State of California—Health and Welfare Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-88)
Please print or type (Form designed for use on elite (12-pitch typewriter)) 8-14-87

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No: CAD 077012212013
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) 898-8121

A State Manifest Document Number: 87114230
B State Generator's ID: CAD077012213
C State Transporter's ID: 203783
D Transporter's Phone: 213 698-0991

5 Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6 US EPA ID Number: CAD 104225101
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 RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER, CA 90602
10 US EPA ID Number: CAD 104225101
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. WASTE CORROSIVE LIQUID N.O.S. UN 1760 (MICRO-STRIP) CORROSIVE MATERIAL	012	DM	100	G	State / EPA/Other
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J Additional Descriptions for Materials Listed Above

K Handling Codes for Wastes Listed Above
a. 01 b. c. d.

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 government regulations.

If I am a large quantity generator, I 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 that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: X HIEP NGUYEN
Signature: Hiep Nguyen
Month Day Year: 10 8 1987

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: TIM BALTIERRA
Signature: Tim Baltierra
Month Day Year: 10 8 1987

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: FRANK FORD ~~HIEP NGUYEN~~
Signature: Frank Ford ~~Hiep Nguyen~~
Month Day Year: 10 8 1 1987

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802 WITHIN CALIFORNIA CALL 1-800-852-7550

DHS 8022 A (1-87)
EPA 8700-22
(Rev. 9-86) Previous editions are obsolete

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

INSTRUCTIONS ON THE BACK

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