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).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD981664576 — Manifest Document No.:

2. Page 1 of

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

3. Generator's Name and Mailing Address: City of Whittier Yard. 12016 Hadly St. Whittier Ca. 90603

4. Generator's Phone ( )

A. State Manifest Document Number: 87118857

B. State Generator's ID: CAD981664576

5. Transporter 1 Company Name: Omega Recovery Services — 6. US EPA ID Number: CAD042245001

C. State Transporter's ID: 904878

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 Recovery Services 12504 E. Whittier Blvd. Whittier Ca. 90602 — 10. US EPA ID Number: CAD042245001

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 Acid Liquids N.O.S. LAB Pack 1760	1	DM	400	P	State / EPA/Other
b. HAZARDOUS WASTE Liquid N.O.S. Lab Pack 9189.	1	DM	400	P	State / EPA/Other
c. WASTE Acid Liquid N.O.S. "Nitric Acid." 1760	1	DM	200	P	State / EPA/Other
d. WASTE FLAMMABLE Liquid N.O.S. U.N. 1993	14	DM	7000		State / EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: a. 01 b. 01 c. 01 d. 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 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: Donn G. Ramirez — Signature: Donn G. Ramirez — Month Day Year: 06 21 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: N. JAY Solomon. — Signature: N. Jay Solomon — Month Day Year: 6 21 88

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 — Signature: Frank Ford — Month Day Year: 6 21 88

GENERATOR — TRANSPORTER — FACILITY

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

DHS 8022 A (1/87) White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK