State of California—Health and Welfare Agency

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. CAD044403376 Manifest Document No. 00000

2. Page 1 of 1

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

A. State Manifest Document Number: 86133032

B. State Generator's ID: CAD044403376

C. State Transporter's ID: 708332

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

E. State Transporter's ID:

F. Transporter's Phone:

G. State Facility's ID: CAD042245001

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

3. Generator's Name and Mailing Address
ITT BARTON INSTRUMENTS CO.
900 S TURNBULL CANYON RD.
CITY OF INDUSTRY CA. 91749

4. Generator's Phone: 818 961-2547

5. Transporter 1 Company Name: VAN WATERS + ROGERS

6. US EPA ID Number: CAD009230244

7. Transporter 2 Company Name:

8. US EPA ID Number:

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

10. US EPA ID Number: CAD042245001

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 1,1,1 TRICHLOROETHANE ORM-A UN 2831	009	DM	00470	G	211
b. SPENT FREON TMC ORM-E UN9189	002	DM	00110	G	211
c.					
d.					

J. Additional Descriptions for Materials Listed Above: HA HQ 36-007481

K. Handling Codes for Wastes Listed Above: R01

15. Special Handling Instructions and Additional Information
WEAR GOGGLES + GLOVES VW+R S.O. # 9466

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.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also 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 I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: ROBERT E. RILEY Signature: [signature] Month Day Year: 11 10 15 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JERRY COOPER Signature: [signature] Month Day Year: 11 11 15 86

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: Gilbert Solomon Signature: [signature] Month Day Year: 11 15 86

DHS 8022 A (11/85)
(EPA 8700—22)

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

06/14/2001 "ORIGINAL MANIFEST COPY"