Revised Manifest Summary Report

SOUTHER CALIFORNIA TRANE SERVICE
The Trane Company

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
		83212269		700	LBS		CMP		
		83212362		900	LBS		CMP		
		87114032		27980.7	LBS		CMP		
		87119430		1000.8	LBS		CMP		
		88676076		0	LBS		CMP		
04/26/1981		88293775		2300	LBS		CMP		
09/06/1983		83212336		1600	LBS		CMP		
03/14/1984		83494189		800	LBS		CMP		
05/07/1984		83494075		1300	LBS		CMP		
08/17/1984		83564077		700	LBS		CMP		
10/01/1984		83029913		884.04	LBS		CMP		
12/17/1984		84341213		400	LBS		CMP		
12/26/1984		84341252		1900	LBS		CMP		
04/02/1985		84341481		1800	LBS		CMP		
06/12/1985		84341709		1200	LBS		CMP		
09/23/1985		84341852		500	LBS		CMP		
11/13/1985		84341959		1400	LBS		CMP		
02/03/1986		84720052		1100	LBS		CMP		
03/04/1986		84345216		200	LBS		CMP		
05/02/1986		86534401		1100	LBS		CMP		
05/20/1986		84345399		450	LBS		CMP		
08/28/1986		86534587		600	LBS		CMP		
01/28/1987		86544090		200	LBS		CMP		
05/26/1987		84410581		700	LBS		CMP		
06/09/1987		87114055		13761	LBS		CMP		
06/30/1987		87114090		10008	LBS		CMP		
08/13/1987		87114228		1376.1	LBS		CMP		
11/20/1987		87114435		7506	LBS		CMP		
11/23/1987		87119012		7506	LBS		CMP		
12/08/1987		87119523		661.03	LBS		CMP		
12/11/1987		87119524		400	LBS		CMP		
01/21/1988		87118530		2293.5	LBS		CMP		
02/04/1988		87118550		991.54	LBS		CMP		
04/27/1988		87118757		820	LBS		CMP		
06/17/1988		87118851		700	LBS		CMP		
07/19/1988		87118945		2752.2	LBS		CMP		
08/31/1988		87119113		700	LBS		CMP		
03/17/1989		88293675		600	LBS		CMP		

Revised Manifest Summary Report

SOUTHER CALIFORNIA TRANE SERVICE
The Trane Company

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
06/06/1989		88676920		3686.28	LBS		CMP		
06/22/1989		88677574		800	LBS		CMP		
11/03/1990		88681487		600	LBS		CMP		

Total Records: 41 Default Volume: 0 Total Waste Volume: 52.4386

lc_group_name	THE TRANE COMPANY
grp_calc_volume:	54.6886 tons

generator_name	BUSHNELL TRANE AIR CONDITIONING
lc_name:	BUSHNELL TRANE AIR CONDITIONING

manifest_number	manifest_quantity_ton
84551350	2.25 tons

generator_name	SOUTHER CALIFORNIA TRANE SERVICE
lc_name:	The Trane Company

manifest_number	manifest_quantity_ton
83029913	0.44202 tons
83212269	0.35 tons
83212336	0.8 tons
83212362	0.45 tons
83494075	0.65 tons
83494189	0.4 tons
83564077	0.35 tons
84341213	0.2 tons
84341252	0.95 tons
84341481	0.9 tons
84341709	0.6 tons
84341852	0.25 tons
84341959	0.7 tons
84345216	0.1 tons
84345399	0.225 tons
84410581	0.35 tons
84720052	0.55 tons
86534401	0.55 tons
86534587	0.3 tons
86544090	0.1 tons

87114032	13.99035 tons
87114055	6.8805 tons
87114090	5.004 tons
87114228	0.68805 tons
87114435	3.753 tons
87118530	1.14675 tons
87118550	0.49577 tons
87118757	0.41 tons
87118851	0.35 tons
87118945	1.3761 tons
87119012	3.753 tons
87119113	0.35 tons
87119430	0.5004 tons
87119523	0.330515 tons
87119524	0.2 tons
88293675	0.3 tons
88293775	1.15 tons
88676076	0 tons
88676920	1.84314 tons
88677574	0.4 tons
88681487	0.3 tons

