generator_name	WESTERN CIRCUITS INC
lc_name:	Western Circuits, Inc.
lc_calc_volume:	5.0249 tons

manifest_number	manifest_quantity_ton
83154223	3.23175 tons
87292247	0.68805 tons
87741006	0.68805 tons
90286504	0.417 tons

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

C

Department of Health Services

STATE ID NUMBER 83154223

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

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
WESTERN CIRCUITS
4136 DEGREY AV.
VENICE CALIF 90291
AREA CODE PHONE NUMBER (213) 821-0795

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CA0006210192519

TRANSPORTER NO. 1
VAN WATER & ROGERS
VEH. CONTAINER NO: 63196
EPA ID NUMBER: CAD009230244

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
VAN WATERS & ROGERS
C/O OMEGA CHEMICAL CORP
12504 EAST WHITTIER BLVD
WHITTIER CALIFORNIA
VEH. CONTAINER NO: 63195
EPA ID NUMBER: CAD 042245001

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
VAN WATERS & ROGERS
13635 S. BONNIE BEACH DL.
L-A- CALIF 90023
AREA CODE PHONE NUMBER (213) 265-8223
EPA ID NUMBER: CAD009230244

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.
TRICHLOROETHYLENE	UN2831	00715	G.	016	DM	2111	011

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

SPECIAL HANDLING INSTRUCTIONS
GLOVES - GOGGLES

ALTERNATED FACILITY: OMEGA CHEMICAL CORP
12504 Whittier Blvd
Whittier CA 90602

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.

Jose G PAREDES
Printed or typed full name and signature

MO 10 DAY 09 YR 85

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
ALEX MORENO
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO 10 DAY 09 YR 85

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

DATE REC'D & ACCEPTED MO 10 DAY 11 YR 85

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.

John Hute
Printed or typed full name and signature

EPA ID NUMBER CAD014121515 DATE RECEIVED & ACCEPTED MO 10 DAY 11 YR 85

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

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).

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. CAD062092269 — 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
WESTERN CIRCUITS, INC.
4136 DEL REY AVE
VENICE, CA. 90291

4. Generator's Phone 213/870-2784

A. State Manifest Document Number 87292247
B. State Generator's ID

5. Transporter 1 Company Name: VAN WATER & ROGERS
6. US EPA ID Number: CAD009230244
C. State Transporter's ID 804025
D. Transporter's Phone 213/255-8123

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

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
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. 1.1.1.TRICHLOROETHYLENE	01	03	M0 10115	GAL	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
90% 1.1.1.TRICHLOROETHYLENE, GRM-A
NON FLMMABLE
10% RESIN SOLUTION UN 1866, FLAM LIG

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

15. Special Handling Instructions and Additional Information
HANDLE WITH CARE USE SAFETY EQUIPMENT AS NESSESARY TO PROTECT EYES BODY AND INHLALATION
V W R ACCOUNT

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: ERNEST R. CLARK — Signature: Ernest Clark — Month Day Year: 04 07 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ~~ERNEST R. CLARK~~ JERRY COOPER — Signature: Jerry Cooper — Month Day Year: 04 07 88

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: CHAS E. ALTAMEZ — Signature — Month Day Year: 04 07 88

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 0-30-85)
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Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CA D 0 6 2 0 9 2 5 9 — Manifest Document No.

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

3. Generator's Name and Mailing Address
WESTERN CIRCUITS
4136 DEL REY AVE
VENICE CA. 90291

A. State Manifest Document Number: 87741006

4. Generator's Phone (213) 821-0795

B. State Generator's ID:

5. Transporter 1 Company Name: VAN WATER&ROGER — 6. US EPA ID Number: C A D 0 [illegible] 5 0 0 1

C. State Transporter's ID: 805 [illegible]

D. Transporter's Phone: (213) 265-8123

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

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
12504 E. WHITTIER BLVD.
WHITTIER CALIF. 90602
10. US EPA ID Number: C A D 0 4 2 2 4 5 0 0 1

G. State Facility's ID: CAD042245001

H. Facility's Phone: (213) 698- 0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. 1.1.1. TRICHLOROETHYLENE ORM-A UN 2831	0 0 3	DM	0 0 1 6 5		State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
90% 1.1.1. TRICHLOROETHYLENE, GRM-A
NON-FLAMMABLE
10% RESIN SOLUTION UN 1866, FLAM LIG.

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

15. Special Handling Instructions and Additional Information
HANDLE WITH CARE USE SAFETY EQUIPMENT AS
NESSESARY TO PROTECT EYES BODY AND INHALATION
V-W-R ACCOUNT-

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: ERNEST CLARK — Signature: [signature] — Month Day Year: 10 5 1 8 8

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Frank Arriola — Signature: [signature] — Month Day Year: 10 5 1 8 8

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: [illegible] — Signature: [signature] — Month Day Year: 10 5 1 8 8

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

State of California—Health and Welfare Agency
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.: CAD0612121591
Manifest Document No.: 010011
2. Page 1 of

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

3. Generator's Name and Mailing Address
WESTERN CIRCUITS INC.
4136 DEL REY AVE VENICE CA 90292
4. Generator's Phone (213) 821-0795

A. State Manifest Document Number: 90286504
B. State Generator's ID:

5. Transporter 1 Company Name: FALCON DISPOSAL SERVICE
6. US EPA ID Number: CAD008018914
C. State Transporter's ID: 014052
D. Transporter's Phone: 213(590-8531)

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

9. Designated Facility Name and Site Address
Omega Chemical Corp.
12504 Whittier Blvd.
Whittier CA.
10. US EPA ID Number: CAD041212451001
G. State Facility's ID: CAD041212451001
H. Facility's Phone: (213) 692-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL/WATER Combustible Liquid NOS NA1993	028	20 DM	0101013	0101/1010	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
WASTE OIL (50%) AND WATER

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

15. Special Handling Instructions and Additional Information
WEAR GLOVES AND GOGGLES
Job. # 4813

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: BEN LOZANO
Signature: [signature]
Month Day Year: 10 12 7 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: William A Coldiwich
Signature: [signature]
Month Day Year: 10 12 7 90

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: ISAAC Woods Jr
Signature: [signature]
Month Day Year: 10 12 7 90

Do Not Write Below This Line

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

Write ISAAC WOODS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 942732, Sacramento, CA 94237

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

90286504

generator_name	WESTERN CIRCUITS INC
lc_name:	Western Circuits, Inc.
lc_calc_volume:	5.0249 tons

manifest_number	manifest_quantity_ton
83154223	3.23175 tons
87292247	0.68805 tons
87741006	0.68805 tons
90286504	0.417 tons

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714 744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

C.

Department of Health Services

STATE ID NUMBER 83154223

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

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
WESTERN CIRCUITS
4136 DECREY AV.
VENICE CALIF 90291
AREA CODE PHONE NUMBER (213) 821-0795

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CA D 006 210 922 519

TRANSPORTER NO 1
VAN WATER & ROGERS
VEH. CONTAINER NO: 63196
EPA ID NUMBER: CA 000 923 0244

TRANSPORTER NO 2/ALTERNATE TSD FACILITY
VAN WATERS & ROGERS
C/O OMEGA CHEMICAL CORP
12504 EAST WHITTIER BLVD
WHITTIER CALIFORNIA
VEH. CONTAINER NO: 63195
EPA ID NUMBER: C A D 042245001

TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY
VAN WATERS & ROGERS
1363 SO. BONNIE BEACH PL.
L-A- CALIF 90023
AREA CODE PHONE NUMBER (213) 265-8223
EPA ID NUMBER: CA D 009 923 0244

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.
TRICHLOROETHYLENE	UN2831	00775	G.	016	DM	2111	011

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

SPECIAL HANDLING INSTRUCTIONS
GLOVES - GOGGLES

ALTERNATED FACILITY: OMEGA CHEMICAL CORP
12504 Whittier Blvd
Whittier CA 90602

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.

Jose G PAREDES
Printed or typed full name and signature

MO 10 DAY 09 YR 85

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
ALEX MORENO
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO 10 DAY 09 YR 85

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

DATE REC'D & ACCEPTED MO 10 DAY 11 YR 85

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.

John Hate
Printed or typed full name and signature

EPA ID NUMBER: CA D 014 212 151 000 1

DATE RECEIVED & ACCEPTED MO 10 DAY 11 YR 85

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

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).

