 1-9,000 gals. of 50% Caustic Soda on the north side near the
7./ bleach storage tanks.

WWT-3 1-9,500 gals. of waste water on the north side beside the ramp.

9. 1-6,000 gals. soft water on the east side of the tank farm lab wall.

10.\
11. 1-6,000 gals. of raw bleach on the west side of the catwalk
12. before the tank farm lab.
13./

14. 1-10,000 gals. of 50% Hydrogen Peroxide on the north side of the building wall.

15. 1-10,000 gals. of Tall Oil on the south side of the wall of the tank farm lab.

16. 1-12,000 gals. of AES 60% on the north side of the bldg. before the Tall Oil storage tank.

17. 1-12,000 gals. of NP9 on the north side of the bldg. after the Hydrogen Peroxide storage tank.

18. 1-8,500 gals. Fabric Softener base on the west side of the tank farm lab.

19. 1-5,500 gals. of Rinse mix tank on the north side of the bldg. before the Fabric Softener base tank.

20. 1-13,500 gals. of Fabric Softener storage tank on the north side of the after the Powder dish tank.

21. 1-180,000 gals. of Powder dish on the north side of the bldg. near the Powder laundry storage tank.

22. 1-3,000 gals. of Calamide O on the north side of the bldg. close to the rail spur.

23. 1-6,000 gals. of 29% Aqua Ammonia on the north side of the bldg. near the Calamide O storage tank.

24. 1-6,000 gals of Pure Ammonia on the north side of the bldg. before the 29% Ammonia storage tank.

25. 1-6,000 gals. of Lemon Ammonia on the north side of the bldg. near the small Lemon Ammonia storage tank.

26. 1-3,000 gals. of Lemon Ammonia on the north side of the bldg. near the large Lemon storage tank.

27. 1-3,000 gals. of Cloudy Sudsy Ammonia on the north side of the bldg. near the small Lemon Ammonia storage tank.

28. 1-180,000 gals. of Powder laundry on the north wall of the bldg. near the Powder dish storage tank.

29. 1-12,000 gals. of All-Fabric Bleach on the north wall of the bldg. near the 50% Hydrogen Peroxide storage tank.

30. 1-8,500 gals of Sulfonic Acid on the north side of the bldg. near the rail spur.

31. 1-13,500 gals of Urea on the north side of the bldg. near the Sulfonic Acid tank.

32. 1-11,000 gals of Pine/Glass Cleaner storage tank on the north side of the bldg. near the Urea storage tank.

33. 1-11,900 gals. of SXS on the north side of the bldg. near the detergent storage tank.

34. 1-10,000 gals. of Detergent storage tank on the north wall of the bldg. near the SXS storage tank.

35. 1-10,000 gals. of Detergent mix tank on the north side of the bldg. near the rail spur.

36. 1-11,900 gals of Sulfonic Acid on the north side of the bldg. after the detergent mix tank.

37. 1-11,900 gals. of TEA on the north side of the bldg. after the Sulfonic Acid storage tank.

38. 1-11,900 gals. of Dish Concentrate on the north side of the bldg. after the TEA storage tank.

39. 1-11,900 gals. of Detergent storage tank on the north wall of the bldg. after the Dish Concentrate storage tank.

WWT-1 1-24,000 gals. of waste water on the north side of the bldg. in between the ramp and the Chlorine car B.

41. 1-123,600 lbs. of Polyethylene on the north side of the bldg. near the air compressor.

42. 1-120,000 gals. of Salt on the north side of the bldg. near the TEA and detergent storage tank.

43. 1-98,800 lbs. of Polyethylene on the north side of the bldg. near the concrete roadway.

44. 1-190,000 gals. of Soda Ash on the north side of the bldg. of the dry plant storage tanks.

45. 1-130,000 gals. of STP on the north wall of the bldg. after the Soda Ash storage tank.

46. 1-5,000 gals. of SLF Dish Surfactant on the north side of the bldg. near the concrete roadway.

47. 1-6,000 gals. of Colloid on the north side of the bldg. of the dry plant storage tanks.

48. 1-5,000 gals. of Silicate on the north wall of the bldg. of the dry plant storage tanks.

49. 1-12,000 gals. of Sulfonic Blend on the north side of the bldg. near the concrete roadway and gate fence.

50. 1-12,000 gals. of Silicate on the north side of the bldg. near the boiler.

T-CHEM PRODUCTS
HAZARDOUS MATERIALS RELEASE RESPONSE
BUSINESS PLAN

Part 3: HAZARDOUS MATERIALS TRAINING

A. Purpose

Pursuant to Chapter 6.95 of the California Health and Safety Code, T-Chem Products must provide a program for its employees to train them in the safe handling of hazardous materials, coordination with local emergency response organizations, use of emergency equipment and other emergency response procedures outlined in Part 2 of this Plan. T-Chem Products policy is that all employees receive appropriate training for their own and the community's protection.

B. Scope

Training of employees shall include all matters identified in Part 2 of this Plan. In addition, training shall be correlated with required training under OSHA's Hazard Communication Standard. Where appropriate, training requirements of the Department of Transportation shall be included.

C. Frequency

All employees shall receive hazardous materials response and handling training once a year. New employees shall receive such training before being exposed to hazardous materials and in all instances within 30 days of employment. All employees that may be exposed to hazardous materials by virtue of the introduction of new production methods or the use of new ingredients shall be trained with respect to such methods and materials prior to start-up.

D. Emergency Response Team

T-Chem will maintain an emergency response team consisting of at least 6 individuals. New members of the team shall receive OSHA approved emergency response training as soon as practicable after assignment to the team. The team shall attend annual refresher courses.

E. Drills

T-Chem shall conduct quarterly training drills of the emergency response system. These drills shall include evacuation, review of notification requirements, use of safety equipment, adequacy of warning system and other

emergency response components. The Santa Fe Springs Fire Department shall be invited to observe these drills at least once a year. The Fire Department shall be notified that a drill is planned prior to the conduct of any drill.

F. Other Training Methods

Information on evacuation, emergency response notification and other pertinent matters shall be displayed prominently in the employee lunch room, in the plant offices, next to the lab and in the tank farm area.

G. Trainer

The principal person responsible for training at T-Chem Products is Greg Wiese. He shall be assisted by the members of the emergency response team and such other personnel or outside consultants as necessary.

A:\emerplan.trn

MEMORANDUM

DATE: January 22, 1992

TO: Employees Listed Below FROM: Ray Wetter

SUBJECT: Chlorine Safety Seminar

On Monday January 27, 1992 at 3:30 p.m. we will have a safety presentation on Dry Liquid Chlorine presented by Occidental Chemical in the T-Chem lunch room.

Please plan to attend.

Greg Wiese	Bob Brown	Scott Chancellor
Dale Cagle	Fred Lamb	Bill Canty
Javier Viorato	Bill Lamey	Richard Lehman
Richard Thurmond	Edison Medina	Frank Campoy
Sook Keotami	Charles Hemphill	Daniel Paleo
Jim Rissman	Robbie Currie	Howard Stanley
Fred Johnson		

MEMORANDUM

DATE: February 12, 1992

TO: Supervisor, Lead & Tank Farm Personnel **FROM:** Ray Wetter

SUBJECT: Chlorine Off-Loading Procedures

Effective immediately the following procedures will be followed when operating the Chlorine off-loading system.

1) All personnel attempting to operate the Chlorine off-loading system will wear a respirator mask for the duration of the task.

2) If bleach production is disrupted or discontinued for longer than 2 hours, then the Chlorine off-loading system is to be deactivated by:

   a) Close manual valves on Chlorine rail car.

   b) Blow down or scrub Chlorine lines to zero pressure.

   c) Turn key to off position and remove from panel.

3) If you are relieved by another operator while bleach production is continuing then:

   a) Turn off bleach machine.

   b) Both operators proceed to the appropriate Chlorine control panel and switch keys.

These procedures are intended for your safety and will minimize operator confusion.

cc: Greg Wiese

MEMORANDUM

DATE: September 17, 1992

TO: All Tank Farm/Maintenance FROM: Greg Wiese

SUBJECT: Chlorine Disconnect Procedure

As a result of air sampling conducted by our staff on September 16, 1992 we will need to initiate additional procedures to further reduce fugitive emissions during railcar disconnects.

In order to further reduce fugitive emissions of chlorine we will implement the following:

- Thoroughly scrub the chlorine line down to zero PSI.
- Wait 15 minutes to allow for any residual pressure build up and rescrub the lines.
- Proceed with your disconnection procedure.

We will be further refining our procedures to further reduce source emissions.

I have received and read the information:

_____ _____

Signature Date

T-CHEM MEMORANDUM

DATE: October 12, 1992

TO: All Tank Farm Personnel and Supervisors FROM: Greg Wiese

SUBJECT: Amended Chlorine Disconnect Procedure

After review of our chlorine disconnect procedure as of September 17, 1992 we feel it is important to further refine the procedure. In order to prevent the possibility of an incident similar to the one experienced October 11, 1992, where residual chlorine vapors actuated our chlorine sensors thereby causing emergency response crews, please refer to the following:

1 - Scrub down chlorine pressure as per previous instructions.

2 - When chlorine lines have been scrubbed down to 0 after the required 2 times, it is now necessary to require the operators to disconnect the chlorine line behind the flex line coupling and cap it.

3 - Furthermore it is important to cap both ends of the flex line hose to prevent moisture accumulation.

Please implement this procedure immediately.

cc: All Supervisors
Leadmen
Tank Farm Personnel

South Coast
Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

DATE: 12-18-06

EQUIPMENT LOCATED AT: 9028 DICE RD
SANTA FE SPRINGS, CA 90670

LEGAL OWNER OR OPERATOR CO. ID: 119512
KIK SO-CAL
9028 DICE RD
SANTA FE SPRINGS, CA 90670

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2006	
F20850	BLEACH BLENDING	01-16-08
F20854	BLEACH PACKAGING	01-16-08
F20855	I C E (50-500 HP) EMERG OTHER, DIESEL	01-16-08
F20856	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-08
F20857	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-08
F20858	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-08
F20859	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-08
F32542	Scrubber, Controlling HCL or NH3 Vent ss	01-16-08
F32543	Scrubber, Controlling HCL or NH3 Vent ss	01-16-08
F45755	BLEACH PACKAGING	01-16-08

South Coast
Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

ACKNOWLEDGMENT OF ANNUAL OPERATING PERMIT RENEWAL FEE PAYMENT

Dear Permit Holder:

This letter acknowledges your recent annual operating permit renewal fee payment for the permits to operate or applications listed on the enclosed attachment. The next renewal date for each permit or application is stated on the attachment. For facilities that have been issued a RECLAIM or Title V facility permit, the facility permit serves as a comprehensive permit to operate the equipment listed on the facility permit.

This payment acknowledgment letter does NOT replace your original Permit to Operate, and you should NOT discard the original permit.

You are required by AQMD Rule 206 to affix the original Permit to Operate or a legible facsimile of the permit upon the equipment so that the permit number, equipment description, and the operating conditions are clearly visible.

If you have any questions about this permit renewal acknowledgment letter, please call AQMD's Customer Service section. From inside California call our toll-free number (866) 888-8838 or call (909) 396-2900. Outside California call (909) 396-2900 only. If you need a photocopy of your permit to operate please contact the Public Records Request section at (909) 396-3700. If you need a certified copy of the permit (a certified copy of the permit is not required for compliance purposes), you may request a certified copy of an active permit to operate by submitting the request in writing. A fee of $19.09 must accompany your written request. (If your facility is a RECLAIM or Title V facility, you may request a certified copy of your RECLAIM or Title V facility permit by submitting the request in writing. A fee of $19.09 for the first page and $1.35 for each additional page in the facility permit must accompany your written request.) The written request and the fee for a certified copy of an active permit should be sent to SCAQMD, P.O. Box 4943, Diamond Bar, CA 91765-0943.

South Coast
Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

DATE: 12-20-05

EQUIPMENT LOCATED AT: 9028 DICE RD
SANTA FE SPRINGS, CA 90670

LEGAL OWNER CO. ID: 119512
OR OPERATOR KIK SO-CAL
9028 DICE RD
SANTA FE SPRINGS, CA 90670

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2005	
F20850	BLEACH BLENDING	01-16-07
F20854	BLEACH PACKAGING	01-16-07
F20855	I C E (50-500 HP) EMERG OTHER, DIESEL	01-16-07
F20856	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-07
F20857	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-07
F20858	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-07
F20859	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-07
F32542	Scrubber, Controlling HCL or NH3 Vent ss	01-16-07
F32543	Scrubber, Controlling HCL or NH3 Vent ss	01-16-07
F45755	BLEACH PACKAGING	01-16-07

South Coast
Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

DATE: 01-04-05

EQUIPMENT LOCATED AT: 9028 DICE RD
SANTA FE SPRINGS, CA 90670

LEGAL OWNER OR OPERATOR CO. ID: 119512
KIK SO-CAL
9028 DICE RD
SANTA FE SPRINGS, CA 90670

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2004	
F20850	BLEACH BLENDING	01-16-06
F20854	BLEACH PACKAGING	01-16-06
F20855	I C E (50-500 HP) EMERG OTHER, DIESEL	01-16-06
F20856	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-06
F20857	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-06
F20858	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-06
F20859	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-06
F32542	Scrubber, Controlling HCL or NH3 Vent ss	01-16-06
F32543	Scrubber, Controlling HCL or NH3 Vent ss	01-16-06
F45755	BLEACH PACKAGING	01-16-06

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
(909) 396-2000 • www.aqmd.gov

cc: BB file
SP
NC
Folder

DATE: 01-16-03

EQUIPMENT LOCATED AT: 9028 DICE RD
SANTA FE SPRINGS, CA 90670

LEGAL OWNER OR OPERATOR CO. ID: 119512
KIK SO-CAL
9028 DICE RD
SANTA FE SPRINGS, CA 90670

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR:	2002	
F20850	BLEACH BLENDING	01-16-04
F20854	BLEACH PACKAGING	01-16-04
F20855	I C E (50-500 HP) EMERG OTHER, DIESEL	01-16-04
F20856	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-04
F20857	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-04
F20858	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-04
F20859	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-04
F32542	Scrubber, Controlling HCL or NH3 Vent ss	01-16-04
F32543	Scrubber, Controlling HCL or NH3 Vent ss	01-16-04
F45755	BLEACH PACKAGING	01-16-04

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
(909) 396-2000 • www.aqmd.gov

DATE: 01-06-04

EQUIPMENT LOCATED AT: 9028 DICE RD
SANTA FE SPRINGS, CA 90670

LEGAL OWNER CO. ID: 119512
OR OPERATOR KIK SO-CAL
9028 DICE RD
SANTA FE SPRINGS, CA 90670

PERMIT/APPLICATION RENEWALS

PERMIT/ APPL NBR	EQUIPMENT DESCRIPTION	NEXT RENEWAL DATE
BILLING YEAR :	2003	
F20850	BLEACH BLENDING	01-16-05
F20854	BLEACH PACKAGING	01-16-05
F20855	I C E (50-500 HP) EMERG OTHER, DIESEL	01-16-05
F20856	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-05
F20857	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-05
F20858	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-05
F20859	STORAGE TANK MISC INORGANIC CHEMICALS	01-16-05
F32542	Scrubber, Controlling HCL or NH3 Vent ss	01-16-05
F32543	Scrubber, Controlling HCL or NH3 Vent ss	01-16-05
F45755	BLEACH PACKAGING	01-16-05

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
21865 East Copley Drive, Diamond Bar, CA 91765

Permit No.
F7083
A/N 326719

PERMIT TO CONSTRUCT/OPERATE

This initial permit must be renewed ANNUALLY unless the equipment is moved, or changes ownership.
If the billing for annual renewal fee (Rule 301.f) is not received by the expiration date, contact the District.

Legal Owner or Operator:

T-CHEM PRODUCTS INC
9028 DICE RD
SANTA FE SPRINGS, CA 90670

ID 092873

Equipment Location: 9028 DICE RD, SANTA FE SPRINGS, CA 90670

Equipment Description:

HOUSEHOLD BLEACH MANUFACTURING SYSTEM CONSISTING OF:

1. REACTOR, 1'-0" DIA. X 4'-0" H, WITH ONE STANDBY 15 HP CAUSTIC FEED PUMP.
2. HEAT EXCHANGER, RECYCLE, 0'-8" DIA. X 5'-0" H.
3. RECYCLE TANK, 4'-0" DIA. X 5'-0" H., WITH ONE 15 HP RECYCLE PUMP.
4. TWO TANKS, 50% CAUSTIC, EACH 8'-6" DIA. X 22'-0" H , 9,000 GALLON CAPACITY
5. FIVE STORAGE TANKS, BLEACH PRODUCT, EACH 12'-0" DIA. X 30'-0", 24,000 GALLON CAPACITY.
6. SLUDGE TANK, 8'-0" DIA. X 14'-0" H., 5,000 GALLON CAPACITY.
7. STORAGE TANK, HYDROGEN PEROXIDE, FMC, 4'-0" DIA. X 6'-3" H., 500 GALLON CAPACITY.
8. COOLING TOWER, MARLEY, MODEL NO 91190, WITH ONE 40 HP CIRCULATION PUMP.
9. TRANSFER PUMP, 50% CAUSTIC SOLUTION, 7.5 HP.
10. TRANSFER PUMP, CAUSTIC SOLUTIONS, 20 HP.
11. TRANSFER PUMP, BLEACH PRODUCT, 7.5 HP.
12. PRODUCT PUMP, BLEACH BOTTLING, 20 HP.
13. SLUDGE PUMP, WILDEN CHAMP, AIR DRIVEN.
14. CHLORINE TANK CAR PADDING SYSTEM.
15. CAUSTIC TANK, SPARGER TYPE, 4'-0" DIA. X 12'-0" H., 1200 GALLON CAPACITY, 18% CAUSTIC, SERVING THE CHLORINE RECYCLE TANK AND OFF-LOADING LINES

ORIGINAL

16. STORAGE TANK, 18% CAUSTIC, 12'-0" DIA. X 26'-0" H

17 SCRUBBING UNIT, 14'-3" L. X 8'-6" W. X 8'-5" H , 3,360 GALLON CAPACITY, WITH ONE 20 HP PUMP MOTOR AND ONE 7 5 HP FAN MOTOR

Conditions:

1 OPERATION OF THIS EQUIPMENT SHALL BE CONDUCTED IN ACCORDANCE WITH ALL DATA AND SPECIFICATIONS SUBMITTED WITH THE APPLICATION UNDER WHICH THIS PERMIT IS ISSUED UNLESS OTHERWISE NOTED BELOW

2. THIS EQUIPMENT SHALL BE PROPERLY MAINTAINED AND KEPT IN GOOD OPERATING CONDITION AT ALL TIMES.

3. ALL RESIDUAL CHLORINE FROM THE PROCESS OFF-LOADING LINES AND THE RECYCLE TANK SHALL BE VENTED TO THE SCRUBBER.

4. WHEN IN USE, THE pH OF THE ALKALINE SOLUTION IN THE CAUSTIC TANK OR SPARGER TANK SHALL NOT BE LESS THAN 12 OR EQUIVALENT MILLIVOLT INDICATOR READING.

5. THE pH OR MILLIVOLT READING OF THE CAUSTIC SOLUTION SHALL BE MONITORED AND RECORDED TO SHOW COMPLIANCE WITH CONDITION NO. 4. THE RECORDS SHALL BE MAINTAINED AND KEPT ON FILE FOR AT LEAST TWO YEARS, AND SHALL BE MADE AVAILABLE UPON REQUEST BY DISTRICT PERSONNEL.

CONTINUATION OF PERMIT TO CONSTRUCT/OPERATE

NOTICE

IN ACCORDANCE WITH RULE 206, THIS PERMIT TO OPERATE OR COPY SHALL BE POSTED ON OR WITHIN 8 METERS OF THE EQUIPMENT.

THIS PERMIT DOES NOT AUTHORIZE THE EMISSION OF AIR CONTAMINANTS IN EXCESS OF THOSE ALLOWED BY DIVISION 26 OF THE HEALTH AND SAFETY CODE OF THE STATE OF CALIFORNIA OR THE RULES OF THE AIR QUALITY MANAGEMENT DISTRICT. THIS PERMIT CANNOT BE CONSIDERED AS PERMISSION TO VIOLATE EXISTING LAWS, ORDINANCES, REGULATIONS OR STATUTES OF OTHER GOVERNMENT AGENCIES.

EXECUTIVE OFFICER

Dorris M. Bailey

By Dorris M. Bailey/drh
5/08/1997

ORIGINAL

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
21865 East Copley Drive, Diamond Bar, CA 91765

PERMIT TO OPERATE

Permit No
D60668
A/N 272042
Page 1

This initial permit shall be renewed by 1/16 ANNUALLY unless the equipment is moved, or changes ownership. If the billing for annual renewal fee (Rule 301.f) is not received by the expiration date, contact the District.

Legal Owner Or Operator: T-CHEM PRODUCTS, INC.
9028 DICE ROAD
SANTA FE SPRINGS, CA. 90670
ATTN: GREG WIESE

ID 92873

Equipment located at: SAME AS ABOVE

Equipment Description:

STORAGE TANK NO. 45, AQUA AMMONIA, 8' -0" DIA. X 14' -0" H.

Conditions:

1. OPERATION OF THIS EQUIPMENT SHALL BE CONDUCTED IN COMPLIANCE WITH ALL DATA AND SPECIFICATIONS SUBMITTED WITH THE APPLICATION UNDER WHICH THIS PERMIT IS ISSUED UNLESS OTHERWISE NOTED BELOW.

2. THIS EQUIPMENT SHALL BE PROPERLY MAINTAINED AND KEPT IN GOOD OPERATING CONDITION AT ALL TIMES.

NOTICE

IN ACCORDANCE WITH RULE 206, THIS PERMIT TO OPERATE OR COPY SHALL BE POSTED ON OR WITHIN 8 METERS OF THE EQUIPMENT.

THIS PERMIT DOES NOT AUTHORIZE THE EMISSION OF AIR CONTAMINANTS IN EXCESS OF THOSE ALLOWED BY DIVISION 26 OF THE HEALTH AND SAFETY CODE OF THE STATE OF CALIFORNIA OR THE RULES OF THE AIR QUALITY MANAGEMENT DISTRICT. THIS PERMIT CANNOT BE CONSIDERED AS PERMISSION TO VIOLATE EXISTING LAWS, ORDINANCES, REGULATIONS OR STATUTES OF OTHER GOVERNMENT AGENCIES.

EXECUTIVE OFFICER

Dorris M. Bailey

By Dorris M. Bailey/cb
August 21, 1992

ORIGINAL

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
21865 East Copley Drive, Diamond Bar, CA 91765

PERMIT TO OPERATE 20857

Permit No.
D60669
A/N 272043
Page 1

This initial permit shall be renewed by 1/16 ANNUALLY unless the equipment is moved, or changes ownership. If the billing for annual renewal fee (Rule 301.f) is not received by the expiration date, contact the District.

Legal Owner *ID 92873*
Or Operator: T-CHEM PRODUCTS, INC.
9028 DICE ROAD
SANTA FE SPRINGS, CA. 90670
ATTN: GREG WIESE

Equipment located at: SAME AS ABOVE

Equipment Description:

STORAGE TANK NO. 51, AQUA AMMONIA, 8' -0" DIA. X 13' -0" H., WITH A 55 GALLON VENT TRAP (COMMON).

Conditions:

1. OPERATION OF THIS EQUIPMENT SHALL BE CONDUCTED IN COMPLIANCE WITH ALL DATA AND SPECIFICATIONS SUBMITTED WITH THE APPLICATION UNDER WHICH THIS PERMIT IS ISSUED UNLESS OTHERWISE NOTED BELOW.

2. THIS EQUIPMENT SHALL BE PROPERLY MAINTAINED AND KEPT IN GOOD OPERATING CONDITION AT ALL TIMES.

3. THIS TANK SHALL NOT BE FILLED UNLESS THE VENT GASES ARE SPARGED AT LEAST 18 INCHES BELOW THE LIQUID SURFACE OF A TRAP CONTAINING OVERFLOWING WATER.

NOTICE

IN ACCORDANCE WITH RULE 206, THIS PERMIT TO OPERATE OR COPY SHALL BE POSTED ON OR WITHIN 8 METERS OF THE EQUIPMENT.