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

05/20/87

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAX000082750 — 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
Olive View Medical Center (Power Plant)**
1443 Olive View St., Sylmar, CA

4. Generator's Phone (818) 364-3091

A. State Manifest Document Number: 87114032

B. State Generator's ID: CAX000082750

5. Transporter 1 Company Name: Omega Recovery Services

6. US EPA ID Number: CAD042245001

C. State Transporter's ID

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number: CAD042245001

G. State Facility's ID: CAD042245001

H. Facility's Phone: 213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous waste, Liquid NOS ORM-E NA 9189 (Lithium Bromide)	06	1DM		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. b. c. d.

15. Special Handling Instructions and Additional Information
**Material is for So. California Trane Service, Industry, Calif.

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

GENERATOR

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

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 | Signature | Month Day Year

FACILITY

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

DHS 8022 A (1/87)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

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

INSTRUCTIONS ON THE BACK

05/31/2001 "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.: CAD 981 369 960
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
SOUTHERN CALIFORNIA TRANE SERVICE
16500 E. GALE AVE., CITY OF INDUSTRY CA 91745
4. Generator's Phone (818) 961-7181

A. State Manifest Document Number: 88676076
B. State Generator's ID

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

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

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245991
H. Facility's Phone: 213/ 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No
a. HAZARDOUS WASTE LIQUID N.O.S ORM-E NA 9189 (R-11)	7	100#	600#		State 341 / EPA/Other F-001
b					State / EPA/Other
c					State / EPA/Other
d					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
A- 600 lbs.

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

15. Special Handling Instructions and Additional Information
PROFILE NUMBER A-10443

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: ROLAND LOPEZ JR | Signature | Month Day Year: 11/21/89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Billy L. Hardy | Signature | Month Day Year: 11/21/1989

Do Not Write Below This Line

GENERATOR — TRANSPORTER — FACILITY

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

88676076

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

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

05/29/2001 "ORIGINAL MANIFEST COPY"

04/14/89 Shipper 20654

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD 981 36960
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
SOUTHERN CALIFORNIA
Trane Service
16500 E. Gale, Industry, CA 91745
4. Generator's Phone (818 961-7181, ext.218

A. State Manifest Document Number 8 8293775
B. State Generator's ID

5. Transporter 1 Company Name: Omega Recovery Services
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 904878
D. Transporter's Phone: 213/698-0991

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

9. Designated Facility Name and Site Address
Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD 042245001
H. Facility's Phone: 213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. Hazardous waste liquid NOS ORM-E NA 9189	0121	DM	019010	P	State 211 / EPA/Other
b. Hazardous waste Liquid NOS ORM-E NA 9189	0102	DM	0014010	P	State 211 / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
A) 24-100 Lb. drums R-11
B) 1-200 Lb. drum R-11

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

15. Special Handling Instructions and Additional Information

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

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Printed/Typed Name: MIKE FORD
Signature: Mike Ford
Month Day Year: 10 4 26 81

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 4 26 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: FRANK FORD
Signature: Frank Ford
Month Day Year: 10 4 26 89

GENERATOR — TRANSPORTER — FACILITY

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

8 8293775

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

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

03/29/2000 "ORIGINAL MANIFEST COPY"

State of California — Health and Welfare Agency

Department of Health Services

HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento CA 95814

record yell

UNIFORM HAZARDOUS WASTE MANIFEST

May 3, 1984

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

STATE ID NUMBER 83494075

GENERATOR NAME AND MAILING ADDRESS
SOUTHERN CALIF. TRANE SERVICE (Formerly Youell-Trane)
16500 Gale Ave.
Industry, CA 91745
AREA CODE PHONE NUMBER 213/961-7181 Chet or Reggie

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAX000082750

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

VEH/CONTAINER NO 42500 EPA ID NUMBER CAD042245001

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO EPA ID NUMBER

TREATMENT STORAGE OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
AREA CODE PHONE NUMBER 213/698-0991

EPA ID NUMBER CAD042245001

TO BE FILLED IN BY GENERATOR

PROPER U S DOT SHIPPING NAME AND HAZARD CLASS	UN NA NUMBER	TOTAL QUANTITY	UNIT WT VOL	CONTAINER NO	CONTAINER TYPE	WASTE CAT NO	DISP METH
Hazardous Waste, Liquid N.O.S.- ORM-E (R-11)	NA 9189	1300	P	8	DM	2111	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
Trichlorofluoromethane				
Oil				
Water				

SPECIAL HANDLING INSTRUCTIONS
R-11 yield 770 lbs. — R-113 yield 261 lbs.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature Reginald Brown MO 05 DAY 17 YR 84

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature Henry Sobrino DATE REC'D & ACCEPTED MO 05 DAY 17 YR 84

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

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

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

Printed or typed full name and signature STEVE SIMPSON Steve Simpson

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO 05 DAY 08 YR 84

FORM NO DHS 8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87987

06/13/2001 "ORIGINAL MANIFEST COPY"

State of Cali[redacted]

HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

Record yield May 3, 1984

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

STATE ID NUMBER 83494075

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
SOUTHERN CALIF. TRANE SERVICE (Formerly Youell-Trane)
16500 Gale Ave.
Industry, CA 91745
AREA CODE/PHONE NUMBER 213/961-7181 Chet or Reggie

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAX000082750

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

VEH./CONTAINER NO. 142500
EPA ID NUMBER CAD042245001

TRANSPORTER NO. 2 ALTERNATE TSD FACILITY

VEH./CONTAINER NO.
EPA ID NUMBER

TREATMENT STORAGE OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
AREA CODE PHONE NUMBER 213/698-0991

EPA ID NUMBER CAD042245001

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	CONTAINER TYPE	WASTE CAT. NO.	DISP. METH
Hazardous Waste, Liquid N.O.S. - ORM-E (R-11)	NA 9189	1300	P	8	DM	211	01

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM
Trichlorofluoromethane				
Oil				
Water				

SPECIAL HANDLING INSTRUCTIONS
R-11 yield 770 lbs. — R-113 yield 261 lbs.

This is to certify that the above named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature Reginald Brown MO 05 DAY 17 YR 84

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature Henry Cobian DATE REC'D & ACCEPTED MO 05 DAY 17 YR 84

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

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

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

Printed or typed full name and signature STEVE SIMPSON Steve Simpson

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO 05 DAY 08 YR 84

FORM NO. DHS 8022A (1-82)

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87987

06/13/2001 "ORIGINAL MANIFEST COPY"

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

08/13/87

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CA D 9 8 1 3 6 9 6 0
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
So. California Trane Service
Industry, CA 91749

4 Generator's Phone: (818 961-7181

A State Manifest Document Number: 87114228
B State Generator's ID: C A D 9 8 1 3 6 9 6 0

5 Transporter 1 Company Name: So. Calif. Trane
6 US EPA ID Number:
C State Transporter's ID:
D. Transporter's Phone: ~~818/961-7181~~

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
10 US EPA ID Number: C AD 04 2 24 5 001
G State Facility's ID: C A D 0 4 2 245 001
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 No.
a Hazardous waste Liquid NOS NA 9189 (R-11)	0 03	DM		P	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

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.

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GENERATOR — Printed/Typed Name: ROLLAND LOPEZ JR — Signature: Rolland Lopez Jr — Month Day Year: 08/13/87

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: ROLLAND LOPEZ JR. — Signature: Rolland Lopez Jr — Month Day Year: 8/13/87

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

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name: CHRIS MARTINEZ — Signature: Chris Martinez — Month Day Year: 08/13/87

DHS 8022 A (1/87)
EPA 8700-22
(Rev. 9-86) Previous editions are obsolete.

