SFUND RECORDS CTR
88134170
ITX 2166-04749

HR TEXTRON

SFUND RECORDS CTR
2166-04749

**INTEROFFICE COMMUNICATION**

**TO:** John Hedges

**FROM:** M.L. Ameel

**DATE:** June 24, 1991

**SUBJECT:** Response to EPA Letter Dated 10 May 1991 (Question #11, Pages 9 & 10)

**REFERENCE:** IOC Dated June 4, 1991, M.L. Ameel to John Hedges

==========

**Question:** Did you ever transport to the facility or use, purchase, generate, store, treat, dispose, or otherwise handle at the facility any materials, either hazardous or non-hazardous? If the answer to this question is anything but an unqualified "no", identify:

**Answer:** Yes. Supplied as reference material for answers to the subquestions a. through h. are Exhibits A through G. Exhibits A, Locations and E, Suppliers are attached. Exhibits B, Chemical List; C, Chemical Usage; D, Manifests; F, Manufacturing Processes; G, SARA Reports; H, Hazardous Substances, Safety Procedures; and I, Chemical Inventory are provided as separate exhibits.

The operation at the Pacoima facilities has basically remained unchanged over the years. Information supplied on current chemical usage, manufacturing processes, etc. is representative of the past in cases for which no information (data) is available.

**Question a:** In general terms, the nature and quantity of the non-hazardous materials so transported, used, purchased, generated, stored, treated, disposed, or otherwise handled:

**Answer:** Per J. Hedges, this question on non-hazardous material does not require an answer.

**Question b:** The common chemical name, specific chemical name, Chemical Abstract Service (CAS) number, chemical composition, characteristics, and physical state

ok

350114

(e.g., solid, liquid, gas) of each hazardous material so transported, used, purchased, generated, stored, treated, disposed, or otherwise handled:

**Answer:** The information we have in answer to question b, chemical name and CAS number, is found by referencing Exhibits B, C and I.

**Question c:** The persons who supplied you with each such hazardous material or how each such hazardous material was generated by you:

ok

**Answer:** Suppliers and manufacturing processes are found in Exhibits E and F.

**Question d:** How each such hazardous material was transported, used, purchased, stored, treated, disposed, or otherwise handled by you:

How used & ~~[illegible]~~ stored

Specifically

**Answer:** Exhibits A, D, F and H can be referenced in answer to question d.

**Question e:** When each such hazardous material was transported, used, purchased, generated, stored, treated, disposed, or otherwise handled by you:

When used/stored

**Answer:** The timing for transporting, using, purchasing, etc. is dependent upon production schedules. The manifests provided in Exhibit D are records on the disposition of hazardous waste generated through the manufacturing process. The dates associated with these manifests are representative of the timing for transporting, using, purchasing, etc.

**Question f:** Where each such hazardous material was used, purchased, generated, stored, treated, disposed, or otherwise handled by you, describing the location(s) and providing a map or diagram of such location(s). Location information should include, but is not limited to, information pertaining to tanks, ponds, treatment facilities, and other units which were historically used to generate, store, treat or dispose of hazardous materials, but which may no longer exist:

where used stored

**Answer:** See Exhibit A, D and I which provide information on locations.

**Question g:** The persons who transported and/or disposed of each such hazardous material. If disposal off of the facility occurred, provide a detailed description, including copies of manifests, and

identify the location where the hazardous material was transported:

**Answer:** See Exhibit D, Manifests.

**Question h:** The annual quantity of each such hazardous material used, purchased, generated, stored, treated, transported, disposed, or otherwise handled by you, reported in gallons for liquids and pounds for solids.

specific place

**Answer:** Information on quantities can be found in Exhibits C, G and I.

MLA:sj

cc: M. Bell
B. Moses
R. Pascoe
J. Wheeler

Jeff Wheeler

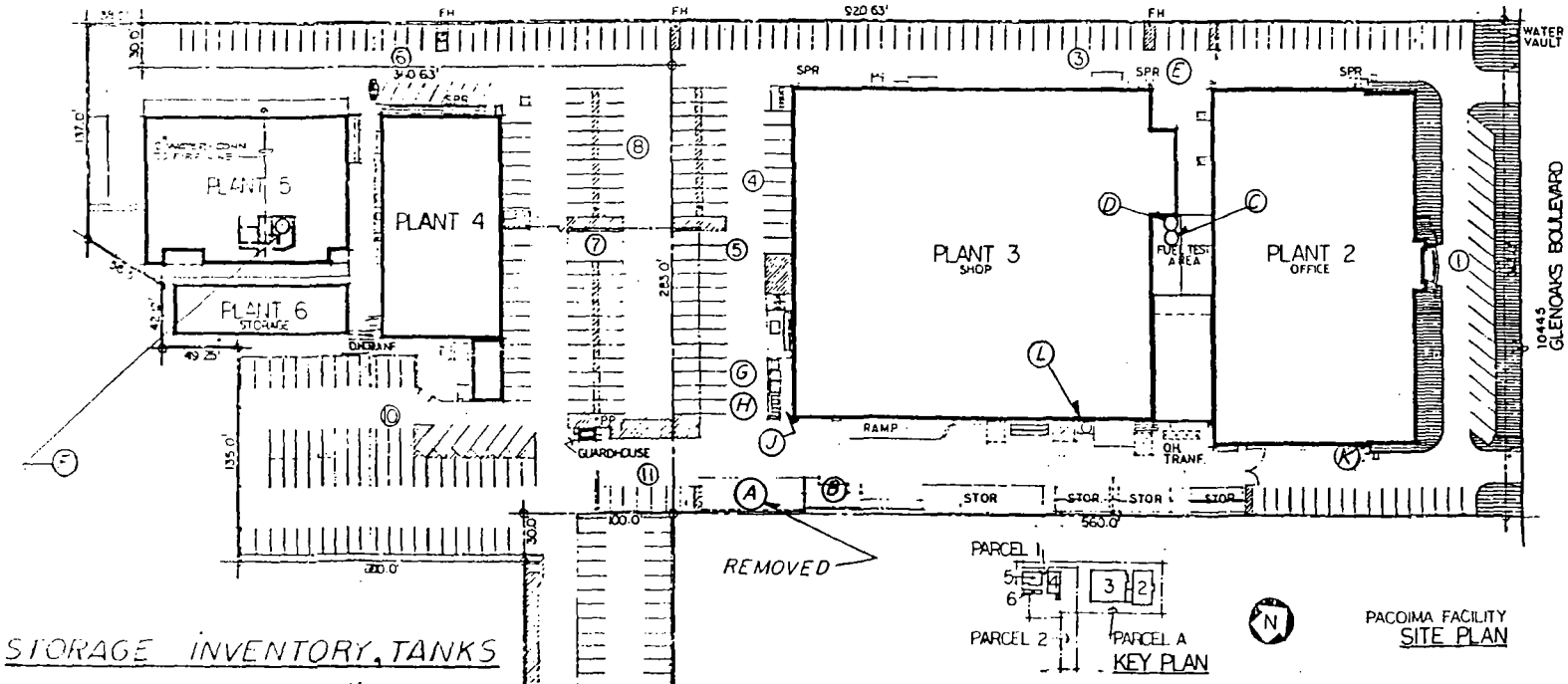
Chemical Distributers

1,1,1 Trichloroethane - RHO CHEM, BARON BLAKSLEE
Stoddard Solvent - VWR, LT SAWYER, HOLCHEM, OSCO
ACETONE - VWR, HOLCHEM, Chase (NAVY HOLCHEM)
MEK - HOLCHEM, McKESSON, RHO CHEM
TOLUENE - HOLCHEM, VWR, McKESSON
FREON - BARON BLAKSLEE, RHO CHEM, VWR, ASHLAND
ALCOHOL - VWR, HOLCHEM
ALODINE - AVIALL, AMCHEM
ADHESIVES + SEALANTS - K R ANDERSON, EV ROBERTS, R.S. HUGHES, WILCO ASSOC
BASE OIL C - URESCO ARDROX, EXXON
Hydraulic Oil - CASTROL - (formerly from Bray + Castrol bought Bray)
Machine Shop Cutting oil - TOPANGA OIL,
(OMICRON + GAMMA)
LAPPING Compound - United STATES PRODUCTS, &
LAPPING Vehicle - JOHN CRANE Co.
HONING OIL - Sunnen Products
LOCTITE Sealant - R.S. Hughes Co.
VARIOUS J.T. BAKER LAB Chemicals - VWR
ARMSTRONG A-12 Adhesive = J.S. SWITZER
KOOL KUT CUTTING oil = Union oil
KLEAR KUT CUTTING oil = " "
AMMONIA = VWR, HOLCHEM, HOPPER INC.
Mentor 28 = Rosemead oil
PAINT = BURBANK PAINT, KOPPERS, DE SOTO Chemical

RECEIVED
JUN 21 1991
HR TEXTRON

Willie Matlock

EXHIBIT E







PACOIMA FACILITY
SITE PLAN

SCALE: 1" = 125'

## STORAGE INVENTORY, TANKS

| TANK NO. | DESCRIPTION | SIZE* | CONTENTS |
|---|---|---|---|
| (A) | UNDERGROUND | 2-1000 | WASTE OIL |
| (B) | ABOVEGROUND | 3-600 | WASTE OIL |
| (C) | " | 1-3500 | STODDARD SOL. |
| (D) | " | 1-3000 | " |
| (E) | UNDERGROUND | 1-5000 | EMPTY SPILL CONTAIN. TANK |
| (F) | ABOVEGROUND | 1-120 | DOWTHERM OIL |
| (G) | " | 1-1000 | STODDARD SOL. |
| (H) | " | 2-1000 | CUTTING OIL |
| (J) | " | 1-500 | 1,1,1 TRICHLOROETHANE |
| (K) | " | 1-200 | FREON |
| (L) | " | 1-535 | ARGON |

*GALLONS

### BUILDING AREAS

| | | |
|---|---|---|
| PLANT 2 | 33,325 | SF |
| PLANT 3 | 51,345 | SF |
| PLANT 4 | 12,000 | SF |
| PLANT 5 | 12,240 | SF |
| PLANT 6 | 3,775 | SF |
| TOTAL | 112,985 | SF |

### LAND AREAS

| | | | |
|---|---|---|---|
| PARCEL A | 186,099 SF | 4.27 | ACRES |
| PARCEL 1 | 106,800 SF | 2.45 | ACRES |
| PARCEL 2 | 37,300 SF | .86 | ACRES |
| TOTAL | 330,199 SF | 7.58 | ACRES |

### PARKING SUMMARY

| | |
|---|---|
| (1) | 18 SPACES |
| (2) | 17 |
| (3) | 58 |
| (4) | 10 |
| (5) | 22 |
| (6) | 37 |
| (7) | 47 |
| (8) | 33 |
| (9) | 0 |
| (10) | 75 |
| (11) | 7 |
| (12) | 68 |
| TOTAL | 400 SPACES |

### CODE INFORMATION

ZONING: M2-1
FIRE DISTRICT: 2-100'
REQ'D PARKING:
PLANTS 2&3 = 170 CARS
PLANTS 4 5 6 = 56
TOTAL = 226 CARS

| | CONST. TYPE | OCCUP. | PERMIT DATE |
|---|---|---|---|
| PLANT 2 | III B | G-1 | 12/23/55 |
| PLANT 3 | IV | G-1 | 12/20/66 |
| PLANT 4 | III B | G-1 | 9/11/58 |
| PLANT 5 | III B | G-1 | |
| PLANT 6 | IV | G-1 | |

12137 MONTAGUE STREET

SURFACE TEXTURE SHALL BE √
DIAMETERS SHALL BE CONCENTRIC WITHIN ____ DIA.
APPLY FSCM NO. 81873 TO SHAPES ONLY.
IDENTIFY WITH PART NO. AND LATEST REVISION LTR.
UNLESS OTHERWISE SPECIFIED

UNLESS OTHERWISE SPECIFIED
DIMENSIONS ARE IN INCHES
DO NOT SCALE
TOLERANCES: ANGLES ± 30'
.XX ± .03 .XXX ± .005
REMOVE ALL BURRS
BREAK CORNERS .005 - .010
INTERNAL RADII .005 - .010
INTERPRET DRAWING PER DOD-STD-100

CONTRACT NO
DRAWN WF
CHECKED
APPROVED
DESIGN APPROVED
APPROVED
ENGRG RLSE

HR TEXTRON

SITE PLAN

SIZE D | FSCM NO 81873 | DRAWING NO FE-P-G-01

WEIGHT
STRESS
Q.A.
VAL. ENGRG
MATL

DASH NO. | NEXT ASSEMBLY | USED ON

MATERIAL | HEAT TREAT | FINISH

EXHIBIT A

# EXHIBIT B

## CHEMICAL LIST

RESPONSE TO QUESTION #11 PAGE 10

CHEMICAL INVENTORY 9/90

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| ACETYLENE | UNION CARBIDE | 285 |
| ALL PURPOSE LUBRICANT | STARRETT | 285 |
| AMMONIA | UNKNOWN | 285 |
| ARROW 130 | CHEM ARROW | 285 |
| CALCLEAN | CALGON | 285 |
| GASKET REMOVER (CLING) | CLING-SURFACE | 285 |
| DERMA CARE 1016 | NAT. SANITARY SUP. | 285 |
| DEXTRON II/ATF | CASTROL | 285 |
| DOW CORNING 1000 | DOW CORNING | 285 |
| DURATEC EXTERIOR FINISH | FRAZEE | 285 |
| EMBECO 636 GROUT | MASTER BUILDERS | 285 |
| EPOXY | HARDMAN | 285 |
| FLOETROL | FLOOD CO. | 285 |
| FREON 500 | DUPONT | 285 |
| FREON 22 | DUPONT | 285 |
| FREON 12 | DUPONT | 285 |
| FRON 502 | DUPONT | 295 |
| GASKET CEMENT | PERMATEX | 285 |
| GASKET REMOVER | PERMATEX | 285 |
| GASOLINE | VARIOUS | 285 |
| HENRY 105 ASPHALT PRIMER | HENRY CORP. | 285 |
| HYDROCHLORIC ACID CL-639 | MOGUL CORP. | 295 |
| LIQ. LEMON HAND SOAP | NAT. SANITARY SUP. | 295 |
| LOCTITE | LOCTITE | 285 |
| NSS | NAT. CHEM. CORP | 295 |
| OXYGEN (PRESSURIZED) | GENERAL WELDING | 285 |
| PAINTS | DUNN EDWARDS | 285 |
| PINE-O-LINE 1711 | NAT. SANITARY SUP. | 285 |
| PINK LOTION SOAP 1116 | NAT. SANITARY SUP. | 285 |
| PLIOBOND | ASHLAND CHEM. | 295 |
| PROUOSIL | REPCO II | 285 |
| REFRIG. OIL 150 | VIRGINIA KMP CORP. | 285 |
| REFRIG. 300 | VIRGINIA KMP | 285 |
| RUST STOP (PAINT) | FRAZEE | 295 |
| SAMACOR 2621 | SAN JOAQUIN CHEM. | 285 |
| SANAPER 3708 | SAN JOAQUIN CHEM. | 285 |
| SEALANT | DOW CORNING | 285 |
| SOLVENT (STODDARD) | SHELL OIL | 295 |
| SPRAY PAINT | RUSTOLEAM | 285 |
| SWITCH/CONTACT CLEANER | CROWN | 285 |
| TF CONTACT CLEANER D 5625 | ZIP | 285 |
| THERMOCLEAN | ENVIRONMENTAL PROD. | 295 |
| THREAD LOCKER | LOCTITE | 285 |
| WATER SEAL | THOMPSONS | 285 |
| WD-40 | WS-40 | 285 |
| ROOF CEMENT #208 | HENRY CORP. | 285 |
| WHIRLWIND GLASS CLEANER | NAT. SANITARY SUP. | 285 |

## CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| C-102 HIGH TEMPERATURE | FEL-PRO INC. | 348 |
| CENTER LUBE | CHICAGO MFG. | 348 |
| CHEM ARROW 7588 | DON RICHETTS | 348 |
| DSCO 169A | STUART IRONSIDE | 348 |
| DYKEM | DYKEM CORP | 348 |
| EXELLENE 5631 | STUART IRONSIDE | 348 |
| MOBIL DTE #26 | MOBIL | 348 |
| MOBIL GEAR #630 | MOBIL | 348 |
| MOBIL 500 W CYLINDER | MOBIL | 348 |
| MOBIL DTE #24 | MOBIL | 348 |
| MOBIL EP2 | MOBIL | 348 |
| MOBIL VELOCITE | MOBIL | 348 |
| MOBILARMA-245 | MOBIL | 348 |
| MOBILGEAR #632 | MOBIL | 348 |
| MOBILUX EP2 | MOBIL | 348 |
| REFRIGERANT #12 | DUPONT | 348 |
| REFRIGERATION OIL | VIRGINIA | 348 |
| SOLVENT (STODDARD) | SHELL OIL | 348 |
| STARRETT LITE OIL | STARRETT | 348 |
| VACTRA NO2 | MOBIL | 348 |

CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| CUTZOL EDM 250 | DEVCON RUSTLICK | 349 |
| MENTOR 28 | MOBIL | 349 |
| MOBIL VATRO OIL #2 | MOBIL | 349 |
| MOBIL DTE 24 | MOBIL | 349 |
| MOBILUX EP2 | MOBIL | 349 |
| PALM LIQUID HAND SOAP | NATIONAL SANITARY | 349 |
| SOLVENT (STODDARD) | SHELL OIL | 349 |
| STARRETT LITE OIL | STARRETT | 349 |

# CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| ACETONE | HOLCHEM | 505 |
| ADHESIVE, ARMSTRONG A12 A&B | ARMSTRONG | 505 |
| ADHESIVE, (PLASTIC) #4475 | 3M | 505 |
| ADHESIVE, 9394 | HYSOL | 505 |
| ADHESIVE, 2216 | 3M | 505 |
| ADHESIVE, PR-1750 | PRC | 505 |
| AIR-TEC TYPE I | HELIUM LEAK TESTING | 505 |
| AIR-TEC 1-33 TYPE I | HELIUM LEAK TESTING | 505 |
| ALCOHOL, ISOPROPYL | HOLCHEM | 505 |
| AL-LUMITAP CUTTING FL. | AL-LU PROD. | 505 |
| ALODINE, #600 | AMCHEM PRODUCTS | 505 |
| ALODINE, #1201 | AMCHEM PRODUCTS | 505 |
| B-CLEANER BLUE | CHEM CHEMICAL CORP. | 505 |
| CEE-BEE A-202 (METHYLENE CHLORIDE/PHENOL) | MC GEAN ROCHO | 505 |
| CLEANER, APC | MARKING METHODS | 505 |
| COATING, ACRYLIC #1301 | BORDEN | 505 |
| COATING, FUEL RESISTANT #776 | 3M | 505 |
| CYLOK R | LORD | 505 |
| DRILUBE TYPE III | DRILUBE | 505 |
| DYKEM LAYOUT FL. | DYKEM | 505 |
| ELECTROLITE, #A10 | MARKING METHODS | 505 |
| ELECTROLYTEL, #MSC1 | MARKING METHODS | 505 |
| EPOXY, EA934 A & B | DEXTRO HYSOL | 505 |
| EPOXY 1383 | 3M | 505 |
| EPOXY, 1838 | 3M | 505 |
| EPOXY, #3135 & 7111 | CREST | 505 |
| EPOXY, PRC 1422 | PRODUCT RESEARCH | 505 |
| EPOXY, EA9309 | DEXTRO HYSOL | 505 |
| FLUX, #197 | KESTER | 505 |
| FLUX, SUPERIOR #23 | SUPERIOR | 505 |
| FREON, TF | BARON-BLAKESLU | 505 |
| G-1000 | DYNATECH FRONTIER | 505 |
| GAME CUTTING FL. | MOBIL | 505 |
| GREASE, #FS-3452 | DOW CORNING | 505 |
| GREASE #33 | DOW CORNING | 505 |
| GREASE #632/S | BRAY OIL | 505 |
| GREASE, #111 | DOW CORNING | 505 |
| GREASE, RTV #734 | DOW CORNING | 505 |
| GREASE, #730 | DOW CORNING | 505 |
| GREASE, #55 | DOW CORNING | 505 |
| GREASE, LID PLATE #250 | ARMITE LAB | 505 |
| GREASE, #33 | DOW CORNING | 505 |
| GREASE, SCOTCH SEAL #EC-801 A & B | 3M | 505 |
| HYDRAULIC OIL, 5606E | TECHNOLUBE | 505 |
| INK, 73X MARKING | INDEPENDENT INK | 505 |
| INK, MARKING #15 | INDEPENDENT INK | 505 |
| INK, SPRAY AA-208 TYPE III | IDEAL | 505 |
| KRYTOX 240 AC | KRYTOX | 505 |

| | | |
|---|---|---|
| LOCTITE 4A | LOCTITE | 505 |
| LOCTITE, E | LOCTITE | 505 |
| LOCTITE, EV | LOCTITE | 505 |
| LOCTITE, SEALANT A #88-31 | LOCTITE | 505 |
| LOCTITE, SEALANT AV, #8731 | LOCTITE | 505 |
| LOCTITE, SEALANT #290 | LOCTITE | 505 |
| LOCTITE, INSTANT SEAL 518 | LOCTITE | 505 |
| LOCTITE, PRIMER T, #74756 | LOCTITE | 505 |
| LOCTITE, PRIMER N, 76457 | LOCTITE | 505 |
| LOCTITE, SEALANT AVV, #86-41 | LOCTITE | 505 |
| LPS TAP-ALL | HOLT LLOYD CORP | 585 |
| LUBRICANT, #P-80 (RUBBER) | INTERNATIONAL PROD. | 505 |
| LUBRICANT, M1 | STARRETT | 505 |
| LUBRICANT, EXTREME PRESSURE #3 | C.M.D. | 505 |
| MEK | HOLCHEM | 505 |
| NITROGEN, GAS | GENERAL WELDING | 505 |
| NITROGEN, LIQUID | GENERAL WELDING | 505 |
| NSS CONCEN. CLEANER | UNKNOWN | 505 |
| OAKITE | OAKITE PROD. | 505 |
| PARKER-O-LUBE | PARKER SEAL | 505 |
| PETROLEUM JELLY | KOPPERS | 505 |
| PRIMER COAT, P-527E | KOPPERS | 505 |
| SCOTCH WELD, #1838 A & B | 3M | 505 |
| SOLVENT, T-7 - RECONDITIONER | INDEPENDENT INK | 505 |
| SPRAY #AC-29-7S DOLPH SPRAY | DOLPH | 505 |
| STODDARD SOLVENT, #PD680 TYPE II | RHO CHEM | 505 |
| STYCAST 2651-40 BLACK | EMERSON & CUMING | 505 |
| WD-40 | WD-40 CO | 505 |