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. CAD062092259 — 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
WESTERN CIRCUITS, INC.
4136 DEL REY AVE
VENICE, CA. 90291

4. Generator's Phone (213/870-2784

A. State Manifest Document Number 87292247

B. State Generator's ID

5. Transporter 1 Company Name: VAN WATER & ROGERS
6. US EPA ID Number: CAD009230244

C. State Transporter's ID 804025

D. Transporter's Phone 213/255-8123

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

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
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. 1.1.1.TRICHLOROETHYLENE	001	3DM	00115	GAL	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
90% 1.1.1.TRICHLOROETHYLENE, GRM-A
NON FLMMABLE
10% RESIN SOLUTION UN 1866, FLAM LIG

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

15. Special Handling Instructions and Additional Information
HANDLE WITH CARE USE SAFETY EQUIPMENT AS NESSESARY TO PROTECT EYES BODY AND INHLALATION
V W R ACCOUNT

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: ERNEST R. CLARK — Signature: Ernest R. Clark — Month Day Year: 04 07 88

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ~~ERNEST R. CLARK~~ JERRY COOPER — Signature: Jerry Cooper — Month Day Year: 04 07 88

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 E. MARNEZ — Signature — Month Day Year: 04 07 88

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

0004 02 0114 14

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-85)
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Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CA D 0 6 2 0 9 2 2 5 9
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
WESTERN CIRCUITS
4136 DEL REY AVE
VENICE CA. 90291

4. Generator's Phone (213) 821-0795

A. State Manifest Document Number: 87741006
B. State Generator's ID:

5. Transporter 1 Company Name: VAN WATER&ROGER
6. US EPA ID Number: CAD 0 2 2 5 0 0 1
C. State Transporter's ID: 805 [illegible]
D. Transporter's Phone: (213) 265-8123

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

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
12504 E. WHITTIER BLVD.
WHITTIER CALIF. 90602
10. US EPA ID Number: CAD 0 4 2 2 4 5 0 0 1
G. State Facility's ID: CAD 9 4 2 2 4 5 0 0 1
H. Facility's Phone: (213) 698- 0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. 1.1.1. TRICHLOROETHYLENE ORM-A UN 2831	0 0 3	DM	0 0 1 6 5		State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
90% 1.1.1. TRICHLOROETHYLENE, GRM-A
NON-FLAMMABLE
10% RESIN SOLUTION UN 1866, FLAM LIG.

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

15. Special Handling Instructions and Additional Information
HANDLE WITH CARE USE SAFETY EQUIPMENT AS
NESSESARY TO PROTECT EYES BODY AND INHALATION
V-W-R ACCOUNT-

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: ERNEST CLARK
Signature: [signature]
Month Day Year: 05 18 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Frank Arreola
Signature: [signature]
Month Day Year: 05 18 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 the manifest except as noted in Item 19.
Printed/Typed Name: CHRS E. Hunter
Signature: [signature]
Month Day Year: 05 18 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

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 0 0 6 2 2 2 2 5 9 1
Manifest Document No. 0 0 0 1 1
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WESTERN CIRCUITS INC.
4136 DEL REY AVE VENICE CA 90292
4. Generator's Phone (213) 821-0795

A. State Manifest Document Number 90286504
B. State Generator's ID

5. Transporter 1 Company Name: FALCON DISPOSAL SERVICE
6. US EPA ID Number: CAD 0 0 0 1 4 8 9 7 4 1
C. State Transporter's ID 014052
D. Transporter's Phone 213 (590-8531)

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

9. Designated Facility Name and Site Address
Omega Chemical Corp.
12504 Whittier Blvd.
Whittier CA.
10. US EPA ID Number: CAD 0 0 4 1 2 2 4 5 1 0 0 1
G. State Facility's ID CAD 0 4 1 2 2 4 5 1 0 0 1
H. Facility's Phone (213) 692-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL/WATER Combustible Liquid N.O.S. NA 1993	028	024 DM	0101010	g	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
WASTE OIL (50%) AND WATER

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

15. Special Handling Instructions and Additional Information
WEAR GLOVES AND GOGGLES Job. # 4813

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: BEN LOZANO
Signature: Ben Lozano
Month Day Year: 10 8 2 3 1 9 10

