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 047 812 203 | 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
SILICON GENERAL
11651 Monarch, Garden Grove, CA 92641

4. Generator's Phone (714) 892-5531

A. State Manifest Document Number: 84341315

B. State Generator's ID: CAD 047 781 203

5. Transporter 1 Company Name: OMEGA CHEMICAL CORP

6. US EPA ID Number: CAD 042 245 001

C. State Transporter's ID: 55909

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: CAD 042 245 001

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 N.O.S. ORM-E NA 9189 (MICROSTRIP)	3	DM	165	G	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: microstrip

K. Handling Codes for Wastes Listed Above: 01

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: Ernie Cavasos | Signature: Ernie Cavasos | Date (Month Day Year): 1 1 29 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Isaac Woods Jr. | Signature: Isaac Woods Jr | Date (Month Day Year): 1 1 29 85

18. Transporter 2 Acknowledgement or 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 Day Year): 1 1 29 85

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

05/17/2000 "ORIGINAL MANIFEST COPY"