CHEMICAL INVENTORY 9/89

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| 905xx (sodium silicate) | Magnus Div/Economics | 517 |
| Arrow 7558/petroleum oil | Chem Arrow Corp. | 517 |
| Fremont 776 cleaner | | |

CHEMICAL INVENTORY 7/90

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| FORMULA 409 | CLOROX | 524 |
| HYDROGEN PEROXIDE | THRIFTY | 524 |
| ISOPROPYL ALCOHOL | LILLY | 524 |
| LIQUID PAPER THINNER | GILLETTE | 524 |
| LIQUID PAPER | GILLETTE | 524 |
| RUBBER CEMENT | SANFORD | 524 |

CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| ACETONE | HOLCHEM | 527 |
| ADHESIVE, 4475 PLASTIC | 3M | 527 |
| AIR-TEC 1-33 TYPE 1 | AIRTEC | 527 |
| AIRCLEANER DUST, COARSE | AC SPARKPLUG | 527 |
| ALCOHOL, ISOPROPYL | HOLCHEM | 527 |
| ALODINE 1201 | AMCHEM | 527 |
| ALUMINUM POWDER | ALFA PRODUCTS | 527 |
| ALUMITAP | AL-LU PRODUCTS | 527 |
| AV-GAS | UNOCAL | 527 |
| BRONZE PUTTY RESIN HARDENER | DEVCON | 527 |
| CATALYST, SILI GEL | TELEDYNE GETZ | 527 |
| CAUSTIC SODA, SODIUM HYDROXIDE 50% | HOLCHEM | 527 |
| COATING, (TANK) #PR-1560-MK PART C | PRODUCTS RESEARCH | 527 |
| COMPOUND A POLY MIL-CHYDROXIDE | | 527 |
| COMPOUND B HARDENER | ? | 527 |
| COMPOUND SILICONE CARBIDE | CLOVER | 527 |
| COMPOUND B PRIMER HARDENER | ? | 527 |
| CORRECTION FLUID, LIQUID PAPER | GILLETTE | 527 |
| DEVCON BRONZE PUTTY RESIN | DEVCON | 527 |
| DEVCON PLASTIC STEEL A | DEVCON | 527 |
| DYKEM SPRAY-STEEL BLUE | DYKEM CO. | 527 |
| EPOXY ADHESIVE, SCOTCH WELD 2216 PART A | 3M | 527 |
| EPOXY ADHESIVE, SCOTCH WELD 2216 PART B | 3M | 527 |
| FLUID, CUTTING DUAL ACTION #2 | TAPMATIC | 527 |
| FLUX, ZINC CHLORIDE | GE | 527 |
| FREON 12, 1,1,1-TRICHLOROETHANE | SPRAYTEC | 527 |
| FREON TF, 1,1,1-TRICHLOROTRIFLUOROETHANE | | 527 |
| G1000 WATER CONCENTRATE | MERIAM INSTRUMENT | 527 |
| GLUE, WILHOLD | WILHOLD | 527 |
| GREASE, KRYTOX FLUORINATED 240 SERIES | DUPONT | 527 |
| GREASE, SPECIAL SEALING | PHOTOVOLT-SERAGEN | 527 |
| GUN BLUE | OUTERS | 527 |
| HYDROCHLORIC ACID | HOLCHEM | 527 |
| IRON POWDER | ALFA PRODUCTS | 527 |
| ISO-OCTANE & TOLUENE MIXTURE, BRACO 933 | CASTROL | 527 |
| ISO-OCTANE, BRACO 931 | CASTROL | 527 |
| JP-10 | KOCH IND. | 527 |
| JP-4 | NEWHALL REFINING | 527 |
| JUST FOR COPIES LIQUID PAPER | GILLETTE | 527 |
| JUST FOR COPIES THINNER | GILLETTE | 527 |
| LEAD | EM INDUSTRIES | 527 |
| LOCTITE QUICK SET 404 | LOCTITE | 527 |
| LOCTITE 515 | LOCTITE | 527 |
| LOCTITE 510 | LOCTITE | 527 |
| LOCTITE RC/690 | LOCTITE | 527 |
| LOCTITE, 290 | LOCTITE | 527 |
| LUBE, SUPER | SYNCO | 527 |
| LUBE, TFE #62-4621-4830-5 | 3M | 527 |

| | | |
|---|---|---|
| LUBRICANT, 55 O-RING | DOW | 527 |
| LUBRICANT, III VALVE LUB & SEALANT | DOW | 527 |
| LUBRICANT, (VALVE) 3452 CHEM. RESISTANT | DOW | 527 |
| LUBRICANT, EXTREM PRESSURE LUBE #3 | CHICAGO MFG. | 527 |
| LUBRICANT, M1 | STARRET | 527 |
| LUBRICANT, ALL PURPOSE LPS2 | HOLT LLOYD | 527 |
| MAGNETIC OXIDE | PFFLER | 527 |
| MANOMETER H2O | MERIAM INSTRUMENT | 527 |
| MEK | HOLCHEM | 527 |
| METAL POLISH, BRITE BOY | OLD TYME PRODUCTS | 527 |
| METAL CLEANER | OUTERS | 527 |
| METHYLENE CHLORIDE | ? | 527 |
| MOLD LUBRICANT, PURE SILICONE #5100 | ZIP AEROSOL PRODUCTS | 527 |
| NAPHTHENIC ACD | MATHESON, COLEMAN/BELL | 527 |
| NITROGEN | VALLEY WELDING | 527 |
| NITROGEN, LIQUID LOW PRESSURE LP LN2 | VALLEY WELDING | 527 |
| OIL, VACUUM PUMP, DUAL STAGE | MOBIL | 527 |
| OIL, RED, BRAY MIL-H-5606 | CASTROL | 527 |
| OIL, RED GAUGE 0.826 SPECIFIC GRAVITY | DWYER INSTRUMENTS | 527 |
| OIL, VACUUM PUMP DUO SEAL | SARGEANT WELCH | 527 |
| PERMAGUM CORDS | VIRGINIA KAP CORD | 527 |
| PLASTER OF PARIS | DOWMANS | 527 |
| PLASTIC STEEL A HARDNER | DEVCON | 527 |
| PRIST | PPG INDUSTRIES | 527 |
| PROPANE FUEL | SEARS ROEBUCK | 527 |
| QUINTZ QUARTZ | AGSCO | 527 |
| RUSTOLEUM GLOSS BLACK 779 | RUSTOLEUM | 527 |
| SILI GEL BASE | TELEDYNE GETZ | 527 |
| SILI GEL PROMOTOR | TELEDYNE GETZ | 527 |
| SILICA SAND | ? | 527 |
| SODIUM CHLORIDE, (SALT) | J.T. BAKER | 527 |
| SODIUM HYDROXIDE | HOLCHEM | 527 |
| SOLDER, SB5 | KESTER | 527 |
| SOLDER SN63 | KESTER | 527 |
| SOLDER RHEOMET | KESTER | 527 |
| SOLUTION, PHOTOVOLT VESSEL SOLUTION B | PHOTOVOLT-SERAGEN | 527 |
| SOLUTION, NEUTRALIZING | PHOTOVOLT-SERAGEN | 527 |
| SOLUTION, CHAMBER | SERAGEN DIAGNOSTICS | 527 |
| SOLUTION, GENERATOR | SERAGEN DIAGNOSTICS | 527 |
| SOLUTION, PHOTOVOLT VESSEL SOLUTION A | PHOTOVOLT-SERAGEN | 527 |
| SOLUTION, NEUTRALIZING | SERAGEN DIAGNOSTICS | 527 |
| SOLVENT, HOPPES #9 POWDER | HOPPE (PENGUIN IND.) | 527 |
| SPRAY THIN ADHESIVE | 3M | 527 |
| STANDARD TEST DUST COURSE | ? | 527 |
| STANDARD TEST DUST FINE | ? | 527 |
| STODDARD SOLVENT, PD680 | VWR | 527 |
| SULFURIC ACID | CHASE | 527 |
| SUPER WEATHERSTRIP ADHESIVE | 3M | 527 |
| WD-40 | WD-40 CO. | 527 |
| WELD ON 4 | IPS | 527 |

CHEMICAL INVENTORY

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| LIQUID PAPER THINNER | GILLETTE | 528 |
| LIQUID PAPER | GILLETTE | 528 |
| MEK | CHASE CHEMICALS | 528 |
| ROLL-ON STAMP PAD INKER | SANFORD | 528 |
| RUBBER CEMENT | SANFORD | 528 |

CHEMICAL INVENTORY

| PRODUCT | MANUFACTURER | DEPT |
|---|---|---|
| ANTI-STATIC FL. | XEROX | 530 |
| ANTI-STATIC SPRAY | CROWN | 530 |
| LIQUID PAPER | GILLETTE | 530 |
| LIQUID PAPER THINNER | GILLETTE | 530 |
| NUMBERING MACHINE INK | CARTER | 530 |
| ROLL-ON STAMP PAD INKER | GILLETTE | 530 |

CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| AL-LUMITAP CUTTING FLUID | AL-LU PROD. | 751 |
| CAUSTIC SODA | PPG INDUS. | 751 |
| CLEANER FORMULA APC | MARKING METHODS | 751 |
| CLEANER (MC) QC2044 | ZIP CHEM | 751 |
| DEVELOPER, D-100 | SHERWIN | 751 |
| DYKEM REMOVER #138 | DYKEM CO | 751 |
| DYKEM (Steel Blue) | DYKEM CO | 751 |
| DYKEM-LAYOUT DX 296 | DYKEM CO | 751 |
| FLUORES PENETRANT OIL # RC-65 | SHERWIN | 751 |
| GLYCERIN | WHITEWORTH | 751 |
| HYDROCHLORIC ACID | PPG INDUS. | 751 |
| INK (73X BLACK MARKING) | INDEPEND. INK | 751 |
| INKER ROLL-ON STAMP PAD | SANFORD CO. | 751 |
| ISOPROPYL ALCOHOL | RHO-CHEM | 751 |
| KERR ACCELERATOR II SILICONE | VALLEY DENTAL SUPPLY | 751 |
| LUBRICANT (STARRETT M-1) | L.S. STARRETT | 751 |
| M.E.K. METHYL ETHYL KEYTONE | ? | 751 |
| MIL-H-6083E | LUBRICATING SPECIAL. | 751 |
| MOBILARMA 245 | MOBIL OIL CORP. | 751 |
| RECONDITIONER 73X | INDEPENDENT INK INC. | 751 |
| REMOVER CLEANER, DR 60 | MAGNAFLUX CORP | 751 |
| SIL-GEL Liquid (Catalyst) | TELEDYNE-GETZ | 751 |
| SILI-GEL BASE | TELEDYNE GETZ | 751 |
| SODIUM ACETATE, SOLUTION A,39 | KOSLOW SCIENTIFIC | 751 |
| SODIUM ACETATE, SOLUTION B,45 | KOSLOW SCIENTIFIC | 751 |
| TRAY ELASTICON-BASE TYPE II | KERR ROMULUS | 751 |
| TRAY ELASTICON-ACCEL. II | KERR ROMULUS | 751 |
| TRICHLOROTRIFUOROETHANE | BARON BLAKESLEE | 751 |
| WINDOW CLEANER | K.H.L. MONTEBELLO | 751 |

# CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| 1.1.1-TRICHLOROETHANE | RHO-CHEM | 757 |
| ALCOHOL, ISOPROPYL | RHO-CHEM | 757 |
| CHROLINATING TABLETS | CHEMLAB PROD. | 757 |
| CLEANER, KLEEN B | INDUSTRIAL CHEMICAL | 757 |
| DEVELOPER, DUBL-CHEK D-100 | SHERWIN | 757 |
| DEVELOPER, D113G | SHERWIN | 757 |
| DIOXIDIZER 102 TNC | INDUS. CHEMICAL | 757 |
| EMULSIFIER- ER 83A EMULSIFIER | SHERWIN | 757 |
| HM 604 PENETRANT | SHERWIN | 757 |
| INDICATOR #20 | INDUS. CHEMICAL | 757 |
| IRON OXIDE, MAGNAFLUX 14A POWDER | MAGNAFLUX | 757 |
| MOBILARMA 245 | MOBIL | 757 |
| O-MATIC SCREEN CLENAER | KODAK | 757 |
| OIL, BASE OIL HF, SUSP FLUID | ARDROX | 757 |
| PASA JELL 101 | SEMCO | 757 |
| PENETRANT, SHERWIN I-319 FLUORESCENT | SHERWIN | 757 |
| PENETRANT, DUBL-CHEK RC 65 | SHERWIN | 757 |
| POLISH, METAL, BRITE BOY | OLDE TYME PRODUCS | 757 |
| REMOVER, DUBL-CHEK DR 60 | SHERWIN | 757 |
| SILICONE, SILI GEL BASE | TELEDYNE DENTAL PROD. | 757 |
| SODIUM PROPIONATE | SPECTRUM | 757 |
| SOLUMAT INDUS. DEVELOPER | SOLUTEK | 757 |
| SOLUMAT INDUSTRIAL FIXER | SOLUTEK | 757 |
| TESTING SOLUTION #36 | INDUS. CHEMICAL | 757 |

# CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| ALODINE 1201 | PARKER & AMCHEM | 771 |
| ALUMITAP | WINDRO | 771 |
| CARBORUNDUM | CARBORUNDUM | 771 |
| CUTTING OIL, OMNICRON | MOBIL | 771 |
| CUTTING OIL GAMMA (STEE) | MOBIL | 771 |
| DISCOOL | CAMARAN | 771 |
| FREON TF | RHO-CHEM | 771 |
| LAPPING COMPOUND | CLOVER | 771 |
| LOCKTITE | LOCKTITE | 771 |
| OAKITE 33 | OAKITE | 771 |
| SIL-GEL | TELEDYNE | 771 |
| SOLVENT (STODDARD) | SHELL OIL | 771 |
| STARRETT LITE OIL | STARRETT | 771 |

# CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| 600 W CYLINDER OIL | MOBIL | 772 |
| AL-LUMITAP | AL-LU PRODUCTS | 772 |
| CHEM ARROW 7588 | CHEM ARROW CORP. | 772 |
| CUTTING OIL GAMMA (STEE) | MOBIL | 772 |
| D.T.E. OIL HEAVY | MOBIL | 772 |
| DTE 26 | MOBIL | 772 |
| DTE 24 | MOBIL | 772 |
| DYKEM STEEL BLUE | DYKEM CORP. | 772 |
| DYKEM LAYOUT RED | DYKEM CORP | 772 |
| DYKEM REMOVER #138 | DYKEM CORP | 772 |
| EDGE (TAPMATIC) | TAPMATIC CORP. | 772 |
| EXTREME PRESSURE LUBE #3 | CHICAGO MANUFACTURING | 772 |
| FOAM, HAGERITY SILVER | HANDY & HARMON | 772 |
| GAGE LUBRICANT | DELTRONIC | 772 |
| GAMMA OIL | MOBIL | 772 |
| GLYERIN | LADCO LABORATORIES | 772 |
| HANDY FLUX | HANDY & HARMON | 772 |
| KLEEN-B | INDUS. CHEM. SUP. | 772 |
| LOCTITE RETAINING COMPOUND | LOCTITE | 772 |
| LUBRICANT, ALL PURPOSE | STARRETT | 772 |
| MOBIL GEAR 630 | MOBIL | 772 |
| MOBIL FLUID 350 | MOBIL | 772 |
| MOBILUX EP2 | MOBIL | 772 |
| MOLEY-DEE TAPPING FLUID | ARTHURC-WITHDROW | 772 |
| NAVAL JELLY RUST DESOLVER | NAVAL JELLY CO. | 772 |
| OIL, MOVIL VACTRA #2 | HARDINGE BROTHERS | 772 |
| OMICRON | MOBIL | 772 |
| PEELE-COAT 25 | EVAN MFG. CO. | 772 |
| PENETRATING OIL | STA-LUBE | 772 |
| PLASTIC STEEL | DEVCON | 772 |
| QUENCHING OIL DASCO 1694 | D.A. STEWART | 772 |
| RUSTOLEUM | RUSTOLEUM CORP. | 772 |
| SILVI GEL | TELEDYNE GETZ | 772 |
| STODDARD SOLVANT TYPE 1 | GENERAL ELECT. | 772 |
| VACTRA OIL #2 | MOBIL | 772 |
| VELOCITE OIL #10 | MOBIL | 772 |

CHEMICAL INVENTORY LIST 9/90

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| AL-LUMITAP | AL-LU PRODUCTS | 774 |
| ALODINE 1201 | PARKER & AMCHEM | 774 |
| AMITRON | AMITRON PRODUCTS | 774 |
| BOELUBE | ORGLUBE CORP. | 774 |
| DYKEM REMOVER #138 | DYKEM CORP | 774 |
| DYKEM | DYKEM CORP. | 774 |
| EDGE | TAPMATIC CORP | 774 |
| LUBE, EXTREME PRESSURE | CHICAGO MFG & DIST. | 774 |
| MOLY DEE | WITHROW/VAN STRAATEN | 774 |
| PEELE COAT K-25 | BUD ASSOC. | 774 |
| SIL-GEL | TELEDYNE-GELZ | 774 |
| STARRETT M-1 | STARRETT | 774 |
| TAPPING FLUID TRIM HEAVY | MASTER CHEMICAL | 774 |
| ZIP MOLD LUBRICANT | ZIP AEROSOL | 774 |

CHEMICAL INVENTORY LIST 9/90

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| 1.1.1-TRICHLOROETHANE | RHO-CHEM | 775 |
| ACETONE | HOLCHEM | 775 |
| ALODINE 1201 | PARKER & AMCHEM | 775 |
| BROMCRESOL GREEN INDICATOR PH 3.8-5.4 | OAKITE | 775 |
| CAUSTIC SODA | OXY CHEM | 775 |
| CLEANER, GLASS | INDUSTRIAL CHEMICALS | 775 |
| CLEANING FORMULA APC | MARKING METHODS | 775 |
| ELECTROLYTE MSC 1 | MARKING METHODS | 775 |
| FERROUS AMMONIUM SULFATE GR | EM SCIENCE | 775 |
| HYDROCHLORIC ACID 1.0N - 6130-J | OAKITE | 775 |
| HYDROCHLORIC ACID | SPECTRUM | 775 |
| HYDROCHLORIC ACID 0.1N 6131-J | OAKITE | 775 |
| INK, 73% BLACK MARKING | MARKING INKS & DEVICES | 775 |
| METHYL RED SOLUTION 0.1% | OAKITE | 775 |
| NITRIC ACID | HOLCHEM | 775 |
| OAKITE, HD 126 | OAKITE | 775 |
| OIL, 245 MOBIL | TRI-ESS SCIENCES | 775 |
| PAD INK | SANFORD | 775 |
| PHENOLYPHTHALEIN REAGENT ACS | KODAK | 775 |
| POTASSIUM IODIDE | TRI-ESS SCIENCE INC. | 775 |
| POTTASSIUM PERMANGANATE 0-1 N SOLUTION | TRI-ESS SCIENCE INC. | 775 |
| SODIUM THIOUSULFATE | VWR SCIENTIFIC | 775 |
| SODIUM HYDROXIDE SOLUTION | VWR SCIENTIFIC | 775 |
| SODIUM DICHROMATE | | |
| SODIUM BICARBONATE | HOLCHEM | 775 |
| SOLUTION, PHENOHTHALEIN 1% ALCOHOL | TRI-ESS SCIENCES INC. | 775 |
| SPRAY STENCIL INK | MARSH STENCIL MACH. | 775 |
| STARCH SOLUBLE | MOBIL | 775 |

# CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| AL-LUMITAP | AL-LU PRODUCTS | 776 |
| CUTTING OIL, OMNICRON | MOBIL | 776 |
| CUTTING OIL GAMMA (STEE) | MOBIL | 776 |
| DYKEM | DYKEM CORP | 776 |
| KLEEN-B | INDUS. CHEM. SUP. | 776 |
| MICRO-FINISH | PETROCHEM CHAMPION | 776 |
| MOLYDEE TAPPING FLUID | ARTHUR WITHROW | 776 |
| SIL-GEL | TELEDYNE-GELZ | 776 |
| SOLVENT (STODDARD) | RHO-CHEM | 776 |

CHEMICAL INVENTORY LIST 9/90

| PRODUCT | MANUFACTURER | DEPT |
|---|---|---|
| AL-LUMITAP | AL-LO PRODUCTS | 778 |
| ALUMTAP | WINFIELD BROOKS | 778 |
| CENTER LUBE | CHICAGO MFG. | 778 |
| CLOVER COMPOUND | CLOVER MFG | 778 |
| CUTTING OIL, OMNICRON | MOBIL | 778 |
| CUTTING OIL 2190 | JUNELL OIL | 778 |
| DET 26 | MOBIL | 778 |
| DYKEM REMOVER #138 | DYKEM CORP | 778 |
| DYKEM | DYKEM CORP | 778 |
| ETHYL ALCOHOL | FISHER SCIENTIFIC | 778 |
| GAMMA OIL (STEEL) | MOBIL | 778 |
| GLASS CLEANER #237 | INDUS. CHEM | 778 |
| ISOPROPYL ALCOHOL | UNKNOWN | 778 |
| KLEEN-8 | INDUS.CHEM.SUP. | 778 |
| MOBIL VACTRA OIL #2 | MOBIL | 778 |
| MOBIL DTE 26 | MOBIL | 778 |
| MOBIL OMNICRON | MOBIL | 778 |
| MOBIL DTE 24 | MOBIL | 778 |
| MOBILGEAR 630 | MOBIL | 778 |
| MOBILITE #350 | MOBIL | 778 |
| MOBILUX EP2 | MOBIL | 778 |
| SILI GEL | TELEDYNE DENTAL | 778 |
| SOLVENT (STODDARD) | SHELL OIL | 778 |
| TAP FREE | WINFIELD BROOKS | 778 |

CHEMICAL INVENTORY 9/90

| PRODUCT | MANUFACTURER | DEPT |
|---|---|---|
| DYKEM | DKYEM CORP. | 780 |
| GLASS CLEANER | | |
| M.P.-12 (WATER SOL) | PENWALT | 780 |
| MOLYDEE TAPPING FLUID | ARTHUR WITHROW | 780 |
| SIL-GEL | TELEBYNE-GELZ | 780 |
| SOLVENT (STODDARD) | SHELL OIL | 780 |
| STARRETT LITE OIL | STARRETT | 780 |
| STARRETT CLEANER | STARRETT | 780 |
| TRIM TAP | | |
| VACTRA 2 | MOBIL | 780 |

# CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT |
|---|---|---|
| HONING OIL -150 | LUBRY INC. | 781 |
| LAPPING COMPOUND 38-900 | U.S. PROD. | 781 |
| LAPPING COMPOUND 38-500 | U.S. PROD. | 781 |
| LAPPING COMPOUND 38-400 | U.S. PROD. | 781 |
| MOBIL 600 W CYLINDER OIL | MOBIL | 781 |
| MOBIL VACTRA OIL NO. 2 | MOBIL | 781 |
| MOBIL VELOCITE OIL NO. 6 | MOBIL | 781 |
| MOBILARAMA-245 | MOBIL | 781 |
| MOBILUX EP 2 | MOBIL | 781 |
| PELLACR OIL "A" | SHELL | 781 |
| SOLVENT (STODDARD) | SHELL OIL | 781 |
| SUNNEN OIL | SUNNEN | 781 |

CHEMICAL INVENTORY 7/90

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| (THIXOGENOUS) GREASE (% | CLOVER | 782 |
| ACETYLENE | VALLEY GEN. WELD | 782 |
| ADHESIVE EEPXY 1838 B/A | SCOTCH WELD | 782 |
| AEI R1-49100 | ANTHONY MARKETING | 782 |
| ALUMINTECH #2 | TURCO | 782 |
| ANTI-SEIZE COMPOUND | PERMATEX | 782 |
| ARGON | VALLEY GEN. WELD | 782 |
| TOOL TOOL | UNKNOWN | 782 |
| DUZALL FLUX-SOFT SOLDER | ALLSTATE WELD PROD. | 782 |
| DYKEM | DYKEM | 782 |
| ETHEYELENE(GLYCOL ETHANE) | UNKNOWN | 782 |
| FLUX (SOLDER) LIQ. | KESTER | 782 |
| FREON | UNKNOWN | 782 |
| HANDY FLUX | UNKNOWN | 782 |
| ISOPROPYL ALCOHOL | UNKNOWN | 782 |
| M I LUBE | MONROE TECH. | 782 |
| NITRIC ACID | UNKNOWN | 782 |
| OXYGEN | VALLEY GEN. WELD | 782 |
| SILVER PURE | UNKNOWN | 782 |
| SMUT GO #1 | TURCO | 782 |
| STOP OFF | MICROBRAZ | 782 |

CHEMICAL INVENTORY FOR

| PRODUCT | MANUFACTURER | DEPT |
|---|---|---|
| EXPO CLEANER | SANFORD | [illegible] |
| BLUE STICK | FABER CASTELL | [illegible] |
| HI-LITER | DENNISON MFG. | [illegible] |
| LIQUID PAPER | GILLETTE | [illegible] |
| STAMP PAD INKER | SANFORD | [illegible] |

CHEMICAL INVENTORY - 1990

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| AMMONIA | CALCOMP | 858 |
| ANTI-STATIC SPRAY | EVANS | 858 |
| CLEANING SOLVENT | CALCOMP | 858 |
| RP55 REPLENISHER | CALCOMP | 858 |
| TONER CLEAR MIX TN55 | CALCOMP | 858 |

CHEMICAL INVENTORY 9/90

| PRODUCT | MANUFACTURER | DEPT |
|---|---|---|
| CLEANSER (HAND) | CALGON | 911 |
| DEVELOPER XD-36 | NASHUA | 911 |
| DEVELOPER 1075 | XEROX | 911 |
| DEVELOPER 1075/1090 | XEROX | 911 |
| DRY INK 6R112 | XEROX | 911 |
| DRY INK 6R301 | XEROX | 911 |
| LIQUID PAPER | GILLETTE | 911 |
| LIQUID PAPER THINNER | GILLETTE | 911 |
| LUBRICANT FUSE 6R983 | XEROX | 911 |
| POWDERED HAND SOAP | U.S. BORAX | 911 |
| STAMP PAD INK | SUPERIOR MARKING | 911 |
| STAMP PAD INK | SANFORD | 911 |

CHEMICAL INVENTORY 9/90

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| BLANK INK | ALCO | 930 |
| CLEANER (GLASS) #237 | INDUS. CHEM SUP. | 930 |
| CLEANER #2105 | NAT. SANITARY SUP. | 930 |
| LIQUID PAPER THINNER | GILLETTE | 930 |
| LIQUID PAPER | GILLETTE | 930 |
| PROPANE | VANGAS | 930 |
| XEROX DRY IMAGER | XEROX | 930 |

# CHEMICAL INVENTORY LIST

| PRODUCT | MANUFACTURER | DEPT. |
|---|---|---|
| CLEANER, STARRETT | BARRY CHEMICALS | PRS |
| CLEANER, SPOTLESS GLASS (CS #217 | INDUSTRIAL CHEMICALS | PRS |
| CLEANER, MC - ME-2144 | DIP-CHEM PRODUCTS | PRS |

NAME PERMIT #

# 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ FACOIMA ☑

2948.72
2925.22

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 6/c91 | | | | 155 | | |
| 6/09/91 | M03677 | | 1.6 | | | |
| 6/10/91 | M47059 | | 1.6 | | | |
| 6/10/91 | M58594 | | 1.5 | | | |
| 6/11/91 | M03677 | | 1.6 | | | |
| 6/11/91 | M 47059 | | 1.6 | | | |
| 6/11/91 | M 58594 | | 1.5 | | | |
| 6/12/91 | M03677 | | 1.6 | | | |
| 6/12/91 | M47059 | | 1.6 | | | |
| 6/12/91 | M 58594 | | 1.5 | | | |
| 6/13/91 | M03677 | | 1.6 | | | |
| 6/13/91 | M47059 | | 1.6 | | | |
| 6/13/91 | M58594 | | 1.5 | | | |
| 6/14/91 | M03677 | | 1.6 | | | |
| 6/14/91 | M47059 | | 1.6 | | | |
| 6/14/91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 6/14/91 | | | 23.5 | 155 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

2166-04749

Rev. 2/90

350117

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 2925.22 2904.72

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 6/3/91 | | | | 155 | | |
| 6/3/91 | M03677 | | 1.6 | | | |
| 6/3/91 | M47059 | | 1.6 | | | |
| 6/3/91 | M58594 | | 1.5 | | | |
| 6/4/91 | M03677 | | 1.6 | | | |
| 6/4/91 | M47059 | | 1.6 | | | |
| 6/4/91 | M58594 | | 1.5 | | | |
| 6/5/91 | M03677 | | 1.6 | | | |
| 6/5/91 | M47059 | | 1.6 | | | |
| 6/5/91 | M58594 | | 1.5 | | | |
| 6/6/91 | M03677 | | 1.6 | | | |
| 6/6/91 | M47059 | | 1.6 | | | |
| 6/6/91 | M58594 | | 1.5 | | | |
| 6/7/91 | M03677 | | 1.6 | | | |
| 6/7/91 | M47059 | | 1.6 | | | |
| 6/7/91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 6/7/91 | | | 23.5 | 155 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 2901.72 2582.92

NDT M03677
BURR LG M47059
BURR SM M58594
VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 52791 | | | | 155 | | |
| 52791 | M03677 | | Holiday | | | |
| 52791 | M47059 | | " | | | |
| 52791 | M58594 | | " | | | |
| 52891 | M03677 | | 1.6 | | | |
| 52891 | M47059 | | 1.6 | | | |
| 52891 | M58594 | | 1.5 | | | |
| 52991 | M03677 | | 1.6 | | | |
| 52991 | M47059 | | 1.6 | | | |
| 52991 | M58594 | | 1.5 | | | |
| 53091 | M03677 | | 1.6 | | | |
| 53091 | M47059 | | 1.6 | | | |
| 53091 | M58594 | | 1.5 | | | |
| 53191 | M03677 | | 1.6 | | | |
| 53191 | M47059 | | 1.6 | | | |
| 53191 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 5/31/91 | | | 18.8 | 155 | | |
| TOTALS | | | 18.8 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION ——— LES

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

2882.92
2859.42

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| ITE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 5/20/91 | | | | 155 | | |
| 5/20/91 | M03677 | | 1.6 | | | |
| 5/20/91 | M47059 | | 1.6 | | | |
| 5/20/91 | M58594 | | 1.5 | | | |
| 5/21/91 | M0377 | | 1.6 | | | |
| 5/21/91 | M47059 | | 1.6 | | | |
| 5/21/91 | M58594 | | 1.5 | | | |
| 5-22-91 | M03677 | | 1.6 | | | |
| 5-22-91 | M47059 | | 1.6 | | | |
| 5-22-91 | M55594 | | 1.6 | | | |
| 5-23-91 | M03677 | | 1.6 | | | |
| 52391 | M47059 | | 1.6 | | | |
| 52391 | M55594 | | 1.5 | | | |
| 5-24-91 | M03677 | | 1.6 | | | |
| 52491 | M47059 | | 1.6 | | | |
| 52491 | M55594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 5/24/91 | | | 23.5 | 155 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.55 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

2859.42
2835.92

NDT M03677
BURR LG M47059
BURR SM M58594
VALENCIA ☐ FACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 5.13.91 | | | | 155 | | |
| 5.13.91 | M03677 | | 1.6 | | | |
| 5.13.91 | M47059 | | 1.6 | | | |
| 5.13.91 | M58594 | | 1.5 | | | |
| 5.14.91 | M03677 | | 1.6 | | | |
| 5.14.91 | M47059 | | 1.6 | | | |
| 5.14.91 | M58594 | | 1.5 | | | |
| 5.15.91 | M03677 | | 1.6 | | | |
| 5.15.91 | M47059 | | 1.6 | | | |
| 5.15.91 | M58594 | | 1.5 | | | |
| 5.16.91 | M03677 | | 1.6 | | | |
| 5.16.91 | M47059 | | 1.6 | | | |
| 5.16.91 | M58594 | | 1.5 | | | |
| 5.17.91 | M03677 | | 1.6 | | | |
| 5.17.91 | M47059 | | 1.6 | | | |
| 5.17.91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 5/16/91 | | | 23.5 | 155 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 21.085 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☒

283592
2812.42

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 5·6·91 | | | | 155 | | |
| 5·6·91 | M03677 | | 1.6 | | | |
| 5·6·91 | M47059 | | 1.6 | | | |
| 5·6·91 | M58594 | | 1.5 | | | |
| 5·7·91 | M03677 | | 1.6 | | | |
| 5·7·91 | M47059 | | 1.6 | | | |
| 5·7·91 | M58594 | | 1.5 | | | |
| 5·8·91 | M03677 | | 1.6 | | | |
| 5·8·91 | M47059 | | 1.6 | | | |
| 5·8·91 | M58594 | | 1.5 | | | |
| 5·9·91 | M03677 | | 1.6 | | | |
| 5·9·91 | M47059 | | 1.6 | | | |
| 5·9·91 | M58594 | | 1.5 | | | |
| 5·10·91 | M03677 | | 1.6 | | | |
| 5·10·91 | M47059 | | 1.6 | | | |
| 5·10·91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 5/1-6 | | | 23.5 | 155 | | |
| TOTALS | | | 23.5 | - | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 23.5 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

2812.42
2758.42

NDT M03677 VALENCIA ☐ PACOIMA ☑
BURR LG M47059
BURR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4.29.91 | | | | 155 | | |
| 4.29.91 | M03677 | | 1.6 | | | |
| 4.29.91 | M47059 | | 1.6 | | | |
| 4.29.91 | M58594 | | 1.5 | | | |
| 4.30.91 | M03677 | | 1.6 | | | |
| 4.30.91 | M47059 | | 1.6 | | | |
| 4.30.91 | M58594 | | 1.5 | | | |
| 5.1.91 | M03677 | | 1.6 | | | |
| 5.1.91 | M47059 | | 1.6 | | | |
| 5.1.91 | M58594 | | 1.5 | | | |
| 5.2.91 | M03677 | | 1.6 | | | |
| 5.2.91 | M47059 | | 1.6 | | | |
| 5.2.91 | M58594 | | 1.5 | | | |
| 5.3.91 | M03677 | | 1.6 | | | |
| 5.3.91 | M47059 | | 1.6 | | | |
| 5.3.91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 155 | | |
| TOTALS | | | 23.5 | 4 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 26.85 LBS

Rev.2/90

NAME PERMIT #

# 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

2758.92
2765.42

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| ATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4-22-91 | | | | 155 | | |
| 4-22-91 | M03677 | | 1.6 | | | |
| 4-22-91 | M47059 | | 1.6 | | | |
| 4-22-91 | M58594 | | 1.5 | | | |
| 4-23-91 | M03677 | | 1.6 | | | |
| 4-23-91 | M47059 | | 1.6 | | | |
| 4-23-91 | M58594 | | 1.5 | | | |
| 4-24-91 | M03677 | | 1.6 | | | |
| 4-24-91 | M47059 | | 1.6 | | | |
| 4-24-91 | M58594 | | 1.5 | | | |
| 4-25-91 | M03677 | | 1.6 | | | |
| 4-25-91 | M47059 | | 1.6 | | | |
| 4-25-91 | M58594 | | 1.5 | | | |
| 4-26-91 | M03677 | | 1.6 | | | |
| 4-26-91 | M47059 | | 1.6 | | | |
| 4-26-91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 155 | | |
| TOTALS | | | | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 27654.2

NDT M03677
BURR LG M47059
BURR SM M58594
VALENCIA ☐ PACOIMA ☑ 2741.92

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4/15/91 | | | | 155 | | |
| 4/15/91 | M03677 | | 1.6 | | | |
| 4/15/91 | M47059 | | 1.6 | | | |
| 4/15/91 | M58594 | | 1.5 | | | |
| 4/16/91 | M03677 | | 1.6 | | | |
| 4/16/91 | M47059 | | 1.6 | | | |
| 4/16/91 | M58594 | | 1.5 | | | |
| 4/17/91 | M03677 | | 1.6 | | | |
| 4/17/91 | M47059 | | 1.6 | | | |
| 4/17/91 | M58594 | | 1.5 | | | |
| 4/18/91 | M03677 | | 1.6 | | | |
| 4/18/91 | M47059 | | 1.6 | | | |
| 4/18/91 | M58594 | | 1.5 | | | |
| 4/19/91 | M03677 | | 1.6 | | | |
| 4/19/91 | M47059 | | 1.6 | | | |
| 4/19/91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 4/19/91 | | | 23.5 | 155 | | |
| TOTALS | | | 23.5 | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION [illegible] LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

2741.92
2688.42

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ FACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4/8/91 | | | | 125 | | |
| 4/8/91 | M03677 | | 1.6 | | | |
| 4/8/91 | M47059 | | 1.6 | | | |
| 4/8/91 | M58594 | | 1.5 | | | |
| 4/9/91 | M03677 | | 1.6 | | | |
| 4/9/91 | M47059 | | 1.6 | | | |
| 4/9/91 | M58594 | | 1.5 | | | |
| 4/10/91 | M03677 | | 1.6 | | | |
| 4/10/91 | M47059 | | 1.6 | | | |
| 4/10/91 | M58594 | | 31.5 | 30 | | |
| 4/11/91 | M03677 | | 1.6 | | | |
| 4/11/91 | M47059 | | 1.6 | | | |
| 4/11/91 | M58594 | | 1.5 | | | |
| 4/12/91 | M03677 | | 1.6 | | | |
| 4/12/91 | M47059 | | 1.6 | | | |
| 4/12/91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 4/12/91 | | | 53.5 | 155 | | |
| TOTALS | | | 23.5 | 30 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.55 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 2688.42 2664.92

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4/1/91 | | | | 125 | | |
| 4/1/91 | M0377 | | 1.6 | | | |
| 4/1/91 | M47059 | | 1.6 | | | |
| 4/1/91 | M58594 | | 1.5 | | | |
| 4/2/91 | M0377 | | 1.6 | | | |
| 4/2/91 | M47059 | | 1.6 | | | |
| 4/3/91 | M58594 | | 1.5 | | | |
| 4/3/91 | M0377 | | 1.6 | | | |
| 4/3/91 | M47059 | | 1.6 | | | |
| 4/3/91 | M58594 | | 1.5 | | | |
| 4/4/91 | M0377 | | 1.6 | | | |
| 4/4/91 | M47059 | | 1.6 | | | |
| 4/4/91 | M58594 | | 1.5 | | | |
| 4/5/91 | M0377 | | 1.6 | | | |
| 4/5/91 | M47059 | | 1.6 | | | |
| 4/5/91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 4/5/91 | | | 23.5 | 125 | | Returned |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 20.55 LBS

Rev. 2/90

NAME PERMIT #

# 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

2664.92
2641.42

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ FACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 3-25-91 | | | | 12.5 | | |
| 3-25-91 | M03677 | | 1.6 | | | |
| 3-25-91 | M47059 | | 1.6 | | | |
| 3-25-91 | M58594 | | 1.5 | | | |
| 3-26-91 | M03677 | | 1.6 | | | |
| 3-26-91 | M47059 | | 1.6 | | | |
| 3-26-91 | M58594 | | 1.5 | | | |
| 3-27-91 | M03677 | | 1.6 | | | |
| 3-27-91 | M47059 | | 1.6 | | | |
| 3-27-91 | M58594 | | 1.5 | | | |
| 3-28-91 | M03677 | | 1.6 | | | |
| 3-28-91 | M47059 | | 1.6 | | | |
| 3-28-91 | M58594 | | 1.5 | | | |
| 3-29-91 | M03677 | | 1.6 | | | |
| 3-29-91 | M47059 | | 1.6 | | | |
| 3-29-91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 4/1/91 | | | 23.5 | 12.5 | | |
| TOTALS | | | 25.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 24 lbs LBS

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

2641.42 2617.92

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 3.18.91 | | | | 125 | | J. DeVita |
| 3.18.91 | M03677 | | 1.6 | | | J. DeVita |
| 3.18.91 | M47059 | | 1.6 | | | J. DeVita |
| 3.18.91 | M58594 | | 1.5 | | | J. DeVita |
| 3.19.91 | M03677 | | 1.6 | | | J. DeVita |
| 3.19.91 | M47059 | | 1.6 | | | J. DeVita |
| 3.19.91 | M58594 | | 1.5 | | | J. DeVita |
| 3.20.91 | M03677 | | 1.6 | | | J. DeVita |
| 3.20.91 | M47059 | | 1.6 | | | J. DeVita |
| 3.20.91 | M58594 | | 1.5 | | | J. DeVita |
| 3.21.91 | M0377 | | 1.6 | | | J. DeVita |
| 3.21.91 | M47059 | | 1.6 | | | J. DeVita |
| 3.21.91 | M58594 | | 1.5 | | | J. DeVita |
| 3.22.91 | M03677 | | 1.6 | | | J. DeVita |
| 3.22.91 | M47059 | | 1.6 | | | J. DeVita |
| 3.22.91 | M58594 | | 1.5 | | | J. DeVita |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 3/22/91 | | | 23.5 | 125 | | [illegible] |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev.2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 2617.92 2594.12

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 3-11-91 | | | | 125 | | |
| 3-11-91 | M03677 | | 1.6 | | | |
| 3-11-91 | M47059 | | 1.6 | | | |
| 3-11-91 | M58594 | | 1.5 | | | |
| 3-12-91 | M03677 | | 1.6 | | | |
| 3-12-91 | M47059 | | 1.6 | | | |
| 3-12-91 | M58594 | | 1.5 | | | |
| 3-13-91 | M03677 | | 1.6 | | | |
| 3-13-91 | M47059 | | 1.6 | | | |
| 3-13-91 | M58594 | | 1.5 | | | |
| 3-14-91 | M03677 | | 1.6 | | | |
| 3-14-91 | M47059 | | 1.6 | | | |
| 3-14-91 | M58594 | | 1.5 | | | |
| 3-15-91 | M03677 | | 1.6 | | | |
| 3-15-91 | M47059 | | 1.6 | | | |
| 3-15-91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 3/15/91 | | | 23.5 | 125 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

NAME PERMIT #

# 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

2594.12
2540.80

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 3·4·91 | | | | 95 | | |
| 3·4·91 | M03677 | | 1.6 | | | |
| 3·4·91 | M47059 | | 1.6 | | | |
| 3·4·91 | M58594 | | 1.5 | | | |
| 3·5·91 | M03677 | | 1.6 | | | |
| 3·5·91 | M47059 | | 1.6 | | | |
| 3·5·91 | M58594 | | 31.5 | 30 | | |
| 3·6·91 | M0377 | | 1.6 | | | |
| 3·6·91 | M47059 | | 1.6 | | | |
| 3·6·91 | M58594 | | 1.5 | | | |
| 3·7·91 | M03677 | | 1.6 | | | J.F. Cantrell |
| 3·7·91 | M47059 | | 1.6 | | | J.F. Cantrell |
| 3·7·91 | M58594 | | 1.5 | | | J.F. Cantrell |
| 3·8·91 | M03677 | | 1.6 | | | J.F. Cantrell |
| 3·8·91 | M47059 | | 1.6 | | | J.F. Cantrell |
| 3·8·91 | M58594 | | 1.5 | | | J.F. Cantrell |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 3/11/91 | | | 55.5 | 125 | | |
| TOTALS | | | 23.5 | 30 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 360.85 LBS

NAME PERMIT #

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

2540.80
2517.30

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 2·25·91 | | | | 95 | | |
| 2·25·91 | M03677 | | 1.6 | | | |
| 2·25·91 | M47059 | | 1.6 | | | |
| 2·25·91 | M58594 | | 1.5 | | | |
| 2·26·91 | M03677 | | 1.6 | | | |
| 2·26·91 | M47059 | | 1.6 | | | |
| 2·26·91 | M58594 | | 1.5 | | | |
| 2·27·91 | M03677 | | 1.6 | | | |
| 2·27·91 | M47059 | | 1.6 | | | |
| 2·27·91 | M58594 | | 1.5 | | | |
| 2·28·91 | M03677 | | 1.6 | | | |
| 2·28·91 | M47059 | | 1.6 | | | |
| 2·28·91 | M58594 | | 1.5 | | | |
| 3·1·91 | M03677 | | 1.6 | | | |
| 3·1·91 | M47059 | | 1.6 | | | |
| 3·1·91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 3/4/91 | | | 23.5 | 95 | | |
| TOTALS | | | 93.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

NAME PERMIT #

# 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑ 2493-80

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 2·18·91 | | | | 95 | | |
| 2/18/91 | M03677 | | 1.6 | | | |
| 2·18·91 | M47059 | | 1.6 | | | |
| 2·18·91 | M58594 | | 1.5 | | | |
| 2·19·91 | M03677 | | 1.6 | | | |
| 2·19·91 | M47059 | | 1.6 | | | |
| 2·19·91 | M58594 | | 1.5 | | | |
| 2·20·91 | M03677 | | 1.6 | | | |
| 2·20·91 | M47059 | | 1.6 | | | |
| 2·20·91 | M58594 | | 1.5 | | | |
| 2·21·91 | M03677 | | 1.6 | | | |
| 2·21·91 | M47059 | | 1.6 | | | |
| 2·21·91 | M58594 | | 1.5 | | | |
| 2·22·91 | M03677 | | 1.6 | | | |
| 2·22·91 | M47059 | | 1.6 | | | |
| 2·22·91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 1·22·5 | | | 23.5 | 95 | | |
| TOTALS | | | 23.5 | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 2.35 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☒

2493.80
2470.32

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 2·11·91 | | | | 95 | | |
| 2·11·91 | M03677 | | 1.6 | | | |
| 2·11·91 | M47059 | | 1.6 | | | |
| 2·11·91 | M58594 | | 1.5 | | | |
| 2·12·91 | M03677 | | 1.6 | | | |
| 2·12·91 | M47059 | | 1.6 | | | |
| 2·12·91 | M58594 | | 1.5 | | | |
| 2·13·91 | M03677 | | 1.6 | | | |
| 2·13·91 | M47059 | | 1.6 | | | |
| 2·13·91 | M58594 | | 1.5 | | | |
| 2·14·91 | M03677 | | 1.6 | | | |
| 2·14·91 | M47059 | | 1.6 | | | |
| 2·14·91 | M58594 | | 1.5 | | | |
| 2·15·91 | M03677 | | 1.6 | | | |
| 2·15·91 | M47059 | | 1.6 | | | |
| 2·15·91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2/15/91 | | | 23.5 | 95 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

NAME PERMIT #

# 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

2470.32
2420.02

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 2·4·91 | | | | 65 | | |
| 2·4·91 | M03677 | | 1.6 | | | |
| 2·4·91 | M47059 | | 1.6 | | | |
| 2·4·91 | M58594 | | 1.5 | | | |
| 2·5·91 | M03677 | | 1.6 | | | |
| 2·5·91 | M47059 | | 1.6 | | | |
| 2·5·91 | M58594 | | 31.5 | 30 | | |
| 2·6·91 | M0377 | | 1.6 | | | |
| 2·6·91 | M47059 | | 1.6 | | | |
| 2·6·91 | M58594 | | 1.5 | | | |
| 2·7·91 | M03677 | | 1.6 | | | |
| 2·7·91 | M47059 | | 1.6 | | | |
| 2·7·91 | M58594 | | 1.5 | | | |
| 2·8·91 | M03677 | | 1.6 | | | |
| 2·8·91 | M47059 | | 1.6 | | | |
| 2·8·91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2/8/91 | | | 53.5 | 95 | | |
| TOTALS | | | 53.5 | 30 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 30.75 LBS

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑ 24120.02 2396.52

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 1-28-91 | | | | 65 | | |
| 1-28-91 | M03677 | | 1.6 | | | |
| 1-28-91 | M47059 | | 1.6 | | | |
| 1-28-91 | M58594 | | 1.5 | | | |
| 1-29-91 | M03677 | | 1.6 | | | |
| 1-29-91 | M47059 | | 1.6 | | | |
| 1-29-91 | M58594 | | 1.5 | | | |
| 1-30-91 | M03677 | | 1.6 | | | |
| 1-30-91 | M47059 | | 1.6 | | | |
| 1-30-91 | M58594 | | 1.5 | | | |
| 1-31-91 | M03677 | | 1.6 | | | |
| 1-31-91 | M47059 | | 1.6 | | | |
| 1-31-91 | M58594 | | 1.5 | | | |
| 2-1-91 | M03677 | | 1.6 | | | |
| 2-1-91 | M47059 | | 1.6 | | | |
| 2-1-91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2/1/91 | | | 23.5 | 65 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

2396.52
2377.72
2373.02

NDT M03677 VALENCIA ☐ RACOIMA ☑
BURR LG M47059
BURR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 1.21.91 | | | | 6.5 | | |
| 1.21.91 | M03677 | | 1.6 | | | |
| 1.21.91 | M47059 | | 1.6 | | | |
| 1.21.91 | M58594 | | 1.5 | | | |
| 1.22.91 | M03677 | | 1.6 | | | |
| 1.22.91 | M47059 | | 1.6 | | | |
| 1.22.91 | M58594 | | 1.5 | | | |
| 1.23.91 | M03677 | | 1.6 | | | Tim Johnson |
| 1-23-91 | M47059 | | 1.6 | | | Tim Johnson |
| 1-23-91 | M58594 | | 1.5 | | | Tim Johnson |
| 1.24.91 | M03677 | | 1.6 | | | |
| 1.24.91 | M47059 | | 1.6 | | | |
| 1.24.90 | M58594 | | 1.5 | | | |
| 1.25.91 | M03677 | | 1.6 | | | |
| 1.25.91 | M47059 | | 1.6 | | | |
| 1.25.91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 1/25/91 | | | 23.5 | 6.5 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑ 2373-02 2349-52

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 1-14-91 | | | ~~65~~ 24 | 65 | | K. DeVita |
| 1-14-91 | M03677 | | 1.6 | | | K. DeVita |
| 1-14-91 | M47059 | | 1.6 | | | K. DeVita |
| 1-14-91 | M58594 | | 1.5 | | | K. DeVita |
| 1-15-91 | M03677 | | 1.6 | | | K. DeVita |
| 1-15-91 | M47059 | | 1.6 | | | K. DeVita |
| 1-15-91 | M58594 | | 1.5 | | | K. DeVita |
| 1-16-91 | M03677 | | 1.6 | | | K. DeVita |
| 1-16-91 | M47059 | | 1.6 | | | K. DeVita |
| 1-16-91 | M58594 | | 1.5 | | | K. DeVita |
| 1-17-91 | M03677 | | 1.6 | | | K. DeVita |
| 1-17-91 | M47059 | | 1.6 | | | K. DeVita |
| 1-17-91 | M58594 | | 1.5 | | | K. DeVita |
| 1-18-91 | M03677 | | 1.6 | | | K. DeVita |
| 1-18-91 | M47059 | | 1.6 | | | K. DeVita |
| 1-18-91 | M58594 | | 1.5 | | | K. DeVita |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 1/19/91 | | | 23.5 | 65 | | Luige |
| TOTALS | | | 23.5 | ~~0~~ | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

NAME PERMIT #

# 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

2349.52
2326.02

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 1/7/91 | | | | 65 | | |
| 1/7/91 | M03677 | | 1.6 | | | |
| 1/7/91 | M47059 | | 1.6 | | | |
| 1/7/91 | M58594 | | 1.5 | | | |
| 1/8/91 | M03677 | | 1.6 | | | |
| 1/8/91 | M47059 | | 1.6 | | | |
| 1/8/91 | M58594 | | 1.5 | | | |
| 1/9/91 | M03677 | | 1.6 | | | |
| 1/9/91 | M47059 | | 1.6 | | | |
| 1/9/91 | M58594 | | 1.5 | | | |
| 1/10/91 | M03677 | | 1.6 | | | |
| 1/10/91 | M47059 | | 1.6 | | | |
| 1/10/91 | M58594 | | 1.5 | | | |
| 1/11/91 | M03677 | | 1.6 | | | |
| 1/11/91 | M47059 | | 1.6 | | | |
| 1/11/91 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | 1/14/91 | | 23.5 | 65 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BURR LG M47059
R SM M58594

VALENCIA ☐ PACOIMA ☑ # 2298.37

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 1/2/91 | | | | 65 | | |
| 1/2/91 | M03677 | | 1.6 | | | |
| 1/2/91 | M47059 | | 1.6 | | | |
| 1/2/91 | M58594 | | 1.5 | | | |
| 1/3/91 | M03677 | | 1.6 | | | |
| 1/3/91 | M47059 | | 1.6 | | | |
| 1/3/91 | M58594 | | 1.5 | | | |
| 1/4/91 | M03677 | | 1.6 | | | |
| 1/4/91 | M47059 | | 1.6 | | | |
| 1/4/91 | M58594 | | 1.6 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 14.2 | 6.5 | | |
| TOTALS | | | 14.2 | X | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 157.62 LBS

Rev. 2/90

Crossman

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 2223.82 2295.37

NDT M03677 VALENCIA ☐ PACOIMA ☑
R LG M47059
RR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 12-17-90 | | | | 24 | | Tim Johnson |
| 12-17-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-17-90 | M47059 | | 52.6 | 41 | | Tim Johnson |
| 12-17-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-18-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-18-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-18-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-19-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-19-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-19-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-20-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-20-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-20-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-21-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-21-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-21-90 | M58594 | | 1.5 | | | Tim Johnson |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 74.3 | 65 | | |
| TOTALS | | | 73.3 | 41 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 76.15 LBS

Rev. 3/90

HR. TEXTRON, INC

NAME PERMIT #

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 2200.27 2223.82

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☒

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 12-10-90 | M03677 | | 1.6 | 24-GALL | | Tim Johnson |
| 12-10-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-10-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-11-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-11-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-11-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-12-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-12-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-12-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-13-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-13-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-13-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-14-90 | M03677 | | 1.6 | | | Tim Johnson |
| 12-14-90 | M47059 | | 1.6 | | | Tim Johnson |
| 12-14-90 | M58594 | | 1.5 | | | Tim Johnson |
| 12-15-90 | | | | | | |
| 12-15-90 | | | | | | |
| 12-15-90 | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION [illegible] LBS

Rev 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677
BU LG M47059
BU... SM M58594

VALENCIA ☐ PACOIMA ☒ 12-6-90 2147.61 2200.27

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 12-2-90 | M03677 | | 1.6 | | | T Johnson |
| 12-2-90 | M47059 | | 1.6 | | | T Johnson |
| 12-2-90 | M58594 | | 1.5 | | | T Johnson |
| 12-3-90 | M03677 | | 1.6 | | | T Johnson |
| 12-3-90 | M47059 | | 1.6 | | | T Johnson |
| 12-3-90 | M58594 | | 1.5 | | | T Johnson |
| 12-4-90 | M03677 | | 1.6 | | | T Johnson |
| 12-4-90 | M47059 | | 1.6 | | | T Johnson |
| 12-4-90 | M58594 | | 1.5 | | | T Johnson |
| 12-5-90 | M03677 | | 1.6 | | | T Johnson |
| 12-5-90 | M47059 | | 1.6 | | | T Johnson |
| 12-5-90 | M58594 | | 1.5 | | | T Johnson |
| 12-6-90 | M03677 | | 1.6 | | | T Johnson |
| 12-6-90 | M47059 | | 1.6 | | | T Johnson |
| 12-6-90 | M58594 | | 1.5 | 24 GALLONS | | T Johnson |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 5.5 | -24 | | |
| TOTALS | | | 5.5 | - | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 5.5 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 11-30-90 2147.61

NDT M03677 VALENCIA ☐ PACOIMA ☑ 1224.04
F[illegible] LG M47059
B[illegible] SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 11-26-90 | | | | 174.5 | | [illegible] |
| 11-26-90 | M03677 | | 1.6 | | | T. Johnson |
| 11-26-90 | M47059 | | 1.6 | | | T. Johnson |
| 11-26-90 | M58594 | | 1.5 | | | T. Johnson |
| 11-27-90 | M03677 | | 1.6 | | | T. Johnson |
| 11-27-90 | M[illegible] | | 1.6 | | | [illegible] |
| 11-27-90 | M[illegible] | | [illegible] | | | T. Johnson |
| 11-28-90 | M03677 | | 1.6 | | | T. Johnson |
| 11-28-90 | M47059 | | 1.6 | | | T. Johnson |
| 11-28-90 | M58594 | | 1.5 | | | T. Johnson |
| 11-29-90 | M03677 | | 1.6 | | | T. Johnson |
| 11-29-90 | M47059 | | 1.6 | | | T. Johnson |
| 11-29-90 | M58594 | | 1.5 | | | T. Johnson |
| 11-30-90 | M03677 | | 1.6 | | | T. Johnson |
| 11-30-90 | M47059 | | 1.6 | | | T. Johnson |
| 11-30-90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | [illegible] | [illegible] | | [illegible] |
| TOTALS | | | [illegible] | — | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION [illegible] LBS

Rev 2/89

HR. TEXTRON, INC

NAME PERMIT #

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1724.04
2110.45

NDT M03677
B[illegible] LG M47059
E[illegible] SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 11·19·90 | | | | 174.5 | | J. DeVita |
| 11·19·90 | M03677 | | 1.6 | | | J. DeVita |
| 11·19·90 | M47059 | | 1.6 | | | J. DeVita |
| 11·19·90 | M58594 | | 1.5 | | | J. DeVita |
| 11·20·90 | M03677 | | 1.6 | | | J. DeVita |
| 11·20·90 | M47059 | | 1.6 | | | J. DeVita |
| 11·20·90 | M58594 | | 1.5 | | | J. DeVita |
| 11·21·90 | M03677 | | 1.6 | | | J. DeVita |
| 11·21·90 | M47059 | | 1.6 | | | J. DeVita |
| 11·21·90 | M58594 | | 1.5 | | | J. DeVita |
| 11·22·90 | HOLIDAY | | | | | |
| 11·22·90 | | | | | | |
| 11·22·90 | | | | | | |
| 11·23·90 | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 14.2 | 174.5 | | T. Swiger |
| TOTALS | | | 14.2 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 157.62 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT #

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

210.45
2086.99

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 11.12.90 | | | | 174.5 | | J. DeVita |
| 11.12.90 | M03677 | | 1.6 | | | J. DeVita |
| 11.12.90 | M47059 | | 1.6 | | | J. DeVita |
| 11.12.90 | M58594 | | 1.5 | | | J. DeVita |
| 11.13.90 | M03677 | | 1.6 | | | J. DeVita |
| 11.13.90 | M47059 | | 1.6 | | | J. DeVita |
| 11.13.90 | M58594 | | 1.5 | | | J. DeVita |
| 11.14.90 | M03677 | | 1.6 | | | T. Johnson |
| 11-14-90 | M47059 | | 1.6 | | | T. Johnson |
| 11-14-90 | M58594 | | 1.5 | | | T. Johnson |
| 11-15-90 | M03677 | | 1.6 | | | T. Johnson |
| 11-15-90 | M47059 | | 1.6 | | | T. Johnson |
| 11-15-90 | M58594 | | 1.5 | | | T. Johnson |
| 11.16.90 | M03677 | | 1.6 | | | J. DeVita |
| 11.16.90 | M47059 | | 1.6 | | | J. DeVita |
| 11.16.90 | M58594 | | 1.5 | | | J. DeVita |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 174.5 | | [illegible] |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT #

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

2086.99
2063-52

NDT M03677
BURR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 11.5.90 | | | | 174.5 | | |
| 11.5.90 | M03677 | | 1.6 | | | |
| 11.5.90 | M47059 | | 1.6 | | | |
| 11.5.90 | M58594 | | 1.5 | | | |
| 11.6.90 | M03677 | | 1.6 | | | |
| 11.6.90 | M47059 | | 1.6 | | | |
| 11.6.90 | M58594 | | 1.5 | | | |
| 11.7.90 | M03677 | | 1.6 | | | |
| 11.7.90 | M47059 | | 1.6 | | | |
| 11.7.90 | M58594 | | 1.5 | | | |
| 11.8.90 | M03677 | | 1.6 | | | |
| 11.8.90 | M47059 | | 1.6 | | | |
| 11.8.90 | M58594 | | 1.5 | | | |
| 11.9.90 | M03677 | | 1.6 | | | |
| 11.9.90 | M47059 | | 1.6 | | | |
| 11.9.90 | M58594 | | 1.5 | | | |
| | | | 23.5 | 174.5 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/93

HR. TEXTRON, INC

NAME PERMIT#

NDT M03677
BURR LG M47059
?R SM M58594

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

2063.52
2040.04

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 10/2/90 | | | | 174.5 | | J. DeVita |
| 10/2/90 | M03677 | | 1.6 | | | J. DeVita |
| 10/2/90 | M47059 | | 1.6 | | | J. DeVita |
| 10/2/90 | M58594 | | 1.5 | | | J. DeVita |
| 10/30/90 | M03677 | | 1.6 | | | J. DeVita |
| 10/30/90 | M47059 | | 1.6 | | | J. DeVita |
| 10/30/90 | M58594 | | 1.5 | | | J. DeVita |
| 10/31/90 | M03677 | | 1.6 | | | J. DeVita |
| 10-31-90 | M47059 | | 1.6 | | | J. DeVita |
| 10-31-90 | M58594 | | 1.5 | | | J. DeVita |
| 11-1-90 | M03677 | | 1.6 | | | J. DeVita |
| 11-1-90 | M47059 | | 1.6 | | | J. DeVita |
| 11-1-90 | M58594 | | 1.5 | | | J. DeVita |
| 11-2-90 | M03677 | | 1.6 | | | J. DeVita |
| 11-2-90 | M47059 | | 1.6 | | | J. DeVita |
| 11-2-90 | M58594 | | 1.5 | | | J. DeVita |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 174.5 | | T. Hagen |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

2040.04
2016.63

NDT M03677
R LG M47059
R SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 10-2290 | | | | 174.5 | | |
| 102290 | M03677 | | 1.6 | | | |
| 102290 | M47059 | | 1.6 | | | |
| 102290 | M58594 | | 1.5 | | | |
| 102390 | M03677 | | 1.6 | | | |
| 102390 | M47059 | | 1.6 | | | |
| 102390 | M58594 | | 1.5 | | | |
| 102490 | M03677 | | 1.6 | | | |
| 102490 | M47059 | | 1.6 | | | |
| 102490 | M58594 | | 1.5 | | | |
| 102590 | M03677 | | 1.6 | | | |
| 102590 | M47059 | | 1.6 | | | |
| 102590 | M58594 | | 1.5 | | | |
| 102690 | M03677 | | 1.6 | | | |
| 102690 | M47059 | | 1.6 | | | |
| 102690 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 174.5 | | |
| TOTALS | | | 23.5 | 0 | | |

MMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677 VALENCIA ☐ PACOIMA ☑ 2016.63
[illegible] LG M47059
[illegible] SM M58594
NOTE: 1 Gallon = 11.1 Pounds; V 1993.16%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 10-15-90 | | | | 174.5 | | |
| 10-15-90 | MC3677 | | 1.6 | | | DeVita |
| 10-15-90 | M47059 | | 1.6 | | | DeVita |
| 10-15-90 | M58594 | | 1.5 | | | DeVita |
| 10-16-90 | MC3677 | | 1.6 | | | DeVita |
| 10-16-90 | M47059 | | 1.6 | | | DeVita |
| 10-16-90 | M58594 | | 1.5 | | | DeVita |
| 10-17-90 | MC3677 | | 1.6 | | | DeVita |
| 10-17-90 | M47059 | | 1.6 | | | DeVita |
| 10-17-90 | M58594 | | 1.5 | | | DeVita |
| 10-18-90 | MC3677 | | 1.6 | | | DeVita |
| 10-18-90 | M47059 | | 1.6 | | | DeVita |
| 10-18-90 | M58594 | | 1.5 | | | DeVita |
| 10-19-90 | MC3677 | | 1.6 | | | Glover |
| 10-19-90 | M47059 | | 1.6 | | | Glover |
| 10-19-90 | M58594 | | 1.5 | | | Glover |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 174.5 | | Jauregui |
| TOTALS | | | 23.5 | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 160.85 LBS

HR. TEXTRON, INC

NAME PERMIT #

NDT M03677
BURR LG M47059
E SM M58594

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

1993.16
1939.29

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 10/8/90 | | | | 144.5 | | L. DeVito |
| 10/8/90 | M03677 | | 1.6 | | | L. DeVito |
| 10/8/90 | M47059 | | 1.6 | | | L. DeVito |
| 10/8/90 | M58594 | | 1.5 | | | L. DeVito |
| 10/9/90 | M03677 | | 1.6 | | | L. DeVito |
| 10/9/90 | M47059 | | 1.6 | | | L. DeVito |
| 10/9/90 | M 58594 | | 1.5 | | | L. DeVito |
| 10/10/90 | M03677 | | 1.6 | | | A. Flores |
| 10/10/90 | M47059 | | 1.6 | | | A. Flores |
| 10/10/90 | M58594 | | 1.5 | | | A. Flores |
| 10/11/90 | M03677 | | 1.6 | | | L. DeVito |
| 10/11/90 | M47059 | | 1.6 | | | L. DeVito |
| 10/11/90 | M 58594 | | 1.5 | | | L. DeVito |
| 10/12/90 | M03677 | | 1.6 | | | L. DeVito |
| 10/12/90 | M47059 | | 1.6 | | | L. DeVito |
| 10/12/90 | M03677 | | 31.5 | 30 | | L. DeVito |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 53.5 | 174.5 | | |
| TOTALS | | | 23.5 | 30 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1937.29
1853.66

NDT M03677
BURR LG M47059
F SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 10/1/90 | | | | 79.5 | | K. DeVita |
| 10/1/90 | M03677 | | 1.6 | | | K. DeVita |
| 10/1/90 | M47059 | | 66.6 | 65.0 | | K. DeVita |
| 10/1/90 | M58594 | | 1.5 | | | K. DeVita |
| 10/2/90 | M03677 | | 1.6 | | | K. DeVita |
| 10/3/90 | M47059 | | 1.5 | | | K. DeVita |
| 10/3/90 | M58594 | | 1.6 | | | K. DeVita |
| 10/3/90 | M47059 | | 1.5 | | | K. DeVita |
| 10/4/90 | M03677 | | 1.6 | | | K. DeVita |
| 10/4/90 | M47059 | | 1.6 | | | K. DeVita |
| 10/4/90 | M58594 | | 1.5 | | | K. DeVita |
| 10/5/90 | M03677 | | 1.6 | | | K. DeVita |
| 10/5/90 | M47059 | | 1.6 | | | K. DeVita |
| 10/5/90 | M58594 | | 1.5 | | | K. DeVita |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 85.3 | 65.0 | | |
| TOTALS | | | 20.3 | 1853 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 225.33 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1853.66
1788.10