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: William A Coldfinch
Signature: [signature]
Month Day Year: 10 8 2 7 1 9 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: ISAAC Woods Jr
Signature: Isaac Woods Jr
Month Day Year: 0 8 2 7 9 0

Do Not Write Below This Line

GENERATOR

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

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

White: ISDP SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 7920, Sacramento, CA 95812

generator_name	WESTERN CIRCUITS INC
lc_name:	Western Circuits, Inc.
lc_calc_volume:	5.0249 tons

manifest_number	manifest_quantity_ton
83154223	3.23175 tons
87292247	0.68805 tons
87741006	0.68805 tons
90286504	0.417 tons

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

C

STATE ID NUMBER 83154223

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

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
WESTERN CIRCUITS
4136 DELREY AV.
VENICE CALIF 90291
AREA CODE PHONE NUMBER 213) 821-0795

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CA D 006 210 922 519

TRANSPORTER NO. 1
VAN WATER & ROGERS
VEH. CONTAINER NO: 63196
EPA ID NUMBER: CAD009230244

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
VAN WATERS & ROGERS
C/O OMEGA CHEMICAL CORP
12504 EAST WHITTIER BLVD
WHITTIER CALIFORNIA
VEH. CONTAINER NO: 63195
EPA ID NUMBER: C A D 042245001

TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY
VAN WATERS & ROGERS
1363 SO. BONNIE BEACH PL.
L-A- CALIF 90023
AREA CODE/PHONE NUMBER 213) 265-8223
EPA ID NUMBER: CAD009230244

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.
TRICHLOROETHYLENE	UN2831	017175	G.	016	DM	211	011

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

SPECIAL HANDLING INSTRUCTIONS
GLOVES - GOGGLES

ALTERNATED FACILITY: OMEGA CHEMICAL CORP
12504 Whittier Blvd
Whittier CA 90602

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.

Jose G PAREDES
Printed or typed full name and signature — MO 10 DAY 09 YR 85

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
ALEX MORENO
Printed or typed full name and signature
DATE REC'D & ACCEPTED — MO 10 DAY 09 YR 85

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
JIM SKINNER
Printed or typed full name and signature
DATE REC'D & ACCEPTED — MO 10 DAY 11 YR 85

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.
John Hale
Printed or typed full name and signature
EPA ID NUMBER: CAD014212121 (ISTOU.1)
DATE RECEIVED & ACCEPTED — MO 10 DAY 11 YR 85

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

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).

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

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD062092269
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
WESTERN CIRCUITS, INC.
4136 DEL REY AVE
VENICE, CA. 90291

4. Generator's Phone 213/870-2784

A. State Manifest Document Number 87292247
B. State Generator's ID

5. Transporter 1 Company Name: VAN WATER & ROGERS
6. US EPA ID Number: CAD009230244
C. State Transporter's ID 804025
D. Transporter's Phone 213/255-8123

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

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
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. 1.1.1.TRICHLOROETHYLENE	01	03	DM	0011 65	GAL State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
90% 1.1.1.TRICHLOROETHYLENE, GRM-A
NON FLMMABLE
10% RESIN SOLUTION UN 1866, FLAM LIG

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

15. Special Handling Instructions and Additional Information
HANDLE WITH CARE USE SAFETY EQUIPMENT AS NESSESARY TO PROTECT EYES BODY AND INHLALATION
V W R ACCOUNT

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: ERNEST R. CLARK
Signature: Ernest Clark
Month Day Year: 04 07 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ~~ERNEST R. CLARK~~ JERRY COOPER
Signature: Jerry Cooper
Month Day Year: 04 07 88

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 E. MARTINEZ
Signature
Month Day Year: 04 07 88

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-85)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CA D 0 6 2 0 9 2 2 5 9 — 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
WESTERN CIRCUITS
4136 DEL REY AVE
VENICE CA. 90291

4. Generator's Phone (213) 821-0795

A. State Manifest Document Number: 87741006

B. State Generator's ID

5. Transporter 1 Company Name: VAN WATER&ROGER — 6. US EPA ID Number: CAD 0 4 2 2 4 5 0 0 1

C. State Transporter's ID: 803 Ross

D. Transporter's Phone: (213) 265-8123

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

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
12504 E. WHITTIER BLVD.
WHITTIER CALIF. 90602

10. US EPA ID Number: CAD 0 4 2 2 4 5 0 0 1

G. State Facility's ID: CAD 0 4 2 2 4 5 0 0 1

H. Facility's Phone: (213) 698- 0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. 1.1.1. TRICHLOROETHYLENE ORM-A UN 2831	0 0 3	DM	0 0 1 6 5		State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
90% 1.1.1. TRICHLOROETHYLENE, GRM-A
NON-FLAMMABLE
10% RESIN SOLUTION UN 1866, FLAM LIG.