THIS PERMIT DOES NOT AUTHORIZE THE EMISSION OF AIR CONTAMINANTS IN EXCESS OF THOSE ALLOWED BY DIVISION 26 OF THE HEALTH AND SAFETY CODE OF THE STATE OF CALIFORNIA OR THE RULES OF THE AIR QUALITY MANAGEMENT DISTRICT. THIS PERMIT CANNOT BE CONSIDERED AS PERMISSION TO VIOLATE EXISTING LAWS, ORDINANCES, REGULATIONS OR STATUTES OF OTHER GOVERNMENT AGENCIES.

EXECUTIVE OFFICER

Barrie M. Bailey
By Dorris M. Bailey/cb
August 21, 1992

ORIGINAL

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
21865 East Copley Drive, Diamond Bar, CA 91765

PERMIT TO OPERATE

Permit No.
D60670
A/N 272044
Page 1

This initial permit shall be renewed by 1/16 ANNUALLY unless the equipment is moved, or changes ownership. If the billing for annual renewal fee (Rule 301.f) is not received by the expiration date, contact the District.

Legal Owner Or Operator: T-CHEM PRODUCTS, INC.
9028 DICE ROAD
SANTA FE SPRINGS, CA. 90670
ATTN: GREG WIESE

ID 92873

Equipment located at: SAME AS ABOVE

Equipment Description:

HOUSEHOLD BLEACH MANUFACTURING SYSTEM CONSISTING OF:

1. RIGHT CONTACT TANKS, CHLORINE, 8' -0" DIA. X 14' -0" H., EACH 5,000 GAL. CAPACITY.
2. SURGE TANK, PRODUCT, 8' -0" DIA. X 14' -0" H., 5000 GAL. CAPACITY.
3. TWO SURGE TANKS, PRODUCT, 12' -0" DIA. X 30' -0" H., EACH 24,000 GAL CAPACITY.
4. TWO FILLING STATIONS, BOTTLE.

Conditions:

1. OPERATION OF THIS EQUIPMENT SHALL BE CONDUCTED IN COMPLIANCE WITH ALL DATA AND SPECIFICATIONS SUBMITTED WITH THE APPLICATION UNDER WHICH THIS PERMIT IS ISSUED UNLESS OTHERWISE NOTED BELOW.

2. THIS EQUIPMENT SHALL BE PROPERLY MAINTAINED AND KEPT IN GOOD OPERATING CONDITION AT ALL TIMES.

NOTICE

IN ACCORDANCE WITH RULE 206, THIS PERMIT TO OPERATE OR COPY SHALL BE POSTED ON OR WITHIN 8 METERS OF THE EQUIPMENT.

THIS PERMIT DOES NOT AUTHORIZE THE EMISSION OF AIR CONTAMINANTS IN EXCESS OF THOSE ALLOWED BY DIVISION 26 OF THE HEALTH AND SAFETY CODE OF THE STATE OF CALIFORNIA OR THE RULES OF THE AIR QUALITY MANAGEMENT DISTRICT. THIS PERMIT CANNOT BE CONSIDERED AS PERMISSION TO VIOLATE EXISTING LAWS, ORDINANCES, REGULATIONS OR STATUTES OF OTHER GOVERNMENT AGENCIES.

EXECUTIVE OFFICER

Dorris M. Bailey

By Dorris M. Bailey/eb
August 21, 1992

ORIGINAL

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
21865 East Copley Drive, Diamond Bar, CA 91765

PERMIT TO OPERATE

20853

Permit No.
D60676
A/N 272051
Page 1

This initial permit shall be renewed by 1/16 ANNUALLY unless the equipment is moved, or changes ownership. If the billing for annual renewal fee (Rule 301.f) is not received by the expiration date, contact the District.

Legal Owner Or Operator: T-CHEM PRODUCTS, INC.
9028 DICE ROAD
SANTA FE SPRINGS, CA. 90670
ATTN: GREG WIESE

ID 92873

Equipment located at: SAME AS ABOVE

Equipment Description:

STORAGE TANK NO. 48, AQUA AMMONIA, 8' -0" DIA. X 14' -0" H.

Conditions:

1. OPERATION OF THIS EQUIPMENT SHALL BE CONDUCTED IN COMPLIANCE WITH ALL DATA AND SPECIFICATIONS SUBMITTED WITH THE APPLICATION UNDER WHICH THIS PERMIT IS ISSUED UNLESS OTHERWISE NOTED BELOW.

2. THIS EQUIPMENT SHALL BE PROPERLY MAINTAINED AND KEPT IN GOOD OPERATING CONDITION AT ALL TIMES.

NOTICE

IN ACCORDANCE WITH RULE 206, THIS PERMIT TO OPERATE OR COPY SHALL BE POSTED ON OR WITHIN 8 METERS OF THE EQUIPMENT.

THIS PERMIT DOES NOT AUTHORIZE THE EMISSION OF AIR CONTAMINANTS IN EXCESS OF THOSE ALLOWED BY DIVISION 26 OF THE HEALTH AND SAFETY CODE OF THE STATE OF CALIFORNIA OR THE RULES OF THE AIR QUALITY MANAGEMENT DISTRICT. THIS PERMIT CANNOT BE CONSIDERED AS PERMISSION TO VIOLATE EXISTING LAWS, ORDINANCES, REGULATIONS OR STATUTES OF OTHER GOVERNMENT AGENCIES.

EXECUTIVE OFFICER

Dorris M. Bailey

By Dorris M. Bailey/eb
August 21, 1992

ORIGINAL

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
21865 East Copley Drive, Diamond Bar, CA 91765

PERMIT TO OPERATE

Permit No.
D60680
A/N 272056
Page 1

This initial permit shall be renewed by 1/16 ANNUALLY unless the equipment is moved, or changes ownership. If the billing for annual renewal fee (Rule 301.f) is not received by the expiration date, contact the District.

Legal Owner Or Operator: T-CHEM PRODUCTS, INC.
9028 DICE ROAD
SANTA FE SPRINGS, CA. 90670
ATTN: GREG WIESE

ID 92873

Equipment located at: SAME AS ABOVE

Equipment Description:

STORAGE TANK NO. 49, AQUA AMMONIA, 8' -0" DIA. X 13' -0" H.

Conditions:

1. OPERATION OF THIS EQUIPMENT SHALL BE CONDUCTED IN COMPLIANCE WITH ALL DATA AND SPECIFICATIONS SUBMITTED WITH THE APPLICATION UNDER WHICH THIS PERMIT IS ISSUED UNLESS OTHERWISE NOTED BELOW.

2. THIS EQUIPMENT SHALL BE PROPERLY MAINTAINED AND KEPT IN GOOD OPERATING CONDITION AT ALL TIMES.

NOTICE

IN ACCORDANCE WITH RULE 206, THIS PERMIT TO OPERATE OR COPY SHALL BE POSTED ON OR WITHIN 8 METERS OF THE EQUIPMENT.

THIS PERMIT DOES NOT AUTHORIZE THE EMISSION OF AIR CONTAMINANTS IN EXCESS OF THOSE ALLOWED BY DIVISION 26 OF THE HEALTH AND SAFETY CODE OF THE STATE OF CALIFORNIA OR THE RULES OF THE AIR QUALITY MANAGEMENT DISTRICT. THIS PERMIT CANNOT BE CONSIDERED AS PERMISSION TO VIOLATE EXISTING LAWS, ORDINANCES, REGULATIONS OR STATUTES OF OTHER GOVERNMENT AGENCIES.

EXECUTIVE OFFICER

Dorris M. Bailey

By Dorris M. Bailey/eb
August 21, 1992

ORIGINAL

South Coast Air Quality Management District

Facility Equipment List Report

Facility: 119512 KIK SO-CAL
Last Inspection:
SIC: 2841
Inspector.
Location Address: 9028 DICE RD, SANTA FE SPRINGS 90670 Sector:RM
Mailing Address: 9028 DICE RD, SANTA FE SPRINGS 90670 Sector:RM
Comment:

MR: 0405
TS: NONE
Assignment No.

Contact: GREG WIESE (562) 9062216
Quarter: 0100 - inspect in 2nd quarter, every year
On Hold: N Suspended N
Team:

Application No.	Permit No.	Permit Issue Date	Permit Status	Equipment Category	BCAT/CCAT Description	Application Date	Application Status
355132	F20850	6/10/99	ACTIVE	216100 BCAT	BLEACH BLENDING	5/7/99	PERMIT TO OPERATE GRANTED
355133	F20854	6/10/99	ACTIVE	216540 BCAT	BLEACH PACKAGING	5/7/99	PERMIT TO OPERATE GRANTED
355134	F20855	6/10/99	ACTIVE	048901 BCAT	I C E (50-500 HP) EMERG OTHER, DIESEL	5/7/99	PERMIT TO OPERATE GRANTED
355135	F20856	6/10/99	ACTIVE	221900 BCAT	STORAGE TANK MISC INORGANIC CHEMICALS	5/7/99	PERMIT TO OPERATE GRANTED
355136	F20857	6/10/99	ACTIVE	221900 BCAT	STORAGE TANK MISC INORGANIC CHEMICALS	5/7/99	PERMIT TO OPERATE GRANTED
355137	F20858	6/10/99	ACTIVE	221900 BCAT	STORAGE TANK MISC INORGANIC CHEMICALS	5/7/99	PERMIT TO OPERATE GRANTED
355138	F20859	6/10/99	ACTIVE	221900 BCAT	STORAGE TANK MISC INORGANIC CHEMICALS	5/7/99	PERMIT TO OPERATE GRANTED

NEW FACILITY ID #
+ NEW PERMITS #S
F20854 ADD 060670 BKM mod. KRL

Inspector: _____ Date: _____ Reviewed By: _____ Date: _____

South Coast
Air Quality Management District
21865 E. Copley Drive, Diamond Bar, CA 91765-4182
(909) 396-2000

Date: 06/17/99 07:50 AM Receipt Nbr: C11941

Facility: KIK SOCAL, INC.

Location Address: 9028 DICE ROAD

City: SANTA FE SPRINGS State: CA Zip: 90670 —

Check nbr.	Amount	Check Nbr.	Amount
056983	$608.77		$.00
	$ 00		$.00
	$.00		$ 00
	$ 00		$.00
	$.00		$ 00

Cash: $.00

Total: $608.77

Comments: (1)APPL. FOR PERMIT TO CONSTRUCT - MODIFICATION

Received By: AQMD Cashier

Cashier Signature:

Original Copy

KIK
SOCAL

9028 DICE ROAD
SANTA FE SPRINGS
CA 90670

TELEPHONE
562-946-6427
FAX
562-941-9780

F20854

~~D60670~~ PERMIT MODIFICATION

Household Bleach Manufacturing System consisting of:

1) Three surge tanks, product, 12'-0" dia. x 30'-0" high each 24,000 gal capacity.
2) Two surge tanks, product, 2'-1" dia. x 4'-2" high 100 gal capacity.
3) Two filling stations, bottle
4) One surge tank 2'-0" dia. x 4'-0" 84 gal capacity.
5) One filling station pails and drums.

Box 4944
mond Bar, CA 91765
909) 396-2000

APPLICATION FOR PERMIT TO CONSTRUCT AND PERMIT TO OPERATE
FORM 400 - A

Non-Title V Facilities: This form must be accompanied by one or more 400-E-xx series form(s) Complete this side of form only
Title V Facilities: Complete both sides of this form. Include additional forms as necessary.

NC/NOV NUMBER:	
INSPECTOR	SECTOR
ISSUE DATE	

Section I - Company Information

LEGAL NAME OF OPERATOR: KIK SoCal, Inc.
☒ IRS OR ☐ S S. NUMBER: 9 5 4 3 7 3 2 4 6

PERMIT TO BE ISSUED TO (SEE INSTRUCTIONS): KIK SoCal, Inc.

BUSINESS MAILING ADDRESS: 9028 Dice Road, Santa Fe Springs, CA 90670

PERMIT MAILING ADDRESS, IF DIFFERENT FROM BUSINESS MAILING ADDRESS:

TYPE OF ORGANIZATION
☒ Corporation ☐ Limited Partnership ☐ Government Entity
☐ Individual ☐ General Partnership ☐ Other (Fill in):

ARE YOU A SMALL BUSINESS? (SEE INSTRUCTIONS) ☒ Yes ☐ No
AVERAGE ANNUAL GROSS RECEIPTS $
NUMBER OF EMPLOYEES
IS YOUR BUSINESS 51 % OR MORE WOMAN/MINORITY OWNED? ☐ Yes ☒ No

THIS SECTION IS REQUIRED FOR ALL APPLICATIONS FOR NEW CONSTRUCTION OR MAJOR MODIFICATIONS.
ARE ALL MAJOR SOURCES UNDER SAME OWNERSHIP IN CALIFORNIA IN COMPLIANCE WITH FEDERAL, STATE, AND LOCAL AIR POLLUTION CONTROL RULES? ☐ Yes ☐ No

ARE YOU THE OWNER OF THE EQUIPMENT UNDER THIS APPLICATION? ☒ Yes ☐ No ☐ IRS OR ☐ S. S. NUMBER OF OWNER
IF NO, ENTER THE LEGAL NAME OF OWNER

Section II - Facility Information

EQUIPMENT ADDRESS/LOCATION: 9028 Dice Road (NUMBER/STREET)
Santa Fe Springs (CITY OR COMMUNITY) CA, 90670 (ZIP CODE)
FACILITY NAME: KIK SoCal, Inc.
FACILITY ID NUMBER: ~~119512~~ ~~0928743~~

PRINT NAME OF CONTACT PERSON: Greg Wiese
TITLE OF CONTACT PERSON: Western Regional Manager

TYPE OF BUSINESS AT THIS FACILITY: Mfg. of Household Cleaning Products
PRIMARY SIC CODE FOR THIS FACILITY: 2841
NUMBER OF EMPLOYEES AT THIS FACILITY: 80

CONTACT PERSON'S TELEPHONE NUMBER: (562) 906-2216
CONTACT PERSON'S FAX NUMBER: (562) 941-9780
CONTACT PERSON'S E-MAIL ADDRESS: FOIA ex 6, Personal Privacy

Section III - Application Type

DESCRIPTION OF EQUIPMENT: Bleach Packaging
PREVIOUS PERMIT #(S): ~~D60670~~ F22554

APPLICATION FOR (SEE INSTRUCTIONS):
☐ NEW CONSTRUCTION ☒ MODIFICATION ☐ CHANGE OF LOCATION
☐ EXISTING EQUIPMENT WITHOUT PERMIT ☐ CHANGE OF PERMITTEE ☐ CHANGE OF PERMIT CONDITION
☐ EXISTING EQUIPMENT WITH EXPIRED PERMIT

ARE YOU SUBMITTING MULTIPLE APPLICATIONS FOR EQUIPMENT IDENTICAL TO THAT DESCRIBED ABOVE? ☐ Yes ☐ No

☐ **APPLICATION FOR NON-TITLE V EQUIPMENT PERMIT. CHECK THE SUPPLEMENTAL SERIES 400-E-xx FORM(S) SUBMITTED WITH THIS 400-A FORM:**

____ 400-E-1	• PARTICULATE MATTER (PM_{10}) CONTROL EQUIPMENT	____ 400-E-13	• INTERNAL COMBUSTION EQUIPMENT
____ 400-E-2	• VOLATILE ORGANIC COMPOUND (VOC) CONTROL EQUIPMENT	____ 400-E-14	• OPEN PROCESS TANK
____ 400-E-3	• SCRUBBER	____ 400-E-14a	• OPEN PROCESS TANK, PROCESS LINE
____ 400-E-4	• ABRASIVE BLASTING EQUIPMENT	____ 400-E-15	• PRINTING EQUIPMENT
____ 400-E-6	• DEGREASER	____ 400-E-16	• SOLID MATERIALS STORAGE EQUIPMENT
____ 400-E-7	• DRY CLEANING EQUIPMENT	____ 400-E-17	• SPRAY BOOTH/OPEN SPRAY
____ 400-E-8	• ETHYLENE OXIDE STERILIZER	____ 400-E-17a	• POWDER SPRAY BOOTH
____ 400-E-9	• EXTERNAL COMBUSTION EQUIPMENT	____ 400-E-18	• STORAGE TANK (LIQUID & GASEOUS MAT'L)
____ 400-E-10	• FOOD BROILER/FRYER	____ 400-E-19	• WAVE SOLDER MACHINE
____ 400-E-11	• FUEL DISPENSING AND STORAGE EQUIPMENT	____ 400-E-20	• ASBESTOS REMOVAL EQUIPMENT
____ 400-E-12	• GAS TURBINE	____ NONE	• ADDITIONAL INFORMATION SUBMITTED AS REQUESTED ON FORM 400-E-GI

☐ **APPLICATION FOR TITLE V FACILITY PERMIT. PROVIDE INFORMATION REQUESTED ON REVERSE SIDE OF THIS FORM.**

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT.
SIGNATURE OF RESPONSIBLE OFFICIAL OF FIRM:
TITLE OF RESPONSIBLE OFFICIAL OF FIRM: Western Regional Manager

TYPE OR PRINT NAME OF RESPONSIBLE OFFICIAL OF FIRM: Greg J. Wiese
RESPONSIBLE OFFICIAL'S TELEPHONE NUMBER: (562) 906-2216
DATE SIGNED: / /

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT.
SIGNATURE OF PREPARER, IF PREPARED BY PERSON OTHER THAN RESPONSIBLE OFFICIAL OF FIRM:
TITLE OF PREPARER: Safety & Environmental Manager

TYPE OR PRINT NAME OF PREPARER, IF PREPARED BY PERSON OTHER THAN RESPONSIBLE OFFICIAL OF FIRM: Derrell M. Johnson
PREPARER'S TELEPHONE NUMBER: (562) 906-2240
DATE SIGNED: / /

TITLE V FACILITIES ONLY: COMPLETE OTHER SIDE

AQMD USE ONLY	APPLICATION/TRACKING #	PROJECT #	TYPE B C D	EQUIPMENT CATEGORY CODE:	FEE SCHEDULE: $	VALIDATION
	____ ____ ____ ____ ____ ____			____ ____ ____ ____ ____ ____ / ____		

ENG. A R DATE	ENG. A R DATE	CLASS I III IV	ASSIGNMENT UNIT ENGINEER	ENF. SECT.	CHECK/MONEY ORDER #	AMOUNT $

FORM 400-A, Rev. 10/97

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT
21865 East Copley Drive, Diamond Bar, CA 91765

PERMIT TO OPERATE

D60670
A/N 272044
Page 1

[redacted] permit shall be renewed by 1/16 ANNUALLY unless the equipment is moved, or changes ownership. If billing for annual renewal fee (Rule 301.f) is not received by the expiration date, contact the District.

Legal Owner Or Operator: T-CHEM PRODUCTS, INC.
9028 DICE ROAD
SANTA FE SPRINGS, CA. 90670
ATTN: GREG WIESE

ID 92873

Equipment located at: SAME AS ABOVE

Equipment Description:

HOUSEHOLD BLEACH MANUFACTURING SYSTEM CONSISTING OF:

1. RIGHT-CONTACT TANKS, CHLORINE, 8'-0" DIA. X 14'-0" H., EACH 5,000 GAL. CAPACITY.
2. SURGE TANK, PRODUCT, 8'-0" DIA. X 14'-0" H., 5000 GAL. CAPACITY.
3. TWO SURGE TANKS, PRODUCT, 12' -0" DIA. X 30' -0" H., EACH 24,000 GAL CAPACITY.
4. TWO FILLING STATIONS, BOTTLE.

Conditions:

1. OPERATION OF THIS EQUIPMENT SHALL BE CONDUCTED IN COMPLIANCE WITH ALL DATA AND SPECIFICATIONS SUBMITTED WITH THE APPLICATION UNDER WHICH THIS PERMIT IS ISSUED UNLESS OTHERWISE NOTED BELOW.

2. THIS EQUIPMENT SHALL BE PROPERLY MAINTAINED AND KEPT IN GOOD OPERATING CONDITION AT ALL TIMES.

NOTICE

IN ACCORDANCE WITH RULE 206, THIS PERMIT TO OPERATE OR COPY SHALL BE POSTED ON OR WITHIN 8 METERS OF THE EQUIPMENT.

THIS PERMIT DOES NOT AUTHORIZE THE EMISSION OF AIR CONTAMINANTS IN EXCESS OF THOSE ALLOWED BY DIVISION 26 OF THE HEALTH AND SAFETY CODE OF THE STATE OF CALIFORNIA OR THE RULES OF THE AIR QUALITY MANAGEMENT DISTRICT. THIS PERMIT CANNOT BE CONSIDERED AS PERMISSION TO VIOLATE EXISTING LAWS, ORDINANCES, REGULATIONS OR STATUTES OF OTHER GOVERNMENT AGENCIES.

EXECUTIVE OFFICER

Barrie M. Bailey
By Dorris M. Bailey/eb
August 21, 1992

ORIGINAL

South Coast
Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

June 16, 2006

Bob Brown
KIK So-Cal
9028 Dice Road
Santa Fe Springs, CA 90670

Re: Rule 222 Filing for Boilers/Water Heaters (Form 222-B)

Thank you for submitting your application for a boiler/water heater (1-2 million Btu/hr) to the South Coast Air Quality Management District. Your application (Form 222-B) has been reviewed and filed pursuant to Rule 222 requirements. A copy of the validated Form 222-B is attached for your record.

This equipment must be operated in accordance with the attached operating parameters. A copy of your validated Form 222-B and operating parameters must be kept on site.

Please note that due to the size of this equipment, i.e. $\leq$ 2 million BTU/hr, it is not subject to a written permit pursuant to Rule 219. However, it is subject to the Filing Program under Rule 222, the purpose of which is to provide an alternative to permits.

If you have any questions concerning Rule 222 filing program, please contact Winnie Cho at (909) 396-2547 or Sheila Caballero at (909) 396-3441.

Attachments

South Coast Air Quality Management District
P. O. Box 4944
Diamond Bar, CA 91765
(909) 396-2000

APPLICATION FOR RULE 222
FORM 222 – B
BOILERS AND PROCESS HEATERS

This form is to be used only for boilers and process heaters subject to Rule 222 – Filing Requirements for Specific Emission Sources not Requiring a Written Permit Pursuant to Regulation II.

Section I – Company Information

LEGAL NAME OF OPERATOR: KIK So-Cal
☒ IRS OR ☐ S. S. NUMBER: FOIA ex 6, Personal

BUSINESS MAILING ADDRESS: 9028 Dice Road, Sante Fe Springs, CA 90670

TYPE OF ORGANIZATION
☒ Corporation ☐ Limited Partnership ☐ Government Entity
☐ Individual ☐ General Partnership ☐ Other (Fill In):

ARE YOU THE OWNER OF THE EQUIPMENT UNDER THIS APPLICATION? ☒ Yes ☐ No ☐ IRS OR ☐ S. S. NUMBER OF OWNER

IF NO, ENTER THE LEGAL NAME OF OWNER _____

Section II – Facility Information

EQUIPMENT ADDRESS/LOCATION: 9028 Dice Road (NUMBER/STREET)
Sante Fe Springs (CITY OR COMMUNITY) CA, 90670 (ZIP CODE)

FACILITY NAME: KIK So-Cal
FACILITY ID NUMBER (If Known): 119512

TYPE OF BUSINESS AT THIS FACILITY: Bleach Manufacturing
PRIMARY SIC CODE FOR THIS FACILITY: 2841

PRINT NAME OF CONTACT PERSON: Bob Brown
TITLE OF CONTACT PERSON: General Manager

CONTACT PERSON'S TELEPHONE NUMBER: (562) 746-6427
CONTACT PERSON'S FAX NUMBER: (562) 941- 9780
CONTACT PERSON'S E-MAIL ADDRESS: bbrown@kikcorp.com

Section III – Application Type

APPLICATION FOR:
☐ NEW EQUIPMENT
☒ EXISTING EQUIPMENT WITHOUT FILING
☐ EXISTING EQUIPMENT WITH EXPIRED FILING
☐ MODIFICATION
☐ CHANGE OF OWNERSHIP
☐ CHANGE OF LOCATION

BOILERS & PROCESS HEATERS EQUIPMENT INFORMATION*
☐ MANUFACTURED BEFORE 1/1/92 ☒ MANUFACTURED AFTER 1/1/92

MANUFACTURER PARKER
MODEL NUMBER 148 SERIAL NUMBER 44123
EQUIPMENT RATING (BTU/HOUR) 1,995,000

* ONLY EQUIPMENT WITH A RATED HEAT INPUT FROM 1,000,000 BTU PER HOUR UP TO AND INCLUDING 2,000,000 BTU PER HOUR.

RULE 222 FILING PROCESSED
JUN 16 2006
AREA SOURCES

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT.
SIGNATURE OF RESPONSIBLE OFFICIAL OF FIRM: [signature] TITLE OF RESPONSIBLE OFFICIAL OF FIRM: GENERAL MANAGER

TYPE OR PRINT NAME OF RESPONSIBLE OFFICIAL OF FIRM: ROBERT R. BROWN
RESPONSIBLE OFFICIAL'S TELEPHONE NUMBER: (562) 906-2244
DATE SIGNED: 5/1/06

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT.
SIGNATURE OF PREPARER, IF PREPARED BY PERSON OTHER THAN RESPONSIBLE OFFICIAL OF FIRM TITLE OF PREPARER

TYPE OR PRINT NAME OF PREPARER, IF PREPARED BY PERSON OTHER THAN RESPONSIBLE OFFICIAL OF FIRM
PREPARER'S TELEPHONE NUMBER: ( ) -
DATE SIGNED: / /

AQMD USE ONLY	APPLICATION/TRACKING #			EQUIPMENT CATEGORY CODE:	FEE SCHEDULE:	VALIDATION
					$	05/31/06
A R DATE	A R DATE		ASSIGNMENT UNIT	ENF. SECT.	CHECK/MONEY ORDER # 2981	AMOUNT $ 123.00

FORM 222-B, Revised 08/08/00

South Coast Air Quality Management District
P. O Box 4944
Diamond Bar, CA 91765
(909) 396-2000

APPLICATION FOR RULE 222
FORM 222 – B
BOILERS AND PROCESS HEATERS

This form is to be used only for boilers and process heaters subject to Rule 222 – Filing Requirements for Specific Emission Sources not Requiring a Written Permit Pursuant to Regulation II.

Section I – Company Information

LEGAL NAME OF OPERATOR: KIK So-Cal
☒ IRS OR ☐ S. S NUMBER: FOIA ex 6, Personal

BUSINESS MAILING ADDRESS: 9028 Dice Road, Sante Fe Springs, CA 90670

TYPE OF ORGANIZATION
☒ Corporation ☐ Limited Partnership ☐ Government Entity
☐ Individual ☐ General Partnership ☐ Other (Fill in):

ARE YOU THE OWNER OF THE EQUIPMENT UNDER THIS APPLICATION? ☒ Yes ☐ No ☐ IRS OR ☐ S. S NUMBER OF OWNER

IF NO, ENTER THE LEGAL NAME OF OWNER _____

Section II – Facility Information

EQUIPMENT ADDRESS/LOCATION: 9028 Dice Road (NUMBER/STREET)
Sante Fe Springs (CITY OR COMMUNITY) CA, 90670 (ZIP CODE)

FACILITY NAME: KIK So-Cal
FACILITY ID NUMBER (If Known): 119512

TYPE OF BUSINESS AT THIS FACILITY: Bleach Manufacturing
PRIMARY SIC CODE FOR THIS FACILITY: 2841

PRINT NAME OF CONTACT PERSON: Bob Brown
TITLE OF CONTACT PERSON: General Manager

CONTACT PERSON'S TELEPHONE NUMBER: (562) 746-6427
CONTACT PERSON'S FAX NUMBER: (562) 941- 9780
CONTACT PERSON'S E-MAIL ADDRESS: bbrown@kikcorp.com

Section III – Application Type

APPLICATION FOR:
☐ NEW EQUIPMENT
☒ EXISTING EQUIPMENT WITHOUT FILING
☐ EXISTING EQUIPMENT WITH EXPIRED FILING
☐ MODIFICATION
☐ CHANGE OF OWNERSHIP
☐ CHANGE OF LOCATION

BOILERS & PROCESS HEATERS EQUIPMENT INFORMATION*
☐ MANUFACTURED BEFORE 1/1/92 ☒ MANUFACTURED AFTER 1/1/92

MANUFACTURER PARKER

MODEL NUMBER 148 SERIAL NUMBER 44123

EQUIPMENT RATING (BTU/HOUR) 1,995,000

* ONLY EQUIPMENT WITH A RATED HEAT INPUT FROM 1,000,000 BTU PER HOUR UP TO AND INCLUDING 2,000,000 BTU PER HOUR

RULE 222 FILING PROCESSED
JUN 16 2006
AREA SOURCES

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT.
SIGNATURE OF RESPONSIBLE OFFICIAL OF FIRM: [signature] TITLE OF RESPONSIBLE OFFICIAL OF FIRM: GENERAL MANAGER

TYPE OR PRINT NAME OF RESPONSIBLE OFFICIAL OF FIRM: ROBERT R BROWN
RESPONSIBLE OFFICIAL'S TELEPHONE NUMBER: 562 906 2244
DATE SIGNED: 5/1/06

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT.
SIGNATURE OF PREPARER, IF PREPARED BY PERSON OTHER THAN RESPONSIBLE OFFICIAL OF FIRM TITLE OF PREPARER:

TYPE OR PRINT NAME OF PREPARER, IF PREPARED BY PERSON OTHER THAN RESPONSIBLE OFFICIAL OF FIRM
PREPARER'S TELEPHONE NUMBER: ( ) -
DATE SIGNED: / /

AQMD USE ONLY	APPLICATION/TRACKING #		EQUIPMENT CATEGORY CODE:	FEE SCHEDULE:	VALIDATION
				$	85/31/06
A R DATE	A R DATE	ASSIGNMENT UNIT	ENF. SECT.	CHECK/MONEY ORDER # 2980	AMOUNT $123/00

FORM 222-B, Revised 08/08/00

Operating Parameters for Rule 222
Boilers & Large Water Heaters/Process Heaters Rated from
1,000,000 up to and including 2,000,000 BTU per hour

Retain these operating parameters and your filing receipt on site.

General:

1. Operation of boilers or process heaters shall be conducted in compliance with all data and specifications submitted with the application under which this filing is issued unless otherwise noted below.

2. Boilers or process heaters shall be properly maintained and kept in good operating condition at all times.

3. Boilers or process heaters shall be operated, cleaned and maintained in accordance with the manufacturer's specification in its maintenance manual or any written bulletin supplied by the manufacturer/distributor of the equipment.

4. Boilers or process heaters shall be equipped with a manufacturer's rating plate that clearly indicates the make, model number, serial number, and rating of the equipment.

As required pursuant to Rule 1146.2 – EMISSIONS OF NOx FROM LARGE WATER HEATERS AND SMALL BOILERS.

1. On or after July 1, 2002, a natural gas-fired boiler or process heater manufactured prior to January 1, 1992 shall not be operated unless the certified NOx emissions level is less than or equal to 30 ppm of NOx emissions (at 3% O_2, dry) or 0.037 pound NOx, per million BTU of heat input and no more than 400 ppm of carbon monoxide (at 3% O_2, dry), as specified in Rule 1146.2(d).

2. On or after January 1, 2005, a natural gas-fired boiler or process heater manufactured after January 1, 1992 shall not be operated unless the certified NOx emissions level is less than or equal to 30 ppm of NOx emissions (at 3% O_2, dry) or 0.037 pound NOx, per million BTU of heat input and no more than 400 ppm of carbon monoxide (at 3% O_2, dry), as specified in Rule 1146.2(d).

Recordkeeping

1. Records shall be maintained in accordance with the requirements of Rule 222(d) (6). Owners/operators of sources subject to this rule shall maintain sufficient records to verify description of emission source, data necessary to estimate emissions, and information to determine compliance with applicable rules and regulations as specified by the Executive Officer.

State of California
DOSH, Pressure Vessel Unit
1515 Clay Street, Suite 1302
Oakland, CA 94612

DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
PRESSURE VESSEL UNIT
Phone (510) 622-3052 / Fax (510) 622-3063

OWNER/USER
KIK CORPORATION
9028 DICE RD
SANTA FE SPRINGS, CA 90670-2520

LOCATION: BOILER AREA

BILL TO:
*******AUTO**SCH 3-DIGIT 907 19 23
JIM RISSMAN
KIK CORPORATION
9028 DICE RD
SANTA FE SPGS CA 90670-2520

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
PRESSURE VESSEL UNIT
1515 Clay Street, Suite 1302
Oakland, CA 94612
Phone (510) 622-3052 Fax (510) 622-3063

Permit to Operate Steam Boiler

STATE SERIAL NO. **B034156-94** N.B.#/SER.# **44123**

BILL TO:
KIK CORPORATION
9028 DICE RD
SANTA FE SPGS CA 90670

OWNER/USER:
KIK CORPORATION
9028 DICE RD
SANTA FE SPRINGS, CA 90670-2520

LOCATION: BOILER AREA

This Permit to Operate shall be kept conspicuously posted under glass on or near the boiler or at a convenient location near the boiler and shall be made available to any authorized person(s). Labor Code Section 7680

Date of Inspection: 11/10/2006 **This Permit Expires: 11/10/2007**

This is to certify that the above described tank has been inspected, or caused to be inspected, by the Division of Occupational Safety & Health and may be operated at a pressure not to exceed 125 pounds per square inch.

Inspected By: EDWIN WIKSTROM **Employed By:** ZURICH INSURANCE COMPANY

State of California
DOSH, Pressure Vessel Unit
1515 Clay Street, Suite 1302
Oakland, CA 94612

DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
PRESSURE VESSEL UNIT
Phone (510) 622-3052 / Fax (510) 622-3063

OWNER/USER:
KIK CORPORATION
9028 DICE RD
SANTA FE SPRINGS, CA 90670-2520

LOCATION. BOILER AREA

BILL TO:
*******AUTO**SCH 3-DIGIT 907 19 23
JIM RISSMAN
KIK CORPORATION
9028 DICE RD
SANTA FE SPGS CA 90670-2520

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
PRESSURE VESSEL UNIT
1515 Clay Street, Suite 1302
Oakland, CA 94612
Phone (510) 622-3052 Fax (510) 622-3063

Permit to Operate Steam Boiler

STATE SERIAL NO. **B034155-94** N B.#/SER.# **44122**

BILL TO:
KIK CORPORATION
9028 DICE RD
SANTA FE SPGS CA 90670

OWNER/USER:
KIK CORPORATION
9028 DICE RD
SANTA FE SPRINGS, CA 90670-2520

LOCATION: BOILER AREA

This Permit to Operate shall be kept conspicuously posted under glass on or near the boiler or at a convenient location near the boiler and shall be made available to any authorized person(s). Labor Code Section 7680

Date of Inspection: 11/10/2006 **This Permit Expires: 11/10/2007**

This is to certify that the above described tank has been inspected, or caused to be inspected, by the Division of Occupational Safety & Health and may be operated at a pressure not to exceed 125 pounds per square inch.

Inspected By: EDWIN WIKSTROM **Employed By:** ZURICH INSURANCE COMPANY

ATOFINA

Fax Transmittal

TO: Charles Hempfield

DATE: August 23, 2000

SUBJECT: DOT exemption for GATX 45289

PAGES: 3 including the cover page

US Department of Transportation
Federal Railroad Administration

400 Seventh St., S.W.
Washington, D.C. 20590

FRA-00008234

EXPIRATION DATE: Sept. 24, 2000

1. **GRANTEE:** Atofina Chemicals, Inc.
200 Market Street
Philadelphia, PA 19103

2. **PURPOSE:** This approval authorizes the one-time movement of a DOT Specification tank car, containing the residue of a Class 2 material, that meets all applicable DOT requirements except that the tank car has a defective safety relief valve and is equipped with a Chlorine C kit. This approval provides no relief from any regulation other than as specifically stated.

3. **REGULATIONS AFFECTED:** 49 CFR 173.29(a), 173.31(a) and 179.15

4. **BASIS.** This authorization is based on the Grantees' written request of July 25, 2000, submitted in accordance with 49 CFR 174.50.

5. **HAZARDOUS MATERIALS** (49 CFR 172.101):

Hazardous Materials Description			
Proper Shipping Name	**Hazard Class/Division**	**Identification number**	**Packing Group**
[redacted]: Chlorine	2.3	UN 1017	N/A

6. **REPORTING MARK, NUMBER AND SPECIFICATION(S):**

GATX 45289, a DOT 105J500W tank car

7. **ROUTING, MOVEMENT and OPERATIONAL CONTROLS:**

a. Movement is authorized from the cars present location at the Santa Fe Springs yard, California to the Portland, Oregon, utilizing the most direct route via the Union Pacific Railroad.

b. Prior to transportation under the conditions of this approval, the grantee shall ensure that the tank car is inspected by a qualified inspector in accordance with 49 CFR 215.11, to determine that it complies with all other applicable regulatory

requirements, is in safe condition for transportation and will not leak when the car is subjected to normal transportation forces.

c. The shipping paper shall bear the notation "FRA-0008234" in a location that clearly associates the notation with the shipping description to which it applies.

d. The grantee of this approval shall ensure that all carriers are provided with a copy of this movement approval.

e. Prior to movement, the carrier shall ensure that the train crew is informed as to the circumstances surrounding the movement of this tank car and advise the crew of appropriate safety precautions to be taken during transport.

f. Manway (or bonnet) cover to be secured open or closed by means of chain, cable or other means to prevent movement and/or separation.

8. **COMPLIANCE**: Failure by any person to comply with any of the terms of this approval may result in penalties prescribed by Federal hazardous materials transportation law, 49 U.S.C. 5101 *et seq.*

9. **REPORTING REQUIREMENTS**:

Federal Railroad Administration
RRS-12, Mail Stop 25
1120 Vermont Avenue, N.W.
Washington, D.C. 20590
Attn: Raymond Kasey

a. The carrier is required to report any incident involving loss of packaging contents or packaging failure to the Associate Administrator for Hazardous Materials Safety (AAHMS), Research and Special Programs Administration (49 CFR 171.15 and 171.16 apply to any activity undertaken under this approval).

b. The Grantee shall notify the Federal Railroad Administration, via telephone, of any unusual occurrence affecting the movement by contacting the Hazardous Materials Division at (202) 493-6254, 493-6233 or 493-6247.

Issued at Washington, D.C.:

George Gavalla
Associate Administrator for Safety

August 23, 2000
(DATE)

OPTIONAL FORM 99 (7-90)
FAX TRANSMITTAL # of pages ▶ 2
To William Oister
Dept./Agency
Fax #
From Ray Kasey
Phone #
Fax #
NSN 7540-01-317-7368 5099-101 GENERAL SERVICES ADMINISTRATION

City of Santa Fe Springs
FIRE DEPARTMENT
FIRE PROTECTION DIVISION · ENVIRONMENTAL PROTECTION DIVISION

11300 GREENSTONE AVENUE · SANTA FE SPRINGS, CA 90670-4619
(562) 944-9713 · FAX (562) 941-1817 · fire@santafesprings.org

CERTIFIED UNIFIED PROGRAM AGENCY ANNUAL FEES

To Linda with fee check 10/5/98

TO:

T-CHEM PRODUCTS
9028 DICE
SANTA FE SPRINGS, CA 90670

FOR FACILITY LOCATED AT:

9028 DICE

Ck # 51297

ACCOUNT NUMBER	FEE PERIOD		DATE ISSUED	DATE DUE
00002221	FROM 07-01-1998	TO 06-30-1999	10-23-1998	11-30-1998

CODE	ACTIVITIES	PERMIT NUMBER	FEE
	HAZARDOUS MATERIALS FEE	TCHE09028DIC	900.00
	HAZARDOUS MATERIALS VOLUME FEE	TCHE09028DIC	480.00
	RAIN DIVERSION SYSTEM FEE		167.00
	INDUSTRIAL WASTE AND FIRE PERMIT FEE	00000423	2,352.00
	HAZARDOUS WASTE GENERATOR FEE	508346	681.00
	TIER PERMIT FEE		
	UNDERGROUND STORAGE TANK FEE		
	UNDERGROUND STORAGE TANK SURCHARGE FEE		
	CA ACCIDENTAL RELEASE PREVENTION FEE	00001006	2,400.00
	CA ACCIDENTAL RELEASE PREVENTION SURCHARGE		38.25
	STATE SURCHARGE FEE		10.00

RECEIVED
OCT 23 1998
T-CHEM PRODUCTS
FRONT OFFICE

DEPARTMENT USE ONLY

FEE PAID _____ CHECK NUMBER _____ REMARKS _____
PENALTY _____ DATED _____
TOTAL PAID _____

MAKE CHECKS PAYABLE TO THE CITY OF SANTA FE SPRINGS

TOTAL PAYMENT DUE 7,028.25

A _____ PENALTY WILL BE ASSESSED FOR "TOTAL FEE(S)" NOT RECEIVED BY 11-30-1998

CUSTOMER COPY