generator_name	BLUE CROSS OF CALIFORNIA
lc_name:	Blue Cross of California
lc_calc_volume:	2.4 tons

manifest_number	manifest_quantity_ton
83410838	1.1 tons
84341545	0.5 tons
84341547	0.8 tons

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

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

P.O. #0200185

Type or print in the ink. See 22 characters per inch.

STATE ID NUMBER: 83410838

GENERATOR NAME AND MAILING ADDRESS
Blue Cross
21555 Oxnard St.
Woodland Hills, Ca.

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER: CAX000067405

AREA CODE/PHONE NUMBER: Lloyd (818) 703-3612

TRANSPORTER NO. 1
Omega Chemical Corp.
12504 E. Whittier Blvd.
Whittier, Ca. 90602

VEH. CONTAINER NO.: D0042067
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.
12504 E. Whittier Blvd.
Whittier, Ca. 90602
EPA ID NUMBER: CAD042245001

AREA CODE/PHONE NUMBER

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	TYPE	WASTE CAT. NO.	DISP. METH.
Hazardous Waste, Liquid N.O.S/ ORM-E (R-11)	NA 9189	2200 [redacted]	P	11 [redacted]	DM	211	01

COMPONENTS	CONC. RANGE UPPER	LOWER	UNITS %	PPM
Trichloroethylene & Lubricating Oil	90	10	100	

SPECIAL HANDLING INSTRUCTIONS

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: [illegible] MO. 12 DAY 03 YR. 89

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

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Isaac Woods Jr.
Printed or typed full name and signature: Isaac Woods Jr.
DATE REC'D & ACCEPTED: MO. 12 DAY 03 YR. 89

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

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 minimization. See instructions.

STEVE SIMPSON
Printed or typed full name and signature: Steve Simpson
EPA ID NUMBER: CAD042245001
DATE RECEIVED & ACCEPTED: MO. 12 DAY 03 YR. 89

TO BE FILLED IN BY GENERATOR

TO BE FILLED IN BY TRANSPORTER

TO BE FILLED IN BY TSDF

Form No. DHS 9022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

New material recently delivered to this customer. June 24, 1985

State of California—Health and Welfare Agency

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.: CAX000240408
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
BLUECROSS (LLOYD ROBERSON)
21555 Oxnard, Woodland Hills, CA 91367

4. Generator's Phone (818) 703-3612

A. State Manifest Document Number: 84341545
B. State Generator's ID: CAX000240408

5. Transporter 1 Company Name: Omega Chemical Corp.
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 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. Hazardous Waste, Liquid N.O.S. ORM-E NA9189 (R-11)	05	DM	1000	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: a) R01

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 governmental regulations.

Printed/Typed Name: LLOYD M. ROBERSON
Signature: Lloyd M Roberson
Date (Month Day Year): 06 25 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: TIM BALTIERRA
Signature: T. Baltierra
Date (Month Day Year): 06 25 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name
Signature
Date (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: Steve Simpson
Signature: STEVEN SIMPSON
Date (Month Day Year): 06 26 85

GENERATOR — TRANSPORTER — FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

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

84 60541

State of California—Health and Welfare Agency

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.: CAX000240408

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
Blue Cross of California
21555 Oxnard Street Woodland Hills, CA 91367

4 Generator's Phone (818) 703-3612

A. State Manifest Document Number: 84341547

B. State Generator's ID: CAX000240408

5 Transporter 1 Company Name: Omega Chemical Corp.

6. US EPA ID Number

C. State Transporter's ID: 62572

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 Chemical Corp.
12504 Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number

G. State Facility's ID: CAD042245001

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

GENERATOR

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 UN [redacted] ORME (Trichlorofluoromethane R-11) 9189	8	DRM	1600 ~~1000~~	16	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
8 / 200 lbs. Drums of Refrigerant formula R-11

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed Typed Name: Lloyd M. Roberson
Signature: Lloyd M. Roberson
Date: Month 8 Day 27 Year 85

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

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

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: STEVEN SIMPSON
Signature: Steve Simpson
Date: Month 08 Day 27 Year 85

DHS 8022 A (7/84)
(EPA 8700-22)

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

84 89541

State of California—Health and Welfare Agency

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. CAX000240408

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
Blue Cross of California
21555 Oxnard Street Woodland Hills, CA 91367

4 Generator's Phone (818) 703-3612

A. State Manifest Document Number: 84341547

B. State Generator's ID: CAX000240408

5 Transporter 1 Company Name: Omega Chemical Corp.

6. US EPA ID Number

C. State Transporter's ID: 62572

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 Chemical Corp.
12504 Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number

G. State Facility's ID: CAD042245001

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

GENERATOR

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 UN [redacted] ORME (Trichlorofluoromethane R-11) 9/89	8	DRM	1600 ~~1000~~	16	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
8 / 200 lbs. Drums of Refrigerant formula R-11

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed/Typed Name: Lloyd M. Roberson
Signature: Lloyd M. Roberson
Date: Month 8 Day 27 Year 85

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

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

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: STEVEN SIMPSON
Signature: Steve Simpson
Date: Month 08 Day 27 Year 85

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

DHS 8022 A (7/84)
(EPA 8700-22)

84 80541

05/31/2001 "ORIGINAL MANIFEST COPY"

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

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

P.O.#0200185

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

STATE ID NUMBER 83410838

GENERATOR NAME AND MAILING ADDRESS
Blue Cross
21555 Oxnard St.
Woodland Hills, Ca.