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

15. Special Handling Instructions and Additional Information
HANDLE WITH CARE USE SAFETY EQUIPMENT AS
NESSESARY TO PROTECT EYES BODY AND INHALATION
V-W-R ACCOUNT-

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: ERNEST CLARK — Signature: [signature] — Month Day Year: 05 18 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Frank Arzola — Signature: [signature] — Month Day Year: 05 18 88

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 E. [illegible] — Signature: [signature] — Month Day Year: 05 18 88

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

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.: CA D 0 6 2 2 2 2 5 9 1
Manifest Document No.: 0 0 0 1 1

2. Page 1 of

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

3. Generator's Name and Mailing Address
WESTERN CIRCUITS INC.
4136 DEL REY AVE VENICE CA 90292

4. Generator's Phone (213) 821-0795

A. State Manifest Document Number: 90286504

B. State Generator's ID

5. Transporter 1 Company Name: FALCON DISPOSAL SERVICE
6. US EPA ID Number: CAD 0 0 0 4 8 9 3 4

C. State Transporter's ID: 014052

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Omega Chemical Corp.
18704 Wilmington Blvd.
Wilmington Ca.

10. US EPA ID Number: CAD 0 0 4 2 2 4 5 0 0 1

G. State Facility's ID: CAD 0 4 2 2 4 5 0 0 1

H. Facility's Phone: (213) 694-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL/WATER Contaminated Liquid NOS NA 1993	028	24 DM	0101/1010	g	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
WASTE OIL (50%) AND WATER

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

15. Special Handling Instructions and Additional Information
WEAR GLOVES AND GOGGLES Job # 4813

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: BEN LOZANO
Signature: Ben Lozano
Month Day Year: 10 8 2 7 9 0

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: William A Goldfinch
Signature: [signature]
Month Day Year: 10 8 2 7 9 0

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: ISAAC Woods Jr
Signature: Isaac Woods Jr
Month Day Year: 10 8 2 7 9 0

Do Not Write Below This Line

DHS 8022 A
EPA 8700—22
(Rev. 8-89) Previous editions are obsolete.

Write DSDF NEXUS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 942760, Sacramento, CA 95812

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

90286504

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

C

Department of Health Services

STATE ID NUMBER 83154223

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

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
WESTERN CIRCUITS
4136 DELREY AV.
VENICE CALIF 90291
AREA CODE/PHONE NUMBER (213) 821-0795

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CA D 006 210 192 519

TRANSPORTER NO 1
VAN WATER & ROGERS
VEH CONTAINER NO: 63196
EPA ID NUMBER: CAD009230244

TRANSPORTER NO 2/ALTERNATE TSD FACILITY
VAN WATERS & ROGERS
C/O OMEGA CHEMICAL CORP
12504 EAST WHITTIER BLVD
WHITTIER CALIFORNIA
VEH CONTAINER NO: 63195
EPA ID NUMBER: C A D 042245001

TREATMENT STORAGE OR DISPOSAL (TSD) FACILITY
VAN WATERS & ROGERS
13635 So. BONNIE BEACH PL.
L-A- CALIF 90023
AREA CODE/PHONE NUMBER (213) 265-8223
EPA ID NUMBER: CA D 010 019 230 124

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.
TRICHLOROETHYLENE	UN2831	00175	G.	01	GM	211	011

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM

SPECIAL HANDLING INSTRUCTIONS
GLOVES - GOGGLES

ALTERNATED FACILITY: OMEGA CHEMICAL CORP
12504 Whittier Blvd
Whittier CA 90602

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: José G. PAREDES — José G. Paredes

MO 10 DAY 09 YR 85

☐ 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: ALEX MORENO — Alex Moreno
DATE REC'D & ACCEPTED: MO 10 DAY 09 YR 85

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature: JIM SKINNER — Jim Skinner
DATE REC'D & ACCEPTED: MO 10 DAY 11 YR 85

