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.: CAD 097465132
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: OPOLIS CORP. 21123 Nordhoff, Chatsworth
4. Generator's Phone (818) 709-3300

A. State Manifest Document Number: 84676818
B. State Generator's ID: CAD 097465132
C. State Transporter's ID: 708336
D. Transporter's Phone: (213) 265-8448
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAD 042245001
H. Facility's Phone: (213) 698-0991

5. Transporter 1 Company Name: VAN WATERS & ROGERS
6. US EPA ID Number: CAD 009230244
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: OMEGA CHEMICAL CORP. 12504 E. Whittier Blvd. Whittier, CA 90602
10. US EPA ID Number: CAD 042245001

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. FREON TMS-11 ORM - E UN 9189	7	DM	385	G	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SPENT FREON TMS R-11

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: VAN WATERS & ROGERS 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 governmental regulations.

Printed/Typed Name: JAMES M. REID
Signature: [signature]
Date: Month Day Year: 2 25 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Mike Zuber
Signature: Mike Zuber
Date: Month Day Year: 02 25 87

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: Henry R. Solomon
Signature: Henry R. Solomon
Date: Month Day Year: 02 25 87

GENERATOR

TRANSPORTER

FACILITY

84676818

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

DHS 8022 A (11/84)
(EPA 8700-22)

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