NDT M03677 VALENCIA ☐ PACOIMA ☑
BURR LG M47059
P SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 9.24.90 | | | | 56.5 | | J. DeVita |
| 9.24.90 | M03677 | | 1.6 | | | J. DeVita |
| 9.24.90 | M47059 | | 1.6 | | | J. DeVita |
| 9.24.90 | M58594 | | 1.5 | | | J. DeVita |
| 9.25.90 | M03677 | | 24.6 | 23.0 | | J. DeVita |
| 9.25.90 | M47059 | | 1.6 | | | J. DeVita |
| 9.25.90 | 58594 | | 1.5 | | | J. DeVita |
| 9.26.90 | M03677 | | 1.6 | | | J. DeVita |
| 9.26.90 | M47059 | | 1.6 | | | J. DeVita |
| 9.26.90 | M58594 | | 1.5 | | | J. DeVita |
| 9 7.90 | M03677 | | 1.6 | | | J. DeVita |
| 9.27.90 | M47059 | | 1.6 | | | J. DeVita |
| 9.27.90 | M58594 | | 1.5 | | | J. DeVita |
| 9.28.90 | M03677 | | 1.6 | | | J. DeVita |
| 9.28.90 | M47059 | | | | | |
| 9.28.90 | M58594 | | 1.5 | | | J. DeVita |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION _____ LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT #

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1788.80
1784.10

NDT M03677
BURR LG M47059
B' SM M58594

VALENCIA ☐ FACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 9.17.90 | | | | 56.5 | | |
| 9.17.90 | M03677 | | 1.6 | | | |
| 9.17.90 | M47059 | | 1.6 | | | |
| 9.17.90 | M58594 | | 1.5 | | | |
| 9.18.90 | M03677 | | 1.6 | | | |
| 9.18.90 | M47059 | | 1.6 | | | |
| 9.18.90 | M58594 | | 1.5 | | | |
| 9.19.90 | M03677 | | 1.6 | | | |
| 9.19.90 | M47059 | | 1.6 | | | |
| 9.19.90 | M58594 | | 1.5 | | | |
| 9. .90 | M03677 | | 1.6 | | | |
| 9.20.90 | M47059 | | 1.6 | | | |
| 9.20.90 | M58594 | | 1.5 | | | |
| 9.21.90 | M03677 | | 1.6 | | | |
| 9.21.90 | M47059 | | 1.6 | | | |
| 9.21.90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION [illegible] LBS

HR. TEXTRON, INC

NAME PERMIT #

NDT M03677
BURR LG M47059
BURR SM M58594

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

1784.10
1760.46

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| TE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 9.10.90 | | | | 56.5 | | K. DeVita |
| 9.10.90 | M03677 | | 1.6 | | | K. DeVita |
| 9.10.90 | M47059 | | 1.6 | | | K. DeVita |
| 9.10.90 | M58594 | | 1.5 | | | K. DeVita |
| 9.11.90 | M03677 | | 1.6 | | | K. DeVita |
| 9.11.90 | M47059 | | 1.6 | | | K. DeVita |
| 9.11.90 | M58594 | | 1.5 | | | K. DeVita |
| 9.12.90 | M03677 | | 1.6 | | | K. DeVita |
| 9.12.90 | M47059 | | 1.6 | | | K. DeVita |
| 9.12.90 | M58594 | | 1.5 | | | K. DeVita |
| 9.13.90 | M03677 | | 1.6 | | | K. DeVita |
| 9.13.90 | M47059 | | 1.6 | | | K. DeVita |
| 9.13.90 | M58594 | | 1.5 | | | K. DeVita |
| 9.14.90 | M03677 | | 1.6 | | | K. DeVita |
| 9.14.90 | M47059 | | 1.6 | | | K. DeVita |
| 9.14.90 | M58594 | | 1.5 | | | K. DeVita |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 56.5 | | Engr. |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 26.85 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1760.40
1743.15

NDT M03677
BIRR LG M47059
SM M58594
VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 9.4.90 | | | | 56.5 | | L. DeVito |
| 9.4.90 | M03677 | | 1.6 | | | L. DeVito |
| 9.4.90 | M47059 | | 1.6 | | | L. DeVito |
| 9.4.90 | M58594 | | 1.5 | | | L. DeVito |
| 9/5/90 | M03677 | | 1.6 | | | H. Zamora |
| 9/5/90 | M47059 | | 1.6 | | | H. Zamora |
| 9.6.90 | M03677 | | 1.6 | | | L. DeVito |
| 9.6.90 | M47059 | | 1.6 | | | L. DeVito |
| 9.6.90 | M58594 | | 1.5 | | | L. DeVito |
| 9.7.90 | M03677 | | 1.6 | | | L. DeVito |
| 9. 90 | M47059 | | 1.6 | | | L. DeVito |
| 9.7.90 | M58594 | | 1.5 | | | L. DeVito |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 17.3 | 56.5 | | I. Luna |
| TOTALS | | | 17.3 | ∅ | | |

COMMENTS/REMARKS:

9/3/90 Holiday

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 192.03 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT #

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1743.15
1720.20

NDT M03677
BURR LG M47059
P[illegible] SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 8-27-90 | | | | 56.5 | | |
| 8-27-90 | M03677 | | 1.6 | | | |
| 8-27-90 | M47059 | | 1.6 | | | |
| 8-27-90 | M58594 | | 1.5 | | | |
| 8-28-90 | M03677 | | 1.6 | | | |
| 8-28-90 | M47059 | | 1.6 | | | |
| 8-28-90 | M58594 | | 1.5 | | | |
| 8-29-90 | M03677 | | 1.6 | | | |
| 8-29-90 | M47059 | | 1.6 | | | |
| 8-29-90 | M58594 | | 1.5 | | | |
| 8-30-90 | M03677 | | 1.6 | | | |
| 8-30-90 | M47059 | | 1.6 | | | |
| 8-30-90 | M58594 | | 1.5 | | | |
| 8-31-90 | M03677 | | 1.6 | | | |
| 8-31-90 | M47059 | | 1.6 | | | |
| 8-31-90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | [illegible] | [illegible] | | |
| TOTALS | | | [illegible] | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION [illegible] LBS

Rev. 2/93

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 172020

NDT M03677 VALENCIA ☐ PACOIMA ☑ 1667.10
T LG M47059
BuaR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 8.20.90 | | | | 27.0 | | |
| 8.20.90 | M03677 | | 1.6 | | | |
| 8.20.90 | M47059 | | 1.6 | | | |
| 8.20.90 | M58594 | | 1.5 | | | |
| 8.21.90 | M03677 | | 1.6 | | | |
| 8.21.90 | M47059 | | 1.6 | | | |
| 8/21/90 | M58594 | | 31 | 29.5 | | |
| 8/22/90 | M03677 | | 1.6 | | | |
| 8/22/90 | M47059 | | 1.6 | | | |
| 8/22/90 | M58594 | | 1.5 | | | |
| 8/23/90 | M03677 | | 1.6 | | | |
| 8/23/90 | M47059 | | 1.6 | | | |
| 8/23/90 | M58594 | | 1.5 | | | |
| 8/24/90 | M03677 | | 1.6 | | | |
| 8.24.90 | M47059 | | 1.6 | | | |
| 8/24/90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 53.0 | 56.5 | | |
| TOTALS | | | 23.5 | 29.5 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 1667.10 1643-53

NDT M03677
R LG M47059
RR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 8-13-90 | | | | 27.0 | | |
| 8-13-90 | M03677 | | 1.6 | | | |
| 8-13-90 | M47059 | | 1.6 | | | |
| 8-13-90 | M58594 | | 1.5 | | | |
| 8-14-90 | M03677 | | 1.6 | | | |
| 8-14-90 | M47059 | | 1.6 | | | |
| 8-14-90 | M58594 | | 1.5 | | | |
| 8-15-90 | M03677 | | 1.6 | | | |
| 8-15-90 | M47059 | | 1.6 | | | |
| 8-15-90 | M58594 | | 1.5 | | | |
| 8-16-90 | M03677 | | 1.6 | | | |
| 8-16-90 | M47059 | | 1.6 | | | |
| 8-16-90 | M58594 | | 1.5 | | | |
| 8-17-90 | M03677 | | 1.6 | | | |
| 8-17-90 | M47059 | | 1.6 | | | |
| 8-17-90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.6 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT #

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1643.53
1620.25

NDT M03677
RR LG M47059
RR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 8.6.90 | | | | 27.0 | | |
| 8.6.90 | M03677 | | 1.6 | | | |
| 8-6-90 | M 47059 | | 1.6 | | | |
| 8-6-90 | M58594 | | 1.5 | | | |
| 8.7.90 | M03677 | | 1.6 | | | |
| 8-7-90 | M47058 | | 1.6 | | | |
| 8.7.90 | M58594 | | 1.5 | | | |
| 8-8-90 | M03677 | | 1.6 | | | |
| 8-8-90 | M47059 | | 1.6 | | | |
| 8-8-90 | M58594 | | 1.5 | | | |
| 8-9-90 | M03677 | | 1.6 | | | |
| 8-9-90 | M47059 | | 1.6 | | | |
| 8-9-90 | M58594 | | 1.5 | | | |
| 8-10-90 | 03677 | | 1.6 | | | |
| 8-10-90 | M47059 | | 1.6 | | | |
| 8-10-90 | M58594 | | 1.5 | | | |
| | | | 23.5 | 27.0 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev.2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 1620.25 1596.73

NDT M03677 VALENCIA ☐ PACOIMA ☑
R LG M47059
RR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 73090 | | | | 183.82 | | |
| 73090 | M03677 | | 1.6 | | | |
| 73090 | M47059 | | 1.6 | | | |
| 73090 | M58594 | | 1.5 | | | |
| 73190 | M03677 | | 1.6 | | | |
| 73190 | M47059 | | 1.6 | | | |
| 73190 | M55594 | | 1.5 | | | |
| 8/1/90 | M03677 | | 1.6 | | | |
| 8.1.90 | M47059 | | 1.6 | | | |
| 8.1.90 | M58594 | | 1.5 | | | |
| 8.2.90 | M03677 | | 1.6 | | | |
| 8.2.90 | M47059 | | 1.6 | | | |
| 8.2.90 | M58594 | | 1.5 | | | |
| 8.3.90 | M03677 | | 1.6 | | | |
| 8.3.90 | M47059 | | 1.6 | | | |
| 8.3.90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION ____ LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 1596.73

NDT M03677 VALENCIA ☐ PACOIMA ☑ 15288
RR LG M47059
URR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 7-23-90 | | | | 18382 | | |
| 7-23-90 | M03677 | | 1.6 | | | |
| 7-23-90 | M47059 | | 1.6 | | | |
| 7-23-90 | M58594 | | 1.5 | | | |
| 7-24-90 | M03677 | | 1.6 | | | |
| 7-24-90 | M47059 | | 1.6 | | | |
| 7-24-90 | M58594 | | 1.5 | | | |
| 7-25-90 | M03677 | | 1.6 | | | |
| 7-25-90 | M47059 | | 1.6 | | | |
| 7-25-90 | M58594 | | 1.5 | | | |
| 7-26-90 | M03677 | | 1.6 | | | |
| 7-26-90 | M47059 | | 1.6 | | | |
| 7-26-90 | M58594 | | 1.5 | | | |
| 7-27-90 | M03677 | | 1.6 | | | |
| 7-27-90 | M47059 | | 1.6 | | | |
| 7-27-90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 21.3 LBS

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1572.85
1554.05

M03677 VALENCIA ☐ PACOIMA ☑
BURR LG M47059
BURR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 7-16-90 | | | | 183.52 | | |
| 7-16-90 | M03677 | | 1.6 | | | |
| 7-16-90 | M47059 | | 1.6 | | | |
| 7-16-90 | M58594 | | 1.5 | | | |
| 7-17-90 | M03677 | | 1.6 | | | |
| 7-17-90 | M47059 | | 1.6 | | | |
| 7-17-90 | M58594 | | 1.5 | | | |
| 7-18-90 | M03677 | | 1.6 | | | |
| 7-18-90 | M47059 | | 1.6 | | | |
| 7-18-90 | M58594 | | 1.5 | | | |
| 7-19-90 | M03677 | | 1.6 | | | |
| 7-19-90 | M47059 | | 1.6 | | | |
| 7-19-90 | M58594 | | 1.5 | | | |
| 7-20-90 | M03677 | | 1.6 | | | |
| 7-20-90 | M47059 | | 1.6 | | | |
| 7-20-90 | M58594 | | 1.5 | | | |
| | | | 23.5 | 183.92 | | |
| TOTALS | | | 23.5 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.43 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1554.05
1527.31

NDT M03677
RR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 7·9·90 | | | | 183.82 | | |
| 7·9·90 | M03677 | | 1.6 | | | |
| 7·9·90 | M47059 | | 1.6 | | | |
| 7·9·90 | M58594 | | 1.5 | | | |
| 7·10·90 | M03677 | | 1.6 | | | |
| 7·10·90 | M47059 | | 1.6 | | | |
| 7·10·90 | M58594 | | 1.5 | | | |
| 7·11·90 | M03677 | | 1.6 | | | |
| 7·11·90 | M47059 | | 1.6 | | | |
| 7·11·90 | M58594 | | 1.5 | | | |
| 7·12·90 | M03677 | | 1.6 | | | |
| 7·12·90 | M47059 | | 1.6 | | | |
| 7·12·90 | M58594 | | 1.5 | | | |
| 7/13/90 | M03677 | | 1.6 | | | |
| 7/13/90 | M47059 | | 1.6 | | | |
| | | | 22.0 | 183.82 | | |
| TOTALS | | | 22.0 | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 344.2 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1527.31
1511.59

NDT M03677
RR LG M47059
DURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 7.2.90 | | | | 183.82 | | |
| 7.2.90 | M03677 | | 1.6 | | | |
| 7.3.90 | M03677 | | 1.6 | | | |
| 7.3.90 | M47059 | | 1.6 | | | |
| 7.3.90 | M58594 | | 1.5 | | | |
| 7.4.90 | | | Holiday | | | |
| 7.5.90 | M03677 | | 1.6 | | | |
| 7.5.90 | M47059 | | 1.6 | | | |
| 7.5.90 | M58594 | | 1.5 | | | |
| 7.6.90 | M03677 | | 1.6 | | | |
| 7.6.90 | M47059 | | 1.6 | | | |
| 7.6.90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 15.7 | 15.5 | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION .14 LBS

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 1511 59

NDT M03677 VALENCIA ☐ PACOIMA ☑ 1465.37

R LG M47059

RR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 62590 | | | | 156.57 | | |
| 62590 | M03677 | | 1.6 | | | |
| 62590 | M47059 | | 1.6 | | | |
| 62590 | M55594 | | 1.5 | | | |
| 62690 | M47059 | | 1.6 | | | |
| 62690 | M55594 | | 1.5 | | | |
| 62690 | M03677 | | 1.6 | | | |
| 62790 | M47059 | | 1.6 | | | |
| 62790 | M55594 | | 1.5 | | | |
| 62790 | M03677 | | 25.6 | 27 | | |
| 62890 | M03677 | | 1.6 | | | |
| 62890 | M47059 | | 1.6 | | | |
| 629 | M03677 | | 1.6 | | | |
| 629 | 58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT #

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

146537
1441.88

NDT M03677
RR LG M47059
BURR SM M58594

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 6.18.90 | | | | 156.82 | | J. DeVita |
| 6.18.90 | M03677 | | 1.6 | | | J. DeVita |
| 6.18.90 | M47059 | | 1.6 | | | J. DeVita |
| 6.18.90 | M58594 | | 1.5 | | | J. DeVita |
| 6.19.90 | M03677 | | 1.6 | | | J. DeVita |
| 6.19.90 | M47059 | | 1.6 | | | J. DeVita |
| 6.19.90 | M58594 | | 1.5 | | | J. DeVita |
| 62090 | M03677 | | 1.6 | | | J. DeVita |
| 62090 | M47059 | | 1.6 | | | J. DeVita |
| 62090 | M58594 | | 1.5 | | | J. DeVita |
| 62190 | M03677 | | 1.6 | | | J. DeVita |
| 62190 | M47059 | | 1.6 | | | J. DeVita |
| 62190 | M58594 | | 1.5 | | | J. DeVita |
| 6.22.90 | M03677 | | 1.6 | | | [illegible] |
| 6.22.90 | 47059 | | 1.6 | | | [illegible] |
| 6.22.90 | M58594 | | 1.5 | | | [illegible] |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | 23.5 | | | [illegible] |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev.2/90

HR. TEXTRON, INC

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| RR LG | M47059 |
| BURR SM | M58594 |

1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

144.58
1418.39

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 6/11/90 | | | | 156.82 | | [illegible] |
| 6/11/90 | M03677 | | 1.6 | | | [illegible] |
| 6/11/90 | M47059 | | 1.6 | | | [illegible] |
| 6/11/90 | M58594 | | 1.5 | | | [illegible] |
| 6/12/90 | M03677 | | 1.6 | | | [illegible] |
| 6/12/90 | M47059 | | 1.6 | | | [illegible] |
| 6/12/90 | M58594 | | 1.5 | | | [illegible] |
| 6/13/90 | M03677 | | 1.6 | | | [illegible] |
| 6/13/90 | M47059 | | 1.6 | | | [illegible] |
| 6/13/90 | M58594 | | 1.5 | | | [illegible] |
| 6/14/90 | M03677 | | 1.6 | | | [illegible] |
| 6/14/90 | M47059 | | 1.6 | | | [illegible] |
| 6/14/90 | M58594 | | 1.5 | | | [illegible] |
| 6/15/90 | M03677 | | 1.6 | | | [illegible] |
| 6/15/90 | M47059 | | 1.6 | | | [illegible] |
| 6/15/90 | M58594 | | 1.5 | | | [illegible] |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 156.82 | | [illegible] |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1416.39
1369.13

NDT M03677 VALENCIA ☐ PACOIMA ☑
RR LG M47059
RR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 6/4/90 | | | | 127.82 | | |
| 6/4/90 | M03677 | | 1.6 | | | |
| 6/4/90 | M47059 | | 1.6 | | | |
| 6/4/90 | M58594 | | 30.5 | 29 | | |
| 6/5/90 | M03677 | | 1.6 | | | |
| 6/5/90 | M47059 | | 1.6 | | | |
| 6/5/90 | M58594 | | 1.5 | | | |
| 6/6/90 | M03677 | | 1.6 | | | |
| 6/6/90 | M47059 | | 1.6 | | | |
| 6/6/90 | M58594 | | 1.5 | | | |
| 6/7/90 | M03677 | | 1.6 | | | |
| 6/7/90 | M47059 | | 1.6 | | | |
| 6/7/90 | M58594 | | 1.5 | | | |
| 6/8/90 | M03677 | | 1.6 | | | |
| 6/8/90 | M47059 | | 1.6 | | | |
| 6/8/90 | M58594 | | 1.5 | | | |
| | | | 52.5 | 156.82 | | |
| TOTALS | | | 23.5 | 29 | | |

COMMENTS/REMARKS: 23.5 GAL x 11.1 LB = 260.85

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1365.93
1348.59

NDT M03677 VALENCIA ☐ PACOIMA ☑
RR LG M47059
RR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 5-29-90 | | | | 127.82 | | |
| 5-28-90 | Holiday | | | | | |
| 5-29-90 | M03677 | | 1.6 | | | |
| 5-29-90 | M47059 | | 1.6 | | | |
| 5-29-90 | M58594 | | 1.5 | | | |
| 5-30-90 | M03677 | | 1.6 | | | |
| 5-30-90 | M47059 | | 1.6 | | | |
| 5-30-90 | M58594 | | 1.5 | | | |
| 5-31-90 | M03677 | | 1.6 | | | |
| 5-31-90 | M47059 | | 1.6 | | | |
| 5-31-90 | M58594 | | 1.5 | | | |
| 6-1-90 | M03677 | | 1.6 | | | H. Zamora |
| 6-1-90 | M47059 | | 1.6 | | | H. Zamora |
| | | | 17.3 | 127.82 | | |
| TOTALS | | | 17.3 GAL | + | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 192.03 LBS

Rev. 2/90

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

NDT M03677 VALENCIA ☐ PACOIMA ☑ 1345.59 1325.03

RR LG M47059

JRR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 5/21/90 | | | | 127.82 | | |
| 5/21/90 | M03677 | | 1.6 | | | |
| 5/21/90 | M47059 | | 1.6 | | | |
| 5/21/90 | M58594 | | 1.5 | | | |
| 5/22/90 | M03677 | | 1.6 | | | |
| 5/22/90 | M47059 | | 1.6 | | | |
| 5/22/90 | M58594 | | 1.5 | | | |
| 5/23/90 | M03677 | | 1.6 | | | |
| 5/23/90 | M47059 | | 1.6 | | | |
| 5/23/90 | M58594 | | 1.5 | | | |
| 5/24/90 | M03677 | | 1.6 | | | |
| 5/24/90 | M47059 | | 1.6 | | | |
| 5/24/90 | M58594 | | 1.5 | | | |
| 5/25/90 | M03677 | | 1.6 | | | |
| 5/25/90 | M47059 | | 1.6 | | | |
| 5/25/90 | M58594 | | 1.5 | | | |
| | | | 23.5 | 127.82 | | |
| TOTALS | | | 23.5 | + | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.5 LBS

Rev. 2/92

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 1325.03

NDT M03677 VALENCIA ☐ PACOIMA ☑ 1301.53

RR LG M47059

BURR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 5-11-90 | | | | 12752 | | |
| 5-14-90 | M03677 | | 1.6 | | | |
| 5-14-90 | M47059 | | 1.6 | | | |
| 5-14-90 | M58594 | | 1.5 | | | |
| 5-15-90 | M03677 | | 1.6 | | | |
| 5-15-90 | M47059 | | 1.6 | | | |
| 5-15-90 | M58594 | | 1.5 | | | |
| 5-16-90 | M03677 | | 1.6 | | | |
| 5-16-90 | M47059 | | 1.6 | | | |
| 5-16-90 | M58594 | | 1.5 | | | |
| 5-17-90 | M03677 | | 1.6 | | | |
| 5-17-90 | M47059 | | 1.6 | | | |
| 5-17-90 | M58594 | | 1.5 | | | |
| 5-18-90 | M03677 | | 1.6 | | | |
| 5-18-90 | M47059 | | 1.6 | | | |
| 5-18-90 | M58594 | | 1.5 | | | |
| | | | 23.5 | 12775 | | |
| TOTALS | | | 23.5 | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 26.05 LBS