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: John Hale — John Hale

EPA ID NUMBER: CAD014212151 0011

DATE RECEIVED & ACCEPTED: MO 10 DAY 11 YR 85

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

06/13/2001 "ORIGINAL MANIFEST COPY"

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

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

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CA1010612121215 91
Manifest Document No.: 010101 1
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WESTERN CIRCUITS INC.
4136 DEL REY AVE VENICE CA 90292
4. Generator's Phone (213) 821-0795

A. State Manifest Document Number: 90286504
B. State Generator's ID:
C. State Transporter's ID: 014052
D. Transporter's Phone: 213(590-8531)
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CA1D041212415 0011
H. Facility's Phone: (213) 698-0991

5. Transporter 1 Company Name: FALCON DISPOSAL SERVICE
6. US EPA ID Number: CAD 010101 4819 3141
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: Omega Chemical Corp. 12504 Whittier Blvd. Whittier, CA.
10. US EPA ID Number: KYD 010142245 0101

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL/WATER Combustible Liquid N.O.S NA 1993	028	24 DM	010101010	g	State / EPA/Other 013
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above: WASTE OIL (50%) AND WATER

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

15. Special Handling Instructions and Additional Information: WEAR GLOVES AND GOGGLES. Job # 4813

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: BEN LOZANO
Signature: Ben Lozano
Month Day Year: 10 18 12 17 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: William A Goldfinch
Signature: [signature]
Month Day Year: 10 18 12 17 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: ISAAC Woods Jr
Signature: Isaac Woods Jr
Month Day Year: 10 18 12 17 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

90286504

DHS 8022 A
EPA 8700—22
(Rev. 6-89) 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

03/28/2000 "ORIGINAL MANIFEST COPY"

generator_name	WESTERN CIRCUITS INC
lc_name:	Western Circuits, Inc. 3576
lc_calc_volume:	5.0249 tons

manifest_number	manifest_quantity_ton
83154223	3.23175 tons
87292247	0.68805 tons
87741006	0.68805 tons
90286504	0.417 tons

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

C

STATE ID NUMBER 83154223

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

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
WESTERN CIRCUITS
4136 DELREY AV.
VENICE CALIF 90291
AREA CODE PHONE NUMBER 213) 821-0795

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CA D 006 210 922 519

TRANSPORTER NO. 1
VAN WATER & ROGERS
VEH. CONTAINER NO: 63196
EPA ID NUMBER: CAD009230244

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
VAN WATERS & ROGERS
C/O OMEGA CHEMICAL CORP
12504 EAST WHITTIER BLVD
WHITTIER CALIFORNIA
VEH. CONTAINER NO: 63195
EPA ID NUMBER: C A D 042245001

TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY
VAN WATERS & ROGERS
1363 SO. BONNIE BEACH PL.
L-A- CALIF 90023
AREA CODE/PHONE NUMBER 213) 265-8223
EPA ID NUMBER: CAD009230244

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.
TRICHLOROETHYLENE	UN2831	017175	G.	016	DM	211	011

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

SPECIAL HANDLING INSTRUCTIONS
GLOVES - GOGGLES

ALTERNATED FACILITY: OMEGA CHEMICAL CORP
12504 Whittier Blvd
Whittier CA 90602

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

Jose G PAREDES
Printed or typed full name and signature

MO 10 DAY 09 YR 85

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
ALEX MORENO
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO 10 DAY 09 YR 85

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

DATE REC'D & ACCEPTED MO 10 DAY 11 YR 85

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.

John HACK
Printed or typed full name and signature

EPA ID NUMBER CAD014212151000 1

DATE RECEIVED & ACCEPTED MO 10 DAY 11 YR 85

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

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).