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

INSTRUCTIONS ON THE BACK

05/30/2001 "ORIGINAL MANIFEST COPY"

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

01/21/88

Poland

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CA D 9 8 1 3 6 9 6 0
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
Southern California Trane Service
16500 E. Gale Ave. Industry, Calif. 91745

4. Generator's Phone (818

A. State Manifest Document Number: 87118530
B. State Generator's ID:

5. Transporter 1 Company Name: So. Calif. Trane Service
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
Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA 90602
10. US EPA ID Number: C A D 04 2 245 001

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous waste Liquid NOS NA 9189 (R-11)	005	DM		P	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

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: Rolland Lopez Jr
Signature: Rolland Lopez Jr
Month Day Year: 10/12/88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Rolland Lopez Jr
Signature: Rolland Lopez Jr
Month Day Year: 10/12/88

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: CHRIS E. MARTINEZ
Signature: Chris E. Martinez
Month Day Year: 10/12/88

GENERATOR
TRANSPORTER
FACILITY

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

DHS 8022 A (1/87)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete

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

INSTRUCTIONS ON THE BACK

05/30/2001 "ORIGINAL MANIFEST COPY"

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

07/18/88 Shipper 2

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD981369610
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
Southern Calif. Trane Service
16500 Gale Ave, Industry, Calif. 91744

4. Generator's Phone (818) 461-7181

A. State Manifest Document Number: 87118945

B. State Generator's ID

5. Transporter 1 Company Name: Omega Recovery Services
6. US EPA ID Number: CAD 042 245 001

C. State Transporter's ID

D. Transporter's Phone: 818/461-7181

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
10504 E. Whittier Blvd.
Whittier, CA 90602
10. US EPA ID Number: CAD 042 245 001

G. State Facility's ID: CAD042245001

H. Facility's Phone: 213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Container No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No
a. Hazardous Waste liquid NOS NA 9189 (R-11)	0 06	DM		P	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

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Printed/Typed Name: Rolland Lopez Jr. Signature: Rolland Lopez Jr. Month Day Year: 07 11 1988

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Rolland Lopez Jr. Signature: Rolland Lopez Jr. Month Day Year: 07 11 1988

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: N. Jay Solomon. Signature: N. Jay Solomon Month Day Year: 07 11 1988

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

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03-17-89

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Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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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.: CAD981369601
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
SOUTHERN CALIFORNIA TRANE SERVICE
16500 E. GALE AVE., CITY INDUSTRY CA 91745

4. Generator's Phone (818 961-7181

A. State Manifest Document Number: 8 8293675
B. State Generator's ID:

5. Transporter 1 Company Name: SOUTHERN CALIF TRANE
6. US EPA ID Number: CAD981369601
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 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD042245001
G. State Facility's ID: CAD042245001
H. Facility's Phone: (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S NA 9189 (R-11)	16	DM	1600	P	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information

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

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Printed/Typed Name: ROLAND LOPEZ JR
Signature: Rolland Lopez Jr
Month Day Year: 03 17 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ROLAND LOPEZ JR
Signature: Rolland Lopez Jr
Month Day Year: 03 17 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FINLIEL TURRIOS
Signature: Angel Turrios
Month Day Year: 03 17 89

GENERATOR — TRANSPORTER — FACILITY

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8 8293675

DHS 8022 A (1/88)
EPA 8700—22
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State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD 981 369 960
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
SO. CALIFORNIA TRANE SERVICE
16500 E. GALE AVE.,CITY OF INDUSTRY, CA 91745

4. Generator's Phone (818) 961-7181

A. State Manifest Document Number 88681487
B. State Generator's ID

5. Transporter 1 Company Name
OMEGA RECOVERY SERVICES
6. US EPA ID Number CAD 042 245 001
C. State Transporter's ID 110257
D. Transporter's Phone 213 698-0991

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

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE REFRIGERANT GAS, N.O.S NONFLAMMABLE GAS, UN 1078 (R-11)	0014	DM	0106100	LBS	State 341 / EPA/Other D019
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

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

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

15. Special Handling Instructions and Additional Information
PROFILE NUMBER B 10334

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.

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Printed/Typed Name: RICHARD MICHAEL — Signature: [signature] — Month Day Year: 11 11 03 10

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roland J. CRUNFORD — Signature: [signature] — Month Day Year: 11 11 03 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: JOHN HAYES — Signature: [signature] — Month Day Year: 12 14 10

GENERATOR — TRANSPORTER — FACILITY

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88681487

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