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 1301.53

NDT M03677 VALENCIA ☐ PACOIMA ☑ 1240.77
RR LG M47059
URR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 5·7·90 | | | | 90.57 | | |
| 5·7·90 | M03677 | | 1.6 | | | |
| 5·7·90 | M47059 | | 1.6 | | | |
| 5·7·90 | M58594 | | 1.5 | | | |
| 5·8·90 | M03677 | | 1.6 | | | |
| 5·8·90 | M47059 | | 1.6 | | | |
| 5·8·90 | M58594 | | 1.5 | | | |
| 5·9·90 | M47059 | | 1.6 | | | |
| 5·9·90 | M03677 | | 1.6 | | | |
| 5·9·90 | M58594 | | 1.5 | | | |
| 5·10·90 | M47059 | | 1.6 | | | |
| 5·10·90 | M58594 | | 1.5 | | | |
| 5/10/90 | M03677 | | 38.35 | 37.25 | | H. Zamora |
| 5·11·90 | M03677 | | 1.6 | | | |
| 5·11·90 | M47059 | | 1.6 | | | |
| 5·11·90 | M58594 | | 1.5 | | | |
| | | | 60.75 | 127.82 | | |
| TOTALS | | | 23.50 | 37.25 | | |

COMMENTS REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 160.85 LBS

Rev. 2/92

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 1240.77 1217.32

NDT M03677 VALENCIA ☐ PACOIMA ☑
RR LG M47059
RR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4-30-90 | | | | 90.57 | | |
| 4-30-90 | M03677 | | 1.6 | | | |
| 4-30-90 | M47059 | | 1.6 | | | |
| 4-30-90 | M58594 | | 1.5 | | | |
| 5-1-90 | M03677 | | 1.6 | | | |
| 5-1-90 | M47059 | | 1.6 | | | |
| 5-1-90 | M58594 | | 1.5 | | | |
| 5-2-90 | M03677 | | 1.6 | | | |
| 5-2-90 | M47059 | | 1.6 | | | |
| 5-2-90 | M55594 | | 1.5 | | | |
| 5-3-90 | M03677 | | 1.6 | | | |
| 5-3-90 | 47059 | | 1.6 | | | |
| 5-3-90 | M58594 | | 1.5 | | | |
| 5-4-90 | M03677 | | 1.6 | | | |
| 5-4-90 | M47059 | | 1.6 | | | |
| 5-4-90 | M55594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 90.57 | | |
| TOTALS | | | 23.5 | 0 | | 5/4/90 |

COMMENTS REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 260.85 LBS

HR. TEXTRON, INC

NAME PERMIT # 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD 1217.32

NDT M03677 VALENCIA ☐ PACOIMA ☑ 1193.80
RR LG M47059
RR SM M58594

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4-23-90 | | | | 90.57 | | |
| 4-23-90 | M03677 | | 1.6 | | | |
| 4-23-90 | M47059 | | 1.6 | | | |
| 4-23-90 | M58594 | | 1.5 | | | |
| 4-24-90 | M03677 | | 1.6 | | | |
| 4-24-90 | M47059 | | 1.6 | | | |
| 4-24-90 | M58594 | | 1.5 | | | |
| 4-25-90 | M03677 | | 1.6 | | | |
| 4-25-90 | M47059 | | 1.6 | | | |
| 4-25-90 | M58594 | | 1.5 | | | |
| 4-26-90 | M03677 | | 1.6 | | | |
| 4-26-90 | M47059 | | 1.6 | | | |
| 4-26-90 | M58594 | | 1.5 | | | |
| 4-27-90 | M03677 | | 1.6 | | | |
| 4-27-90 | M47059 | | 1.6 | | | |
| 4-27-90 | M58594 | | 1.5 | | | |
| | | | 23.5 | 90.57 | | |
| TOTALS | | | 23.5 GAL | 0 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

EMISSION 360.65 LBS

Rev. 2/90

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1143-80

VALENCIA ☐ PACOIMA ☒ 1114.32

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4-16-90 | | | | 34.57 | | |
| 4-16-90 | M03677 | | 1.6 | | | |
| 4-16-90 | M47059 | | 1.6 | | | |
| 4-16-90 | M58594 | | 1.5 | | | |
| 4-17-90 | M03677 | | 1.6 | | | |
| 4-17-90 | M47059 | | 1.6 | | | |
| 4-17-90 | M58594 | | 1.5 | | | |
| 4-18-90 | M03677 | | 1.6 | | | |
| 4-18-90 | M47059 | | 1.6 | | | |
| 4-18-90 | M58594 | | 1.5 | | | |
| H. 4-19-90 | M47059 | | 56 GALS | 56 GALS | | H. Zamora |
| 4-19-90 | M03677 | | 1.6 | | | |
| 4-19-90 | M47059 | | 1.6 | | | |
| 4-19-90 | M58594 | | 1.5 | | | |
| 4-20-90 | M03677 | | 1.6 | | | |
| 4-20-90 | M47059 | | 1.6 | | | |
| 4-20-90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | 79.5 | | | |
| | | | [redacted] | 70.57 | | |
| TOTALS | | | [redacted] | [redacted] | | |

COMMENTS/REMARKS:

23.5 GAL X 11.1 LBS = 260.85 LBS

NOTE: Each sheet must start with an accurate waste inventory

Rev. 1/89

| NAME - | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑ 1064.58

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4.9.90 | | | | 8.25 | | |
| 4.9.90 | M03677 | | 1.6 | | | |
| 4.9.90 | M47059 | | 1.6 | | | |
| 4.9.90 | M58594 | | 1.5 | | | |
| 4.10.90 | M03677 | | 1.6 | | | |
| 4.10.90 | M47059 | | 1.6 | | | |
| 4.10.90 | M58594 | | 1.5 | | | |
| 4.[illegible].90 | M03677 | | 1.6 | | | |
| 4.[illegible].90 | M47059 | | 1.6 | | | |
| 4.[illegible].90 | M58594 | | 1.5 | | | |
| 4.12.90 | M03677 | | 1.6 | | | |
| 4.12.90 | M47059 | | 1.6 | | | |
| 4.12.90 | M58594 | | 1.5 | | | |
| 4.[illegible].90 | M58594 | | 26.31 | 26.31 | 26.31 | |
| 4.13.90 | M03677 | | 1.6 | | | |
| 4.13.90 | M47059 | | 1.6 | | | |
| 4.13.90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | 24.57 | | |
| TOTALS | | | 47.81 | 26.31 | | |

COMMENTS/REMARKS:

23.5 X 11.1 LBS = 260.85 LBS

NOTE: Each sheet must start with an accurate waste inventory

Rev. 1/89

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1064.50
1041.00

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 4.2.90 | | | | 8.25 | | |
| 4.2.90 | M03677 | | 1.6 | | | |
| 4.2.90 | M47059 | | 1.6 | | | |
| 4.2.90 | M58594 | | 1.5 | | | |
| 4.3.90 | M3677 | | 1.6 | | | |
| 4.3.90 | M47059 | | 1.6 | | | |
| 4.3.90 | M58594 | | 1.5 | | | |
| 4.4.90 | M3677 | | 1.6 | | | |
| 4.4.90 | M47059 | | 1.6 | | | |
| 4.4.90 | M58594 | | 1.5 | | | |
| 4.5.90 | M3677 | | 1.6 | | | |
| 4.5.90 | M47059 | | 1.6 | | | |
| 4.5.90 | M58594 | | 1.5 | | | |
| 4.6.90 | M03677 | | 1.6 | | | |
| 4.6.90 | M47059 | | 1.6 | | | |
| 4.6.90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 | 7.25 | | |
| TOTALS | | | 23.5 | — | | |

COMMENTS/REMARKS:

23.5 x 11.1 = 260.85 LBS

NOTE: Each sheet must start with an accurate waste inventory

Rev. 1/89

| NAME | PERMIT # |
|---|---|
| NDT | MO3677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

1041.00

VALENCIA ☐ PACOIMA ☑ 1017.53

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 3-26-90 | | | ~~8.25~~ | 8.25 | | |
| 3-26-90 | M03677 | | 1.6 | | | |
| 3-26-90 | M47059 | | 1.6 | | | |
| 3-26-90 | M58594 | | 1.5 | | | |
| 3-27-90 | M3677 | | 1.6 | | | |
| 3-27-90 | M47059 | | 1.6 | | | |
| 3-27-90 | M58594 | | 1.5 | | | |
| 3-28-90 | M3677 | | 1.6 | | | |
| 3-28-90 | M47059 | | 1.6 | | | |
| 3-28-90 | M58594 | | 1.5 | | | |
| 3-29-90 | M3677 | | 1.6 | | | |
| 3-29-90 | M47059 | | 1.6 | | | |
| 3-29-90 | M58594 | | 1.5 | | | |
| 3-30-90 | M3677 | | 1.6 | | | |
| 3-30-90 | M47059 | | 1.6 | | | |
| 3-30-90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | [illegible] | [illegible] | | |
| TOTALS | | | [illegible] | — | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

[illegible]

Rev. 1/89

| NAME - | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

1017.53

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

994.08

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 3·1990 | | | 8.25 gal | 8.25 | | |
| 3·19·90 | M03677 | | 1.6 | | | |
| 3·1990 | M47059 | | 1.6 | | | |
| 3·1990 | M58594 | | 1.5 | | | |
| 32090 | M03677 | | 1.6 | | | |
| 32090 | M47059 | | 1.6 | | | |
| 32090 | M58594 | | .5 | | | |
| 321·90 | M03677 | | 1.6 | | | |
| 32190 | M47059 | | 1.6 | | | |
| 32190 | M58594 | | 1.5 | | | |
| 3·2290 | M03677 | | 1.6 | | | |
| 3·2290 | M47059 | | 1.6 | | | |
| 3·2290 | M58594 | | 1.5 | | | |
| 3·23·90 | M03677 | | 1.6 | | | |
| 3·23·90 | M47059 | | 1.6 | | | |
| 3·23·90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 23.5 gal | 8.25 | | |
| TOTALS | | | 23.5 GAL | | | |

COMMENTS/REMARKS:

23.5 GAL × 11.1 LBS = 260.85 LBS

NOTE: Each sheet must start with an accurate waste inventory

Rev. 1/89

| NAME - | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

994.08
~~978~~ 970.58

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 3·12·90 | | | | 8.25 | | |
| 3·12·90 | M03677 | | 1.6 | | | |
| 3·12·90 | M47059 | | 1.6 | | | |
| 3·12·90 | M58594 | | 1.5 | | | |
| 3·13·90 | M03677 | | 1.6 | | | |
| 3·13·90 | M47059 | | 1.6 | | | |
| 3·13·90 | M58594 | | 1.5 | | | |
| 3·14·90 | M03677 | | 1.6 | | | |
| 3·14·90 | M47059 | | 1.6 | | | |
| 3·14·90 | M58594 | | 1.5 | | | |
| 3·15·90 | M03677 | | 1.6 | | | |
| 3·15·90 | M47059 | | 1.6 | | | |
| 3·15·90 | M58594 | | 1.5 | | | |
| 3·16·90 | M03677 | | 1.6 | | | |
| 3·16·90 | M58594 | | 1.6 | | | |
| 3·16·90 | M47059 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | 23.5 | 8.25 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory !

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

970.58
947.08

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 3-5-90 | | | | 5.25 | | |
| 3-5-90 | M03677 | | 1.6 | | | |
| 3-5-90 | M47059 | | 1.6 | | | |
| 3-5-90 | M58594 | | 1.5 | | | |
| 3-6-90 | M03677 | | 1.6 | | | |
| 3-6-90 | M47059 | | 1.6 | | | |
| 3-6-90 | M55594 | | 1.5 | | | |
| 3-7-90 | M03677 | | 1.6 | | | H. Zamora |
| 3-7-90 | M47059 | | 1.6 | | | H. Zamora |
| 3-7-90 | M58594 | | 1.5 | | | H. Zamora |
| 3-8-90 | M03677 | | 1.6 | | | |
| 3-8-90 | M47059 | | 1.6 | | | |
| 3-8-90 | M58594 | | 1.5 | | | |
| 3-9-90 | M03677 | | 1.6 | | | |
| 3-9-90 | M47059 | | 1.6 | | | |
| 3-9-90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | 23.5 | 5.25 | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

| NAME - | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR - TEXTRON, INC

947.08
923.61

## 1,1,1, TRICHLORDETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 2-26-90 | | | | 8.25 | | |
| 2-26-90 | M03677 | | 1.6 | | | |
| 2-26-90 | M47059 | | 1.6 | | | |
| 2-26-90 | M58594 | | 1.5 | | | |
| 2-27-90 | M03677 | | 1.6 | | | |
| 2-27-90 | M47059 | | 1.6 | | | |
| 2-27-90 | M58594 | | 1.5 | | | |
| 2-28-90 | M03677 | | 1.6 | | | |
| 2-28-90 | M47059 | | 1.6 | | | |
| 2-28-90 | M58594 | | 1.5 | | | |
| 3-1-90 | M03677 | | 1.6 | | | |
| 3-1-90 | M47059 | | 1.6 | | | |
| 3-1-90 | M58594 | | 1.5 | | | |
| 3-2-90 | M03677 | | 1.6 | | | |
| 3-2-90 | M47059 | | 1.6 | | | |
| 3-2-90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | 23.5 | 9.75 | | |

COMMENTS/REMARKS:

* INDICATES START OF NEW MONTH.

NOTE: Each sheet must start with an accurate waste inventory !

| NAME - | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

923.61
900.14

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 2·19·90 | | | | 8.25 | | |
| 2·19·90 | M03677 | | 1.6 | | | |
| 2·19·90 | M47059 | | 1.6 | | | |
| 2·19·90 | M58594 | | 1.5 | | | |
| 2·20·90 | M03677 | | 1.6 | | | |
| 2·20·90 | M47059 | | 1.6 | | | |
| 2·20·90 | M58594 | | 1.5 | | | |
| 2·21·90 | M03677 | | 1.6 | | | |
| 2·21·90 | M47059 | | 1.6 | | | |
| 2·21·90 | M58594 | | 1.5 | | | |
| 2·21·90 | M03677 | | 1.6 | | | |
| 2·21·90 | M47059 | | 1.6 | | | |
| 2·21·90 | M58594 | | 1.5 | | | |
| 2·22·90 | M03677 | | 1.6 | | | |
| 2·22·90 | M47059 | | 1.6 | | | |
| 2·22·90 | M58594 | | 1.5 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory !

RECEIVED
FEB 16 1990
ENGINEERING

Rev. 1/89

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

400.14
8771
23.03

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 2/12/90 | | | | 8.25 | | H Zamora |
| 2/12/90 | M03677 | | 1.6 | | | H. Zamora |
| 2/12/90 | M47059 | | 1.6 | | | H Zamora |
| 2/12/90 | M58594 | | 1.5 | | | H Zamora |
| 2·13·90 | M03677 | | 1.6 | | | J. Delita |
| 2·13·90 | M47059 | | 1.6 | | | J. Delita |
| 2·13·90 | M58594 | | 1.5 | | | J. Delita |
| 2·14·90 | M03677 | | 1.6 | | | J. Delita |
| 2·14·90 | M47059 | | 1.6 | | | J. Delita |
| 2·14·90 | M58594 | | 1.5 | | | J. Delita |
| 2·15·90 | M03677 | | 1.6 | | | J. Delita |
| 2·15·90 | M47059 | | 1.6 | | | J. Delita |
| 2·15·90 | M58594 | | 1.5 | | | J. Delita |
| 2·16·90 | M03677 | | 1.6 | | | J. Delita |
| 2·16·90 | M47059 | | 1.6 | | | J. Delita |
| 2·16·90 | M58594 | | 1.5 | | | J. Delita |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory !

Rev. 1/89

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

877.11
846.85

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 2/5/90 | | | | 0 | | H. Zamora |
| 2/5/90 | M03677 | | 1.6 | | | H. Zamora |
| 2/5/90 | M47059 | | 1.6 | | | H. Zamora |
| 2/5/90 | M58594 | | 1.5 | | | H Zamora |
| 2/6/90 | M03677 | | 1.6 | | | H. Zamora |
| 2/6/90 | M47059 | | 1.6 | | | H. Zamora |
| 2/6/90 | M58594 | | 9.75 | 8.25 | | H Zamora |
| 2/7/90 | M03677 | | 1.6 | | | H. Zamora |
| 2/7/90 | M47059 | | 1.6 | | | H Zamora |
| 2/7/90 | M58594 | | 1.5 | | | H. Zamora |
| 2/8/90 | M03677 | | 1.6 | | | H Zamora |
| 2/8/90 | M47059 | | 1.6 | | | H. Zamora |
| 2/8/90 | M58594 | | 1.5 | | | H Zamora |
| 2/9/90 | M03677 | | 1.6 | | | H Zamora |
| 2/9/90 | M47059 | | 1.6 | | | H Zamora |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

15 Zamora 2/8/90

Rev. 1/89

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

846.35
-826.36
020.49

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 1/29/90 | | | | 0 | | H Zamora |
| 1/29/90 | HC3677 | | 1.6 | | | H Zamora |
| 1/29/90 | M47059 | | 1.6 | | | H. Zamora |
| 1/29/90 | M58594 | | 1.5 | | | H. Zamora |
| 1/30/90 | HC3677 | | 1.6 | | | H. Zamora |
| 1/30/90 | M47059 | | 1.6 | | | H. Zamora |
| 1/30/90 | M58594 | | 1.5 | | | H. Zamora |
| 1/31/90 | HC3677 | | 1.6 | | | H Zamora |
| 1/31/90 | M47059 | | 1.6 | | | H Zamora |
| 1/31/90 | M58594 | | 1.5 | | | H. Zamora |
| 2/01/90 | HC3677 | | 1.6 | | | H. Zamora |
| 2/01/90 | M47059 | | 1.6 | | | H. Zamora |
| 2/02/90 | HC3677 | | 1.6 | | | H Zamora |
| 2/02/90 | M47059 | | 1.6 | | | H Zamora |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | [illegible] | — | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory !

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

E26.36
8C4.36
C220 C

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 1/22/90 | | | | 0 | | H. Zamora |
| 1/22/90 | M03677 | | 1.6 | | | H Zamora |
| 1/22/90 | M47059 | | 1.6 | | | H Zamora |
| 1/22/90 | M58594 | | 1.5 | | | H Zamora |
| 1/23/90 | M03677 | | 1.6 | | | H Zamora |
| 1/23/90 | M47059 | | 1.6 | | | H Zamora |
| 1/23/90 | M58594 | | 1.5 | | | H. Zamora |
| 1/24/90 | M03677 | | 1.6 | | | H Zamora |
| 1/24/90 ~~M47059~~ | M47059 | | 1.6 | | | H. Zamora |
| 1/25/90 | M03677 | | 1.61 | | | H Zamora |
| 1/25/90 | M47059 | | 1.6 | | | H. Zamora |
| 1/25/90 | M58594 | | 1.5 | | | H Zamora |
| 1/26/90 | M03677 | | 1.6 | | | H Zamora |
| 1/26/90 | M47059 | | 1.6 | | | H Zamora |
| 1/26/90 | M58594 | | 1.5 | | | H Zamora |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory !

| NAME | PERMIT # |
|---|---|
| NDT | M03677 |
| BURR LG | M47059 |
| BURR SM | M58594 |

# HR. TEXTRON, INC

804.83
783.33
020.53

## 1,1,1, TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

NOTE: 1 Gallon = 11.1 Pounds; Voc =4 wt.%

| DATE | PERMIT No. | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE RECYCLE | SIGNATURE |
|---|---|---|---|---|---|---|
| 1/15/90 | | | | 0 | | H. Zamora |
| 1/15/90 | M03677 | | 1.6 GALS | | | H. Zamora |
| 1/15/90 | M47059 | | 1.6 GALS | | | H. Zamora |
| 1/15/90 | M58594 | | 1.51 GALS | | | H. Zamora |
| 1/16/90 | M03677 | | 1.61 GALS | | | H. Zamora |
| 1/16/90 | M47059 | | 1.6 GALS | | | H. Zamora |
| 1/16/90 | M58594 | | 1.5 GALS | | | H. Zamora |
| 1/17/90 | M03677 | | 1.6 GALS | | | H. Zamora |
| 1/17/90 | M47059 | | 1.6 GALS | | | H. Zamora |
| 1/17/90 | M58594 | | 1.51 GALS | | | H Zamora |
| 1/18/90 | M03677 | | 1.6 GALS | | | H. Zamora |
| 1/18/90 | M47059 | | 1.6 GALS | | | H Zamora |
| 1/19/90 | M03677 | | 1.6 GALS | | | H Zamora |
| 1/19/90 | M47059 | | 1.6 GALS | | | H Zamora |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | [illegible] | — | | |

COMMENTS/REMARKS:

NOTE: Each sheet must start with an accurate waste inventory

Rev. 1/89

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

783.33
763.33
020.50

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 1/8/90 | | | 190.25 | | H. Zamora |
| 1/8/90 | | 1.6 BUER | | | H. Zamora |
| 1/8/90 | | 1.6 N.O.T | | | H. Zamora |
| 1/9/90 | | 1.6 BUER | | | H. Zamora |
| 1/9/90 | | 1.6 N.O.T | | | H. Zamora |
| 1/9/90 | | 1.5 SMALL DEGREASER | | | H Zamora |
| 1/10/90 | | 1.6 BUER | | | H. Zamora |
| 1/10/90 | | 1.6 N.O.T | | | H Zamora |
| 1/10/90 | | 1.5 SMALL DEGREASER | | | H. Zamora |
| 1/11/90 | | 1.6 BUER | | | H. Zamora |
| 1/11/90 | | 1.6 N.O.T | | | H. Zamora |
| 1/11/90 | | | | 190.25 | H. Zamora |
| 1/12/90 | | 1.6 BUER | | | H. Zamora |
| 1/12/90 | | 1.6 N.O.T | | | H. Zamora |
| 1/12/90 | | 1.5 SMALL DEGREASER | | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 20.50 | 0 | | |
| | | | | | |

## COMMENTS/REMARKS :

17.50 GAL x 11.1 LBS = 227.55 LBS

WEEKLY EMISSION: [illegible] POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

763.33
711.50

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 1/2/90 | | | 1.57 GALS | | H. Zamora |
| 1/2/90 | | 1.6 BURR | | | H. Zamora |
| 1/2/90 | | 1.6 N.O.T | | | H. Zamora |
| 1/2/90 | | 1.5 SMALL DEGREASER | | | H. Zamora |
| 1/3/90 | | 1.6 BURR | | | H. Zamora |
| 1/3/90 | | 1.6 N.O.T | | | H. Zamora |
| 1/3/90 | | 1.5 SMALL DEG. | | | H. Zamora |
| 1/4/90 | | 1.6 BURR | | | H. Zamora |
| 1/4/90 | | 1.6 N.O.T | | | H. Zamora |
| 1/4/90 | | 1.5 SMALL DEG. | | | H. Zamora |
| 1/5/90 | | 1.6 BURR | | | H. Zamora |
| 1/5/90 | | 34.85 N.O.T | 33.25 | | H. Zamora |
| 1/5/90 | | 1.5 SMALL DEGREASER | | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 52.65 | 190.25 | | |
| | | 52.65 GAL | 33.25 GAL | | |

## COMMENTS/REMARKS :

52.65 GAL − 33.25 GAL = 18.5 GAL

[illegible]

WEEKLY EMISSION: [illegible] POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

711.28
652.78
58.50

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 12/18/89 | | | 122 | | H. Zamora |
| 12/18/89 | | 1.6 BURR | | | H. Zamora |
| 12/18/89 | | 1.6 N.D.T | | | H. Zamora |
| 12/18/89 | | 1.5 SMALL DEAG. | | | H. Zamora |
| 12/19/89 | | 36.6 BURR | 35 | | H. Zamora |
| 12/19/89 | | 1.6 NDT | | | H. Zamora |
| 12/19/89 | | 1.5 SMALL ~~AGGRESER~~ | | | H. Zamora |
| 12/20/89 | | 1.6 BURR | | | H. Zamora |
| 12/20/89 | | 1.6 N.D.T | | | H. Zamora |
| 12/20/89 | | 1.5 SMALL DEG. | | | H. Zamora |
| 12/21/89 | | 1.6 BURR | | | H. Zamora |
| 12/21/89 | | 1.6 N.D.T | | | H. Zamora |
| 12/21/89 | | 1.5 SMALL DEG. | | | H. Zamora |
| 12/22/89 | | 1.6 BURR | | | H. Zamora |
| 12/22/89 | | 1.6 N.D.T | | | H. Zamora |
| 12/22/89 | | 1.5 SMALL DEG. | | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | 157 GAL | | |
| | | 58.5 | 35.0 GAL ~~157~~ 99 | | |

## COMMENTS/REMARKS :

58.5 GAL — 35.0 GAL = 23.5 GAL

23.5 GAL X 11.2 LBS/GAL = 265.5 LBS

WEEKLY EMISSION: 265.5 POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

[redacted] 052.78
621.06

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 12/11/89 | | | 113.5 | | H. Zamora |
| 12/11/89 | | 1.6 BURR | | | H. Zamora |
| 12/11/89 | | 1.6 N.O.T | | | H. Zamora |
| 12/11/89 | | 1.5 SMALL DEGREASER | | | H. Zamora |
| 12/12/89 | | 1.6 BURR | | | H. Zamora |
| 12/12/89 | | 1.63 N.O.T | | | H. Zamora |
| 12/12/89 | | 10. SMALL DEGREASER | 8.5 | | H. Zamora |
| 12/13/89 | | 1.6 BURR | | | H. Zamora |
| 12/13/89 | | 1.57 N.O.T | | | H. Zamora |
| 12/14/89 | | 1.61 BURR | | | H. Zamora |
| 12/14/89 | | 1.6 N.O.T | | | H. Zamora |
| 12/15/89 | | 1.6 BURR | | | H. Zamora |
| 12/15/89 | | 1.61 N.O.T | | | H. Zamora |
| 12/15/89 | | 1. SMALL DEGREASER | | | H. Zamora |
| 12/16/89 | | 1.6 BURR | | | H. Zamora |
| 12/16/89 | | 1.61 N.O.T | | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 31.73 | 122.0 GAL | | |
| | | 31.73 | 7.5 GAL ~~122~~ 20 | | |

## COMMENTS/REMARKS :

31.73 GAL − 7.5 GAL = 23.23 GAL

23.23 GAL X 11 LBS = 257.65 LBS

WEEKLY EMISSION: ~~257~~ 257.65 POUNDS [redacted] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

621.06
-564.02
057.04

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 12/4/89 | | | 78.5 | | H. Zamora |
| 12/4/89 | | 1.6 BURR | | | H. Zamora |
| 12/4/89 | | 1.6 NOT | | | H. Zamora |
| 12/4/89 | | 1. B-4 | | | H. Zamora |
| 12-4-89 | 390.4 | | | | B Jones |
| 12/5/89 | | 1.6 BURR | | | H. Zamora |
| 12/5/89 | | 1.61 NOT | | | H. Zamora |
| 12/6/89 | | 1.6 BURR | | | H Zamora |
| 12/6/89 | | 1. B-4 | | | H Zamora |
| 12/6/89 | | 1.6 NOT | | | H. Zamora |
| 12/7/89 | | 36.6 NOT | 3.5 | | H Zamora |
| 12/7/89 | | 1.62 BURR | | | H. Zamora |
| 12/8/89 | | 1.6 NOT H.C. | | | H Zamora |
| 12/8/89 | | 1.6 ~~NOT~~ BURR | | | H. Zamora |
| 12-9-89 | | 1.6 BURR | | | J. Ernesto |
| 12-9-89 | | ~~NOT~~ 1.6 | | | J. Ernesto |
| 12-9-89 | | 1.0 B-4 | | | J. Ernesto |
| | | | | | |
| | | | | | |
| | | | 113.5 | | |
| | 390.4 | 57.23 | 35 ~~113.5~~ | | |

## COMMENTS/REMARKS :

57.23 GAL — 35 GAL = 22.23 GAL

22.23 GAL X 11.1 = 246.75 LBS

WEEKLY EMISSION: 246.75 POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

564.02
493.75
70.27

NOVEMBER 1989

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 11/27/89 | | | 33.75 | | H. Zamora |
| 11/27/89 | | 3.0 N.O.T | | | H. Zamora |
| 11/28/89 | | 51.03 BURR | 44.75 | | H. Zamora |
| 11/28/89 | | 1.5 N.O.T | | | H. Zamora |
| 11/28/89 | | 1.75 B-4 | | | H. Zamora |
| 11/29/89 | | 1.5 BURR | | | H. Zamora |
| 11/29/89 | | 1.5 N.O.T | | | H. Zamora |
| 11/29/89 | | 1.0 B-4 | | | H. Zamora |
| 11/30/89 | | 1.5 BURR | | | H. Zamora |
| 11/30/89 | | 1.5 N.O.T | | | H. Zamora |
| 12/1/89 | | 1.5 BURR | | | H. Zamora |
| 12/1/89 | | 1.5 N.O.T | | | H. Zamora |
| 12/2/89 | | 1.5 BURR | | | H. Zamora |
| 12/2/89 | | 1.5 N.O.T | | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | 78.5 | | |
| | | 70.28 | 44.75 | | |

## COMMENTS/REMARKS :

70.28 GAL − 44.75 = 25.53

25.53 GAL × 11.1 LBS = 283.38 LBS

WEEKLY EMISSION: [redacted] POUNDS [redacted] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

493.75
479.76
013.99

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | 1989 GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 11/20/89 | | | 33.75 | | H. Zamora |
| 11/20/89 | | 1.5 BURR | | | H. Zamora |
| 11/20/89 | | 1.5 NUT | | | H. Zamora |
| 11/21/89 | | 1.5 BURR | | | H. Zamora |
| 11/21/89 | | 1.5 NUT | | | H. Zamora |
| 11/22/89 | | 1.5 BURR | | | H Zamora |
| 11/22/89 | | 1.5 NUT | | | H. Zamora |
| 11/22/89 | | 5. BURR | | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 14.0 GAL | 33.75 | | |
| | | 14.0 GAL | 0 | | |

## COMMENTS/REMARKS :

14 GAL X 11.1 LBS = 155.4 LBS

WEEKLY EMISSION: 155.4 POUNDS [signature] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

479.76
460.71

VALENCIA ☐ PACOIMA ☑

## HR TEXTRON, INC.

November 1989

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 11/13/89 | | | 33.75 | | H. Zamora |
| 11/13/89 | | 1.5 BURR | | | H. Zamora |
| 11/13/89 | | 1.5 N.D.T | | | H. Zamora |
| 11/14/89 | | 1.5 BURR | | | H. Zamora |
| 11/14/89 | | 1.5 NDT | | | H. Zamora |
| 11-15-89 | | 1.5 NDT | | | J. Enriquez |
| 11-15-89 | | 1.6 BURR | | | J. Enriquez |
| 11/16/89 | | 1.5 NDT | | | H. Zamora |
| 11/16/89 | | 1.5 BURR | | | H. Zamora |
| ~~11-17-89~~ | | ~~BLDG 4 [illegible]~~ | | | |
| 11-17-89 | | 1.4 BLDG 4 | | | J. Enriquez |
| 11/17/89 | | 3 GALS BURR | | | H. Zamora |
| 11-18-89 | | 1.5 BURR | | | J. Enriquez |
| 11-18-89 | | 1.5 NDT | | | J. Enriquez |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 19.5 | 33.75 | | |
| | | 19.5 | 0 | | |

## COMMENTS/REMARKS :

19.5 GAL X 11.1 LB = 216.45 LBS

WEEKLY EMISSION: 216.45 POUNDS [signature] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑ 398.90

## HR TEXTRON, INC.

November 1989

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 11/6/89 | | | 33.75 | | H Zamora |
| 11/6/89 | | 15.92 BURR GALS | | | H. Zamora |
| 11/8/89 | | 14.03 NDT GALS | | | H Zamora |
| 11/9/89 | | 2.53 B.4 | | | H Zamora |
| 11/11/89 | | 14.51 BURR | | | H Zamora |
| 11/11/89 | | 13.01 NDT | | | H Zamora |
| 11/11/89 | | 1.82 B.4 | | | H Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | ~~0~~ 33.75 | | |
| | | 61.82 GAL | ~~0~~ [illegible] | | |

## COMMENTS/REMARKS :

61.82 GAL X 11.1 LB = [illegible] LBS

Tank: Copper [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible]

WEEKLY EMISSION: [illegible] POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

398.90 VALENCIA ☐ PACOIMA ☑ 366.98

36698

03192

November 1989

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 10-30-89 | | | 33.75 | | H. Zamora |
| 11-1-89 | | 15.03 BULK GALS | | | H. Zamora |
| 11-1-89 | | 13.76 HOT GALS | | | H. Zamora |
| 11-4-89 | | 3.14 BLDG 4 | | | B. Jones |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 31.93 | ~~33.75~~ | | |
| | | 31.93 | 0 | | |

## COMMENTS/REMARKS :

31.93 GAL x 11.1 LB/GAL = 354.4 LB

WEEKLY EMISSION: 354.4 POUNDS T. Zamora NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

## HR TEXTRON, INC.

October 1989

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 10-23-89 | | | 227 GALS | | H Zamora |
| 10-24-89 | | 17.08 NOT USED | | | H. Zamora |
| 10-26-89 | | 15.26 BURR | | | H Zamora |
| 10-26-89 | | | -0- | 227 GALS | H Zamora |
| 10-28-89 | | 35 3-4 GALS | 33 3/4 GALS | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 67.34 | 26.75 | 227.0 | |
| | | 67.34 | 33,75 GAL | 227.0 GAL | |

## COMMENTS/REMARKS :

67.34 GAL − 33.75 GAL = 33.59 GAL X 11.1 = 372.75 LB

WEEKLY EMISSION: 372.75 POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

299.64) 168.
131.64)

VALENCIA ☐ PACOIMA ☑

## HR TEXTRON, INC.

October 1989

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 10-16-89 | | | 123 GAL | | H. Zamora |
| 10-16-89 | | 48.5 BURR | | | H. Zamora |
| 10-16-89 | | | 34 GAL | | H. Zamora |
| 10-16-89 | | 2.5 B-4 | | | H. Zamora |
| 10-17-89 | 400.2 | | | | H. Zamora |
| 10-19-89 | | 65.92 N.O.T GAL | | | H. Zamora |
| 10-19-89 | | | 44 GAL | | H. Zamora |
| 10-20-89 | | 2.02 B-4 | | | H. Zamora |
| 10-20-89 | | 14.52 BURR | | | H. Zamora |
| 10-21-89 | | 35.06 B-4 | 26. GAL | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | 400.2 | 168.52 | 227.0 | | |
| | 400.2 | 168.52 | 104.0 | -0- | |

## COMMENTS/REMARKS :

168.52 - 104.0 = 64.52 GAL OR 716.2 LBS

WEEKLY EMISSION: 716.2 POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY

15607

# RHO-CHEM CORP.

425 ISIS AVE.
INGLEWOOD, CALIF. 90301 (213) 776-6233

Date 10-17-1989

Sold to Textron

Address Pacoima

| PRODUCT | GALLONS | PRICE | AMOUNT |
|---|---|---|---|
| 2404 | 400.2 | | |
| Recon 11 ® | | | |
| | | | |
| | | | |
| | | | |

| YOUR SALE NO. | GALLON READING - FINISH | 10ths |
|---|---|---|
| AA 7 0 7 | 8 1 4 4 1 9 | 9 |
| AA 7 0 6 | 8 1 4 0 1 9 | 7 |
| PREVIOUS SALE NO. | GALLON READING - START | 400.2 |

RECEIVED PAYMENT _____ Time _____ A.M. P.M.

DRIVER R Edwards

RECEIVED ABOVE GALLONS

R K Jones
SIGNATURE OF CUSTOMER

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

131.09
7/31.09
83.45

VALENCIA ☐ PACOIMA ☒

Effective 1989

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 10-09-89 | | | 120 GALS | | [illegible] |
| 10-9-89 | | 16 gals N.D.T | | | H Zamora |
| 10-9-89 | | 13.14 Blue | | | H. Zamora |
| 10-16-89 | | 2.25 8.5 | | | H. Zamora |
| 10-14-89 | | 15.75 N.D.T | | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 10-16-89 | | | 120 GAL | | |
| | | 47.64 | 0 | | BZ |

## COMMENTS/REMARKS :

47.64 GAL x 11.1 LBS = 529 LBS

WEEKLY EMISSION: 529 POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

10/10/89

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☒

64.46

October 1989

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 10-02-89 | | | 120 gals. | | D. Mar[illegible] |
| 10-02-89 | | 3. gal Bu4 | | | H. Zamora |
| 10-02-89 | | 16 gal Buee | | | H. Zamora |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 10-9-89 | | | 120 gal | | |
| | | 19 GAL | [illegible] GAL | | T. Hunger 10/9/89 |

## COMMENTS/REMARKS :

19 GAL x 11.1 #s = 210.9 #

WEEKLY EMISSION: 210.9 POUNDS T. Hunger 10/9/89 NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

64.46
29.92

VALENCIA ☐ PACOIMA ☒

Sept 1989

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 9-25-89 | | | 120 gals. | | G Manly |
| 9-25-89 | | 16.82 N.D.T. | | | H. Zamora |
| 9-27-89 | | 8.00 N.D.T. | | | T. Glover |
| 9-27-89 | | 8.19 BURR | | | H. Zamora |
| 9-28-89 | | 1.53 EDM | | | T. Glover |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 10-02-89 | | 34.54 gal. | 120 gal. | | G. Manly |

## COMMENTS/REMARKS :

120 GAL WASTE-TRIC MINUS 34.54 GAL = 84.46 GAL
84.46 X 11.1 = 94 P.S. POUNDS EMITTED

WEEKLY EMISSION: 94 P.S. POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☑

Sept 1989

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 9-18-89 | | | 3 GAL | | D. Manly |
| 9-19-89 | | 53 GAL BURR | | | H.Z |
| 9-19-89 | | | 67 GAL BURR | | L.G. |
| 9-19-89 | | 50 GAL NDT | 50 GAL NDT | | L.G. |
| 9-22-89 | | 17 GAL BURR | | | H.Z. |
| 9-23-89 | | 2 GAL B-4 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 122 GAL | 120 GAL | | D. Manly |

## COMMENTS/REMARKS :

15 GALLONS OF WASTE OIL CONTAMINATED WITH TRICA INCLUDED IN WASTE INVENTORY

120 GAL WASTE TRIC MINUS 15 GALLON OIL = 105 GAL TRIC

[illegible] GAL WASTE MINUS 122 GAL DISPENSED = [illegible] GAL EMITTED.

WEEKLY EMISSION: ~~[illegible]~~ 133.7 POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☒

2 of 989

## HR TEXTRON, INC.

ONE GALLON EQUALS 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 9-11-89 | | | 3 gals. | | M. Manly |
| 9-12-89 | | 14 gals. Burr | | | H.Z. |
| 9-12-89 | | 2 gals. B-4 | | | H.Z. |
| 9-15-89 | | 2 gals. B-4 | | | H.Z. |
| 9-16-89 | | 16 gals. NDT | | | H.Z. |
| 9-16-89 | | 12 gals Burr | | | H.Z. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Ø | 46 gals. | NO CHANGE 3 gals. | Ø | M. Manly |

## COMMENTS/REMARKS :

WEEKLY EMISSION: 510.6 POUNDS M. Manly NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☒

Sept 1989

## HR TEXTRON, INC.

11.1

ONE GALLON EQUALS ~~10.95~~ POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 9-5-89 | | | 3 gal. | | AM |
| 9-6-89 | | 12 gal BUZR | | | H.Z |
| 9-7-89 | | 16 gal NDT | | | H.Z |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 9-11-89 | 0 | 23 gal. | 3 gal. | 0 | D. Manly |

## COMMENTS/REMARKS :

WEEKLY EMISSION: [illegible] POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☒

Sept 1989

## HR TEXTRON, INC.

ONE GALLON EQUALS 10.95 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 8-28-89 | | | 3 GAL | | G.M. |
| 8-28/89 | | 1 gal-Burr | | | J.E. |
| 8-29-89 | | 16 GALS. BURR | | | H.Z |
| 8-29-89 | | 4 gals B-4 | | | H.Z |
| 8-30-89 | | 4 gals NDT | | | J.E. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 9/5/89 TOTAL | | 28 gals. | 3 gals. | | AM |

## COMMENTS/REMARKS :

WEEKLY EMISSION: ~~30 LBS~~ POUNDS NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY.

# 1,1,1 TRICHLOROETHANE (TCA) USAGE RECORD

VALENCIA ☐ PACOIMA ☒

Sept 1989

## HR TEXTRON, INC.

ONE GALLON EQUALS ~~10.95~~ 11.1 POUNDS

| DATE | GALLONS | | | | NAME |
|---|---|---|---|---|---|
| | PURCHASE | DISPENSE | WASTE INVENTORY | REMOVE (RECYCLE) | |
| 8-21-89 | | | 3.0 gal. | | J. Manly |
| 8-21-89 | 373.0 gal. | | | | J. Manly |
| 8-25-89 | | 4 GAL /MDT | | | [illegible] |
| ~~8-29-89~~ | | ~~0.4 GAL~~ | | | [illegible] |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 8-28-89 | 373 | 4.0 GAL | 3.0 GAL | — | |

## COMMENTS/REMARKS :

[illegible]

WEEKLY EMISSION: _____ POUNDS [illegible] NAME

NOTE: EACH SHEET MUST START WITH AN ACCURATE WASTE INVENTORY COUNT. WEEKLY EMISSION RECORD WILL BE AMOUNT DISPENSED MINUS AMOUNT ACCUMULATED IN INVENTORY

17215

# RHO-CHEM CORP.

425 ISIS AVE.
INGLEWOOD, CALIF. 90301 (213) 776-6233

Date 8-21-1989

Sold to H.R. TEXTRON

Address 2404

| PRODUCT | GALLONS | PRICE | AMOUNT |
|---|---|---|---|
| Recon | | | |
| Ethane | | | |

| YOUR SALE NO. | GALLON READING - FINISH | 10ths |
|---|---|---|
| AA 3 0 5 | 0 0 3 7 3 | 0 |
| AA 3 0 4 | 0 0 0 0 0 | 0 |
| PREVIOUS SALE NO. | GALLON READING - START | |

373.0

RECEIVED PAYMENT _____ Time _____ A.M. P.M.