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: CAD062092259
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
WESTERN CIRCUITS, INC.
4136 DEL REY AVE
VENICE, CA. 90291

4. Generator's Phone 213/870-2784

A. State Manifest Document Number: 87292247
B. State Generator's ID:

5. Transporter 1 Company Name: VAN WATER & ROGERS
6. US EPA ID Number: CAD009230244

C. State Transporter's ID: 804025
D. Transporter's Phone: 213/255-8123

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

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

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
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. 1.1.1.TRICHLOROETHYLENE	001	3D	M0 0011 6	15 GAL	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
90% 1.1.1.TRICHLOROETHYLENE, GRM-A
NON FLMMABLE
10% RESIN SOLUTION UN 1866, FLAM LIG

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

15. Special Handling Instructions and Additional Information
HANDLE WITH CARE USE SAFETY EQUIPMENT AS NESSESARY TO PROTECT EYES BODY AND INHLALATION
V W R ACCOUNT

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: ERNEST R. CLARK
Signature: Ernest Clark
Month Day Year: 04 07 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ~~ERNEST R. CLARK~~ JERRY COOPER
Signature: Jerry Cooper
Month Day Year: 04 07 88

TRANSPORTER

18. Transporter 2 Acknowledgement of Receipt of Materials
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
Printed/Typed Name: CHRIS ESTRADA
Signature:
Month Day Year: 04 07 88

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2060—0039 (Expires 9-30-85)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CA D 0 6 2 0 9 2 2 5 9
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
WESTERN CIRCUITS
4136 DEL REY AVE
VENICE CA. 90291

4. Generator's Phone (213) 821-0795

A. State Manifest Document Number: 87741006

B. State Generator's ID:

5. Transporter 1 Company Name: VAN WATER&ROGER
6. US EPA ID Number: C A D 0 [illegible] 5 0 0 1

C. State Transporter's ID: 805 [illegible]

D. Transporter's Phone: (213) 265-8123

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

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA CHEMICAL CORP.
12504 E. WHITTIER BLVD.
WHITTIER CALIF. 90602
10. US EPA ID Number: C A D 0 4 2 2 4 5 0 0 1

G. State Facility's ID: CAD042245001

H. Facility's Phone: (213) 698- 0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. 1.1.1. TRICHLOROETHYLENE ORM-A UN 2831	003	DM	00165		State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
90% 1.1.1. TRICHLOROETHYLENE, GRM-A
NON-FLAMMABLE
10% RESIN SOLUTION UN 1866, FLAM LIG.

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

15. Special Handling Instructions and Additional Information
HANDLE WITH CARE USE SAFETY EQUIPMENT AS
NESSESARY TO PROTECT EYES BODY AND INHALATION
V-W-R ACCOUNT-

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: ERNEST CLARK
Signature: [signature]
Month Day Year: 05 18 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Frank Arriola
Signature: [signature]
Month Day Year: 05 18 88

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: CARS E. Martin
Signature: [signature]
Month Day Year: 05 18 88

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

GENERATOR

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

State of California—Health and Welfare Agency
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. CA D 0 6 2 2 2 2 5 9 1 — Manifest Document No. 0 0 0 1 1

2. Page 1 of

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

3. Generator's Name and Mailing Address
WESTERN CIRCUITS INC.
4136 DEL REY AVE VENICE CA 90292

4. Generator's Phone (213) 821-0795

A. State Manifest Document Number 90286504

B. State Generator's ID

5. Transporter 1 Company Name: FALCON DISPOSAL SERVICE — 6. US EPA ID Number: CAD 0 0 0 1 4 8 9 1 3 4

C. State Transporter's ID 014052

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

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

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Omega Chemical Corp.
12504 Whittier Blvd.
Whittier Ca. — 10. US EPA ID Number: CAD 0 0 4 1 2 1 2 4 5 0 0 1 1

G. State Facility's ID CAD 0 4 1 2 1 2 4 5 0 0 1 1

H. Facility's Phone (213) 692-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE OIL/WATER Combustible Liquid NOS NA1993	0 0 2 8	0 2 8 DM	0 0 1 3 0 0 0	0 0 1 1 0 0 0	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
WASTE OIL (50%) AND WATER

K. Handling Codes for Wastes Listed Above
a. O1 b. c. d.

15. Special Handling Instructions and Additional Information
WEAR GLOVES AND GOGGLES Job. # 4813

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: BEN LOZANO — Signature: [signature] — Month Day Year: 10 8 2 7 9 0

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: William A Coldfinch — Signature: [signature] — Month Day Year: 10 8 2 7 9 0

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: ISAAC Woods Jr — Signature: [signature] — Month Day Year: 10 8 2 7 9 0

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 CALL 1-800-852-7550

90286504

DHS 8022 A
EPA 8700—22
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