AREA CODE PHONE NUMBER lloyd (818) 703-3612

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER CAX000067405

TRANSPORTER NO. 1
Omega Chemical Corp.
12504 E. Whittier Blvd.
Whittier, Ca. 90602

VEH. CONTAINER NO. 00042507 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.
12504 E. Whittier Blvd.
Whittier, Ca. 90602

EPA ID NUMBER CAD042245001

AREA CODE PHONE NUMBER

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	2200	P	11	DM	211	01

COMPONENTS	CONC RANGE UPPER	LOWER	UNITS %	PPM
TRICHLOROFLUOROMETHANE & LUBRICANT OIL	90	10	100	

SPECIAL HANDLING INSTRUCTIONS

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 Lloyd M. Robeson Lloyd M. Robeson — MO 12 DAY 03 YR 84

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

TO BE FILLED IN BY GENERATOR

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
ISAAC Woods Jr. Isaac Woods Jr.
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO 12 DAY 03 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

STEVE SIMPSON Steve Simpson
Printed or typed full name and signature

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO 12 DAY 03 YR 84

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87087

06/13/2001 "ORIGINAL MANIFEST COPY"

State of California - Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814
P.O. #0200185

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

PAGE 1 OF 1 THE WASTES LISTED ON PAGE 2 CHANGE PER LINE

STATE ID NUMBER 83410838

GENERATOR NAME AND MAILING ADDRESS
Blue Cross
21555 Oxnard St.
Woodland Hills, Ca.

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAX000067405

AREA CODE PHONE NUMBER Lloyd (818) 703-3612

TRANSPORTER NO. 1
Omega Chemical Corp.
12504 E. Whittier Blvd.
Whittier, Ca. 90602

VEH. CONTAINER NO. 00042DC7
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.
12504 E. Whittier Blvd.
Whittier, Ca. 90602
EPA ID NUMBER CAD042245001

AREA CODE PHONE NUMBER

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	2200 ~~[illegible]~~	P	11 ~~[illegible]~~	DM	211	01

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM
Trichlorotrifluoroethane & Lubricating oil	90	10	100	

SPECIAL HANDLING INSTRUCTIONS

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 regulations of the Department of Transportation and the EPA.

Printed or typed full name and signature [illegible] MO 12 DAY 03 YR 89

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

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Isaac Woods Jr.
Printed or typed full name and signature Isaac Woods Jr.
DATE REC'D & ACCEPTED MO 12 DAY 03 YR 89

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 TSD

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 minimization. See instructions.

Printed or typed full name and signature STEVE SIMSON [signature]

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO 12 DAY 03 YR 89

FORM DHS-8022A (1/82)

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

New material recently delivered to this customer. June 24, 1985

State of California—Health and Welfare Agency

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.: CAX000240408
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
BLUECROSS (LLOYD ROBERSON)
21555 Oxnard, Woodland Hills, CA 91367
4. Generator's Phone (818) 703-3612

A. State Manifest Document Number: 84341545
B. State Generator's ID: CAX000240408

5. Transporter 1 Company Name: Omega Chemical Corp.
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 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. Hazardous Waste, Liquid N.O.S. ORM-E NA9189 (R-11)	05	DM	1000	P	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: a) R01

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 governmental regulations.

Printed/Typed Name: LLOYD M. ROBERSON
Signature: Lloyd M Roberson
Date (Month Day Year): 06 25 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: TIM BALTIERRA
Signature: T. Baltierra
Date (Month Day Year): 06 25 85

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Steve Simpson
Signature: STEVEN SIMPSON
Date (Month Day Year): 06 26 85

GENERATOR — TRANSPORTER — FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

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

84 80641

State of California—Health and Welfare Agency

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.: CAX000240408

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
Blue Cross of California
21555 Oxnard Street Woodland Hills, CA 91367

4 Generator's Phone (818) 703-3612

A. State Manifest Document Number: 84341547

B. State Generator's ID: CAX000240408

5 Transporter 1 Company Name: Omega Chemical Corp.

6. US EPA ID Number

C. State Transporter's ID: 62572

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 Chemical Corp.
12504 Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number

G. State Facility's ID: CAD042245001

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

GENERATOR

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 UN [redacted] ORME (Trichlorofluoromethane R-11) 9189	8	DRM	1600 ~~1000~~	16	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
8 / 200 lbs. Drums of Refrigerant formula R-11

K. Handling Codes for Wastes Listed Above
R01

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 governmental regulations.

Printed Typed Name: Lloyd M. Roberson
Signature: Lloyd M. Roberson
Date: Month 8 Day 27 Year 85

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

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

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: STEVEN SIMPSON
Signature: Steve Simpson
Date: Month 08 Day 27 Year 85

DHS 8022 A (7/84)
(EPA 8700-22)

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

84 89541

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

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

MAY 2, 1984

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

STATE ID NUMBER 83494065

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
BULLOCKS
2800 N. MAIN
SANTA ANNA, CA 92701
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAX000067405

TRANSPORTER NO. 1
OMEGA CHEMICAL CORP.
12504 E. WHITTIER BLVD.
WHITTIER, CA 90602

VEH./CONTAINER NO. 4/2507
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.	NA9189	02400	P	016	DM	211	01
TRICHLOROFLUOROMETHANE (R-11) D.O. Oil		675	G G	10	DM	221	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
1.1 Trichlorofluoromethane				
1.2 Oil				
1.3 Water				
2.1 Oil				

SPECIAL HANDLING INSTRUCTIONS
yield 2561 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 J. Nastor — MO 05 DAY 07 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 Jerry Solomon
DATE REC'D & ACCEPTED MO 05 DAY 07 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.

STEVE SIMPSON Steve Simpson
Printed or typed full name and signature

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

83-87967