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

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

Raw Material

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83516533

GENERATOR NAME AND MAILING ADDRESS
J & S Laboratories
521 East "D" Street
Wilmington, CA Attn: Bob Angelo
AREA CODE PHONE NUMBER (213) 830 1412

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD069657511

TRANSPORTER NO 1
INDUSTRIAL WASTE ENGINEERING
P. O. Box 6127
Long Beach, CA 90806

VEH/CONTAINER NO: 42936
EPA ID NUMBER: CAT080029671

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO
EPA ID NUMBER

TREATMENT STORAGE OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CO.
12504 E Whittier Blvd
Whittier CA 90602
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
Waste Methylene Chloride (ORM-A)	UN1593	2255	G	41	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
Methylene Chloride	95	90	X	
Water	5	2	X	

SPECIAL HANDLING INSTRUCTIONS *Material for Recycle/reclaim

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 Robert M. Angelo Robert M. Angelo — MO 07 DAY 17 YR 84

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

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature LEIGH H. FLOYD Leigh H. Floyd — DATE REC'D & ACCEPTED MO 07 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

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 Omega Chemical Tim Baltierra Tim Baltierra — EPA ID NUMBER CAD042245001 — DATE RECEIVED & ACCEPTED MO 07 DAY 18 YR 84

TO BE FILLED IN BY GENERATOR

TO BE FILLED IN BY TRANSPORTER

TO BE FILLED IN BY TSDF

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

06/13/2001 "ORIGINAL MANIFEST COPY"