Revised Manifest Summary Report

SMITH ROLLER CORPORATION
SETHAN, INC. DBA SMITH ROLLER CO.

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
06/26/1990		89511453		3669.6	LBS		CMP		
06/26/1990		89511454		458.7	LBS		CMP		
04/29/1991		91016331		917.4	LBS		CMP		

Total Records: 3 Default Volume: 0 Total Waste Volume: 2.5229

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD 981396492
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
Smith Roller 611 S. Duggan
Azusa, Calif. 91702
4. Generator's Phone (818) 969-1831

A. State Manifest Document Number: 8
B. State Generator's ID:

5. Transporter 1 Company Name: Acto-Kleen
6. US EPA ID Number: CAD 095631719
C. State Transporter's ID:
D. Transporter's Phone:

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

9. Designated Facility Name and Site Address
Omega Recovery Services
12504 Whittier Blvd.
Whittier, Calif
10. US EPA ID Number: CAD 042245001
G. State Facility's ID: CAD042245001
H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Unspecified Solvet Mixture	01	dr	55 gal	G	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: Marie Greenlee
Signature: Marie Greenlee
Month Day Year: 06 26 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard Lipton
Signature: Richard Lipton
Month Day Year: 06 26 90

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: JM BALTIERRA
Signature: J. Balt
Month Day Year: 06 27 90

GENERATOR — TRANSPORTER — FACILITY

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

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

Do Not Write Below This Line

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

05/29/2001 "ORIGINAL MANIFEST COPY"

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD981396492 — Manifest Document No. 6331
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

A. State Manifest Document Number: 91016331

3. Generator's Name and Mailing Address
Smith Roller
611 S Duggan, Azusa CA 91702

B. State Generator's ID

4. Generator's Phone ( )

5. Transporter 1 Company Name: /a Actc Kleen — 6. US EPA ID Number: CAD095631719

C. State Transporter's ID: 208115
D. Transporter's Phone: 213 723-5111

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

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Omega Recovery Serv
12912 Whittier
Whittier CA — 10. US EPA ID Number: CAD042245001

G. State Facility's ID: CAD042245001
H. Facility's Phone: 213 698 0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE 1-1-1 TRICHLOROETHANE UN2831	001	DM	110	G	State 211 / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information
Goggles & Gloves
Emergency # during transport: **(800) 535-5053**

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: RAYMOND SMITH — Signature: Raymond Smith — Month Day Year: 4 29 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard Lipton — Signature: Richard Lipton — Month Day Year: 4 29 91

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Gilbert Solomon — Signature: [illegible] — Month Day Year: 04 29 91

Do Not Write Below This Line

DHS 8022 A
EPA 8700—22
(Rev 6-89) Previous editions are obsolete.

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

GENERATOR

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91016331

06/06/2001 "ORIGINAL MANIFEST COPY"