DRIVER Ken

RECEIVED ABOVE GALLONS Charles Morton

SIGNATURE OF CUSTOMER

2166-04749

# EXHIBIT C

## CHEMICAL USAGE

### RESPONSE TO QUESTION #11 PAGE 10

350116

2166-04749

# ATTACHMENT "A"

## CHEMICAL USEAGE

KEY

V = Valencia
V1 = Valencia Sate
P = Pacoima
T = Total

| TRADE NAME | CHEMICAL COMPOSITION CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| Kleen B<br><br>Industrial Chm. Supply<br>Chem-Tab Chemical Corp | Ethylene Glycol Monobutyl Ether<br><br>3% | | | | 21 lb.<br><br>V = 40<br>V1= 40<br>P = 36<br>T = 116 | <br><br>V = 38.6<br>V1 = 38.6<br>P = 38.6 |
| Mentor 28<br><br><br>Exxon | Chemically Neutral Middle Distillate, Petroleum 100%<br><br>64 742-30-9 | | | | V = 3002<br>V1 = N/A<br>P = 2001<br>T = 5003 | V = 550<br>V1 = -0-<br>P = 550 |
| Trim-Sol<br><br><br>Master Chemical | Petroleum Oil, Chlorinated Wax, Emulsifiers | | | | Max. daily 20 gal.<br>V = 250<br>V1 = 100<br>P = 200<br>T = 550 | <br>V = 50<br>V1 = 15<br>P = 30 |
| Excelene 5631<br><br>Stuart-Ironsides Inc<br>D. A. Stuart | Severly Hydrotreated Petroleum Oil | | | | V = 726<br>V1 = 242<br>P = 242<br>T = 1210 | V = 330<br>V1 = 330<br>P = 330 |
| Cutting Oil 2190<br><br><br>White & Bagley | Petroleum Distillates Middle Run 75%<br><br>64741-44-2 | Severly Hydrotreated Heavy Naphthenic Distillate 6%<br><br>64742-52-5 | Sulfurized Fatty Oil 11%<br>61790-49-6<br>Chlorinated Paraffin 2%<br>51788-76-9 | Sulfurized Olefin 6% | V = 2904<br>V1 = 1452<br>P = 2904<br>T = 7260 | V = 1210<br>V1 = 605<br>P = 1210 |
| Kerosene Solvent<br><br><br>Shell | Aliphatic Hydrocarbons<br>Cycloalipnatic Hydrocarbons<br>Alkylated Aromatic Hydrocarbons | | | | V = 420<br>V1 = N/A<br>P = 420<br>T = 840 | V = 210<br>V1 = -0-<br>P = 210 |
| Skydrol LD-4<br><br><br>Monsanto | Tributyl Phosphate<br><br><br>126-73-8 | Dibutyl Phenyl Phosphate<br><br><br>2528-36-1 | 2,6--Di-Tert-Butyl-P-Cresol<br><br><br>128-37-0 | | V = 5775<br>V1 = ----<br>P = ----<br>T = 5775 | V = 2310 inc.<br>V1 = -----<br>P = 210 |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Mobilarma 245<br><br>Mobil Oil Corp. | Aliphatic Petroleum Solvent 70% | Refined Mineral Oils 25% | | | 874<br>V = 400<br>V1 = 74<br>P = 400<br>T = 874 | 105<br>V = 100<br>V1 = 50<br>P = 100 |
| Pasa - Jell 101<br><br>Products Research and Chemical Corp. | Nitric Acid<br><br>7697-37-2 | Phosphuric Acid<br><br>7664-38-2 | Hydrofluosilicic Acid<br><br>16961-83-4 | | 90<br>V = 90<br>V1 = ---<br>P = ---<br>T = 90 | 11.5<br>V = 11.5<br>V1 = ----<br>P = ---- |
| HM406 Fluorescent Penetrant<br><br>Sherwin, Inc. | Hydrotreated Refined Aliphatic Oil | | | | V = 650<br>V1 = ----<br>P = 650<br>T = 1300 | 217<br>V = 220<br>V1 = ----<br>P = 220 |
| Sodium Propionate<br><br>Spectrum Chemical | Sodium Propionate<br><br>137-40-6 | | | | 15<br>V = 7.5<br>V1 = ----<br>P = 7.5<br>T = 15 | 5<br>V = 5<br>V1 = ----<br>P = 5 |
| Sili Gel Base<br><br>Teledyne Dental Prod. | Silicone Material | | | | V = 20<br>V1 = 10<br>P = 10<br>T = 40 | 21<br>V = 10<br>V1 = 5<br>P = 5 |
| FR 83A Emulsifier<br><br>Sherwin, Inc. | Detergent | | | | V = 400<br>V1 = ----<br>P = 300<br>T = 700 | V = 200<br>V1 = ----<br>P = 100 |
| Technolube FB004 (Brayco 783 Has Same Mil-Spec)<br><br>Technolube Prod. | | | | | V = 3026.8<br>V1 = ----<br>P = 2086.2<br>T = 5113 | V = 300<br>V1 = ----<br>P = 300 |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Isopropyl Alcohol<br><br>Shell<br>PHO Chem | Iso Propyl<br><br>67-63-0 | | | | V<br>V1 Unknown<br>P<br>T | V<br>V1 Unknown<br>P |
| Dykem Remover And Thinner 138<br><br>Dykem Co. | Denatured Alcohol<br>80% | Butyl Acetate<br>20%<br><br>123-26-4 | | | V<br>V1<br>P Unknown<br>T | V<br>V1<br>P Unknown |
| **Kodak Industrex Fixer & Replenisher Part A**<br><br>Eastman Kodak | **Ammonium Thiosulfate**<br>**45%**<br><br>7783-18-8 | **Water**<br>**40%**<br><br>7732-18-5 | **Sodium Acetate**<br>**5%**<br><br>127-09-3 | **Acetic Acid**<br>**5%**<br>64-19-7<br>Sodium Sulfite 5%<br>7757-83-7 | 1387<br>V = 1387<br>V1 = ----<br>P = ----<br>T = 1387 | 444<br>V = 450<br>V1 = ----<br>P = ---- |
| Kodak Industrex Developer Replenisher Part A<br><br>Eastman Kodak | Water<br>60%<br><br>7732-18-5 | Potassium Sulfite<br>25%<br><br>10117-38-1 | Hydropuinune<br>10%<br><br>123-31-9 | Potassium Hydroxide<br>5%<br><br>1310-58-3 | 1365<br>V = 600<br>V1 = ----<br>P = 265<br>T = 1365 | 437<br>V = 220<br>V1 = ----<br>P = 200 |
| Deoxidizer 102-TNC<br><br>(ICP)<br>Industrial Chem.Prod. | Ferric Sulfate<br>40%<br><br>10028-22-5 | Nitric Acid<br>15%<br><br>7697-37-2 | | | 1355<br>V = 1355<br>V1 = ----<br>P = ----<br>T = 1355 | 390<br>V = 390<br>V1 = ----<br>P = ---- |
| Magna Flux/Magna Glo Carrier II<br><br>Magnaflux Corp. | White Mineral Oil<br>100%<br><br>8042-47-5 | | | | V = 1400<br>V1 = ----<br>P = ----<br>T = 1400 | V = 300<br>V1 = ----<br>P = ---- |
| 14A Magnaglo Powder<br><br>Magnaflux Corp. | Iron Oxide<br>75%<br><br>1317-61-9 | | | | V = 250<br>V1 = -0-<br>P = 250<br>T = 500 | V = 50<br>V1 = ----<br>P = 50 |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Freon TF<br><br>Baron Blakeslee | 1,1,2-Trichloro-1,2,2 Tri Fluoroethane<br>100%<br>76-13-1 | | | | V = 18,000<br>V1 = 14,674<br>P = 18,000<br>T = 50,674 | V = 3432<br>V1 = ----<br>P = 3432 |
| 1,1,1 Trichloroethane<br><br>Baron Blakeslee | 1,1,1 - Trichloro-ethane<br><br>71-55-6 | | | | V = 117,144<br>V1 = 100<br>P = 41,147 | V = 31,200<br>V1 = 50<br>P = 3,000 |
| Freon TMC<br><br>RHO-Chem<br>Holchem | 1,1,2 - Trichloro - 1,2,2 - Trifluorco-ethane<br>50.5<br>76-13-1 | Methylene Chloride<br>49.5<br><br>75-09-2 | | | V = 2983<br>V1 = 2980<br>P = 1193<br>T = 7156 | V = 600<br>V1 = 600<br>P = 600 |
| Stoddard Solvent<br><br>Shell<br>RHO-Chem<br>Baron Blakeslee | | | | | V = 14,545<br>V1 = ----<br>P = 29,091<br>T = 43,636 | V = 1200<br>V1 = ----<br>P = 20,000 |
| Freon PCA<br><br>DuPont | 1,1,2 - Trichloro - 1,2,2 - Trifluoro-ethane<br><br>76-13-1 | | | | V = 690<br>V1 = ----<br>P = ----<br>T = 690 | V = 690<br>V1 = ----<br>P = ---- |
| Acetone<br><br><br><br>67-64-1 | Acetone | | | | V = 422<br>V1 = 100<br>P = 170<br>T = 692 | V = 200<br>V1 = 30<br>P = 60 |
| **Sulfuric Acid**<br><br><br><br>Chase | **Sulfuric Acid**<br><br>7664-93-9 | | | | V = 265<br>V1 = ----<br>P = 176<br>T = 441 | V = 35.28<br>V1 = ----<br>P = 17.6 |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION: CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| CP296LL Activator<br>ALFA Grevaert, Inc. | Trisodium Phosphate<br>5%<br>7601-54-9 5.4lb | Glycerine<br>5%<br>56-81-5 5.4lb | Methylaminoethanol<br>5%<br>109-83-1 5.4lb | Sodium Sulfite<br>5%<br>7757-83-7 5.4lb | 108<br>V = 60<br>V1 = ----<br>P = 48<br>T = 108 | 9<br>V = 4.5<br>V1 = ----<br>P = 4.5 |
| 413 - F Thinner<br>Alpha Metals | Isopropyl Alcohol<br>70%<br>67-63-0 23.8lbs | IsoButyl Alcohol<br>20%<br>78-83-1 6.8lbs | 2-Methoxyethanol<br>10%<br>109-86-4 3.4lbs | | 34<br>V = 34<br>V1 = ----<br>P = ----<br>T = 34 | 34<br>V = 34 |
| Alpha 565 Cleaning Solvent<br>Alpha Metals | 1,1,1-Trichloroethane<br>90%<br>71-55-6 9.6lbs | Normal Propyl Alcohol<br>5%<br>71-23-8 .5lb | Diethylene Ether<br>5%<br>123-91-1 .5lb | | 10.6<br>V = 10.6<br>V1 = ----<br>P = ----<br>T = 10.6 | 10.6<br>V = 10.6 |
| Alpha 611-F Rosin Flux<br>Alpha Metals | Water White Gum Rosin<br>37%<br>Mixture 14.2lbs | Solvent-Alcohol Blend Plus Organic Activator<br>Mixture | | | 38.5<br>V = 35<br>V1 = 3.5<br>P = ----<br>T = 38.5 | 38.5<br>V = 5<br>V1 = 1<br>P = ---- |
| 610-F Flux<br>Alpha Metals | Isopropyl Alcohol<br>50%<br>67-63-0 44.3lbs | Diethanolamine<br>2%<br>111-42-2 1.8lbs | Terpene Solvent<br>24%<br>138-86-3 21.2lbs | Hexylene Glycol<br>24%<br>107-41-5 21.2lbs | 86.6<br>V = 80<br>V1 = 6.6<br>P = ----<br>T = 86.6 | 38<br>V = 20<br>V1 = 2<br>P = ---- |
| 810 Thinner<br>Alpha Metals | Isopropyl Alcohol<br>85%<br>67-63-0 22 | Terpene Solvent<br>15%<br>138-86-3 3.9 | | | 25.9<br>V = 20<br>V1 = 6<br>P = ----<br>T = 26 | V = 10<br>V1 = 3<br>P = ---- |
| Alodine 1200<br>Anchem Products | Chromic Acid<br>30%<br>11115-74-5 .3 | Sodium Fludborate<br>40%<br>.4 | Potassium Ferricyande<br>20%<br>.2 | Potassium Fluozirconate 10%<br>.2 | V = 60<br>V1 = 20<br>P = 38<br>T = 118 | V = 20<br>V1 = 20<br>P = 20 |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Alodine 1201<br><br>Amchem Products | Chromic Acid<br>1%<br><br>11115-74-5 3.4 | Potassium Ferricyanide<br>1%<br><br>3.4 | Hydrofluoric Acid<br>.1%<br><br>7664-39-3 .4 | | 336<br><br>V = 12<br>V1 = 11.6<br>P = 10<br>T = 33.6 | <br><br>V = 4<br>V1 = 4<br>P = 2 |
| Bernite 45 Flux Remover<br><br>Bernite Products | Metal Cleaning Compound | | | | V = 10<br>V1 = 5<br>P = 2<br>T = 17 | V = 2<br>V1 = 2<br>P = 1 |
| Crystal Clear Acrylic Spray Coating<br><br>Borden, Inc. | Heptane<br><br><br><br>110-54-3 | Iso Butane<br><br><br><br>75-28-5 | Xylene<br><br><br><br>1330-20-7 | Propane<br><br><br><br>74-98-6 | V = 595<br>V1 = ----<br>P = ----<br>T = 595 | V = 35 |
| | Acetone<br><br><br><br>67-64-1 | Toluene<br><br><br><br>108-88-3 | Ardmatic Naphtha | | V<br>V1<br>P<br>T Unknown | Unknown |
| Brayco Micronic 882 (Mil-H-83282A)<br><br>Bray Oil Co. | Synthetic Hydrocarbon Base - Formula - MXE75-8 | Tricresyl Phosphate<br>3% | | | V = 1600<br>V1 = 300<br>P = 47<br>T = 1947 | V = 800<br>V1 = 100<br>P = 20 |
| Methyl Ethyl Ketone (MEK)<br><br>Chase Chemical | Methyl Ethyl Ketone<br>100%<br>2 - Butanone<br><br>78-93-3 | 1/2 - 1/2% | | | 55<br><br>V = 8200<br>V1 = 800<br>P = 6096<br>T =15096 | V =<br>V1 |
| Freeze - It<br><br>Chemtronics | Dicyloro Difluoro-methane<br>100%<br><br>75-71-8 | .5 | | | 11<br><br>V = ----<br>V1 = 11<br>P = ----<br>T = 11 | <br><br>V = ----<br>V1 = 5<br>P = ---- |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Formula 409<br><br>Clorox Co. | Ethylene Glycol Monobutyl Ether<br>5%<br><br>111-76-2 .25lb | .3oz 1gal | | | 51<br>V = 260<br>V1 = 85<br>P = 41<br>T = 386 | V = 10<br>V1 = 10<br>P = 10 |
| Comp - Hold<br><br>Comp-Hold Products | Non - Ionic Resins<br>8% | Alcohol<br>64% | LPG Aerosol Grade<br>28% | 13 oz. can | 65<br>V = 65<br>V1 = ----<br>P = ----<br>T = 65 | V = 65<br>V1 = ----<br>P = ---- |
| Dow - Corning 200 Fluid<br>2 cst<br>5 cst<br>Dow-Corning 10 cst | Silicone<br><br>141-63-9<br>63143-62-9<br>63148-62-9 | | | | V = 12<br>V1 = 10<br>P = 2<br>T = 24 | V = 5<br>V1 = 4<br>P = 2 |
| Dow - Corning 1204 Prime Coat<br><br>Dow-Corning | VM&P Naphtha (Petroleum Distillates)<br>65%<br><br>108-88-3 2.5lb | Toluene (Methyl Benzene)<br>19% | | | 13<br>V = 13<br>V1 = ----<br>P = ----<br>T = 13 | 31<br>V = 13<br>V1 = ----<br>P = |
| Dow - Corning 3452 Chemical Resistant Valve Lubricant<br><br>Dow-Corning | Fluoro Silicone<br><br>Mixture | | | | V = 20<br>V1 = ----<br>P =<br>T = 20 | V = 20<br>V1<br>P = |
| Molykote 55M Grease<br><br>Dow-Corning | Lubricant | | | | V = 300<br>V1 = ----<br>P = 900<br>T =1200 | V = 50<br>V1 = ----<br>P = 100 |
| Dow - Corning 730RTV Fluoro Silicone Sealant<br><br>Dow-Corning | Silicone<br><br>Mixture | Acetoxysilane<br>5% | | | V = 135<br>V1 = 35<br>P = ----<br>T = 170 | V = 25<br>V1 = 5<br>P = ---- |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Dow-Corning 3145RTV Adhesive/Sealant<br><br>Dow-Corning | Silicone Elastomer<br><br>Mixture | Methoxysilane<br>7% | | | V = 125<br>V1 = 100<br>P = 10<br>T = 235 | V = 10<br>V1 = 10<br>P = 3 |
| Dow-Corning 4 Electrical Insulating Paste/Compound<br><br>Dow-Corning | Silicone<br><br>Mixture | Amophorous Silica<br>9%<br><br>7631-86-9 | | | V = 100<br>V1 = 100<br>P = ----<br>T = 200 | V = 20<br>V1 = 20<br>P = ---- |
| Krytox 240AC,AD,AZ<br><br>DuPont | Fluorine End-Capped Homopolymers of Hexafluoropropoylene Epoxide<br>85% | Telomers of Tetra-fluoroethlene<br>15% | | | V = 30<br>V1 = ----<br>P = ----<br>T = 30 | V = 30<br>V1 =<br>P = |
| Kodak Rapid Fixer, Part A<br><br>Eastman Kodak | Water<br>45%<br><br>7732-18-5 28 | Ammonium Thiosulfate<br>45%<br><br>7783-18-8 28 | Sodium Acetate<br>5%<br><br>127-09-3 3 | Boric Acid<br>5%<br><br>10043-35-3 3 | 62<br><br>V = ----<br>V1 = 62<br>P = ----<br>T = 62 | V = 62<br>V1 =<br>P = |
| Kodak Rapid Fixer, Part B<br><br>Eastman Kodak | Water<br>70%<br><br>7732-18-5 44.8 | Aluminum Sulfate<br>17%<br><br>10043-01-3 10.7 | Sulfric Acid<br>13%<br><br>7664-93-9 8.3 | | V = 64<br>V1 = ----<br>P =<br>T = 64 | V = 64<br>V1 = ----<br>P = |
| Bacostrip 93<br><br>Emerson & Suming | Methylene Chloride<br>70%<br><br>75-09-2 | Phenol<br>10%<br><br>108-95-2 | Formic Acid<br>10%<br><br>64-18-6 | | V = ----<br>V1 = 11<br>P = ----<br>T = 11 | V = ----<br>V1 = 11 |
| SM-1573-12 Spotmask<br><br>EPE Technology | Ammonia<br>1%<br><br>7664-41-7 | Ethylene Glycol<br>3.2%<br><br>107-21-1 | 1. oz 1 gal | | V = 10<br>V1 = ----<br>P = ----<br>T = 10 | V = 10<br>V1<br>P |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| .PI Bond 1536 A<br>.rane Products | Epoxy Resins<br>95% | Silicone Dioxide<br>5% | | | V = 150<br>V1 = ----<br>P = ----<br>T = 150 | V = 150 |
| .PI Bond 1536 B<br>.rane Products | Polyamides<br>100% | | | | V = 140 | V = 140 |
| .ralane 5750 A<br>.rane | 4,4 - Diphenylmethane Diisocyanate<br>90%<br>101-68-8 | Tolvene<br>10%<br>108-88-3 | | | V = 120 | V = 120 |
| .ralane 5750-B<br>.rane | Hydroxy Terminated Polyols<br>80% | Tolvene<br>10%<br>108-88-3 | Methyl Ethyl Ketone<br>10%<br>78-93-3 | Fluorescent Dye<br>1% | 100 GR<br>3167 GR CAN<br><1# | <1# |
| Brayco 756<br>.ray Products | Solvent Refined, Hydrotreated Middle Distillate<br>90%<br>64742-46-7 | TR-Phenyl Phosphate<br>.5%<br>115-86-6 | | | V = 4500<br>V1 = 800<br>P = 4500<br>T = 9800 | V = 1200<br>V1 = 350<br>P = 1600 |
| Brayco 933<br>.astrol | Aliphatic Hydrocarbon<br>75%<br>540-84-1 1172 | Tolvene<br>25%<br>108-88-3 391 | | | V = 1000<br>V1 = 200<br>P = 363<br>T = 1563 | V = 600<br>V1 = 45<br>P = 600 |
| Braycote Micronic 762<br>.astrol | Petrochem Solvent<br>64742-46-7 | | | | V = 220<br>V1 = 170<br>P = ----<br>T = 390 | V = 45<br>V1 = 45<br>P = ---- |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| 3-26 (Aerosol) #02004, 02005<br><br>CRC Chemicals | Petroleum Distillate 42%<br><br>64742-47-8 | 1,1,1-Trichloroethane 29%<br><br>71-55-6 | Inhibited Paraffinic Oil 25%<br><br> | Carbon Dioxide 4%<br><br>124-38-7 | V = 40<br>V1 = 5<br>P = 10<br>T = 55 | V = 10<br>V1 = 2<br>P = 3 |
| ReproDirect, PMS, CS, Special Inks<br><br>Sans Ink | Petroleum Hydrocarbon (Severly Hydro-treared) 10%<br><br>64742-46-7 | | | | V = 20<br>V1 = 40<br>P = ----<br>T = 60 | V = 5<br>V1 = 10<br>P = ---- |
| Handy Flux Type Tec<br><br>Handy and Herman | Fluorides (Potassium Salts of Fluorine) 32%<br><br> | Borates (Potassium Salts of Boron)<br><br> | | | V = 90<br>V1 = 15<br>P = ----<br>T = 105 | V = 20<br>V1 = 5<br>P = ---- |
| Once Hand Cleaner<br><br>Hardman Inc. | | | | | V = 200<br>V1 = 50<br>P = 200<br>T = 450 | V = 25<br>V1 = 10<br>P = 25 |
| Catalyst B-3 (HD5003)<br><br>Hysol (Dexter-Hysol) | 2,4,6-Tri(Dimethyla-minomethyl) Phenol 10%<br><br>90-72-2 | Tetraethylene Pentamine 20%<br><br>112-57-2 | Polyomine Salt 20%<br><br>51365-70-9 | Ethylene Glycol Monobutyl Ether 50%<br><br>111-76-2 | V = 5<br>V1 = ----<br>P = ----<br>T = 5 | V = 5<br>V1 = ----<br>P = ---- |
| EA 934NA Part A<br><br>Hysol | 4-Glycidyloxy-N,N-Diglycidylaniline 35%<br><br>5026-74-4 | Aluminum Powder 30%<br><br>7429-90-5 | Silica 15%<br><br>7631-86-9 | | V = 45<br>V1 = ----<br>P = 45<br>T = 90 | V = 20<br>V1 = ----<br>P = 20 |
| EA934NA Part B<br><br>Hysol | Diethylene Triamine 15%<br><br>111-40-0 | Triethylene Tetra-mine 10%<br><br>112-24-3 | | | V = 45<br>V1 = ----<br>P = 45<br>T = 90 | V = 20<br>V1 = ----<br>P = 20 |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| EA 9309 Part A<br><br>Hysol | Asbestos<br>2%<br><br>1332-21-4 | | | | V = 102<br>V1 = ----<br>P = ----<br>T - 102 | V = 102<br>V1<br>P = |
| Superdrop Debonder<br><br>Hysol | Acetonitrile<br>100%<br><br>75-05-8 | | | | V<br>V1<br>P<br>T | V |
| EA9309 Part B<br><br>Hysol | Alkylamines | | | | V = 85<br>V1 =<br>P =<br>T = 85 | V = 45<br>V1 = |
| Roll-A-Wash #2<br><br>I.C. Compound Co. | Stoddard Solvent<br><br>109-73-9 | 2-Ethoxyethanol<br><br>110-80-5 | | | V<br>V1<br>P Unknown<br>T | V<br>V1<br>P Unknown<br>T |
| Roll-A-Wash #1<br><br>I.C. Compound Co. | Stoddard Solvent<br><br>109-73-9 | | | | V<br>V1<br>P Unknown<br>T | V<br>V1<br>P Unknown |
| Glaze Free<br><br>I.C. Compound Co. | Stoddard Solvent<br><br>109-73-9 | 2-Ethoxyethanol<br><br>110-80-5 | Aromatic Hydrocarbon Distillates<br><br>109-73-9 | | V<br>V1 Unknown<br>P<br>T | V<br>V1 Unknown<br>P |
| 73X Reconditioner<br><br>Independent Ink Inc. | Isopropanol, Annydrous<br><br>67-63-0 | Butyl Carbitol<br><br>112-34-5 | Annydrol 200 (Contains)<br>Ethanol 86%<br>Isopropanol 9%<br>Hexone 1%<br>Methanol 4%<br>64-17-5 | | V<br>V1 Unknown<br>P<br>T | V<br>V1 Unknown<br>P |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| F-80 Rubber Lubricant Emulsion<br>International Prod. | | | | | Unknown | Unknown |
| #197 Rosin Flux<br>Kester | Isopropanol<br>56%<br>67-63-0 | Rosin<br>37%<br>8050-09-7 | | | Unknown | Unknown |
| Loctite Sealant Grade<br>Loctite Corp. | Dimethacrylate Esters<br>70% | Aliphatic Ester Plasticizer<br>19% | Tertiaryamine<br>2.4% | | Unknown | Unknown |
| Grade A<br>Loctite Corp. | Polyglycol Dimethacrylates<br>90% | Cumene Hydroperoxides<br>7% | Triackylamine<br>3% | | Unknown | Unknown |
| Grade AV<br>Loctit | Polyglycol Dimethacrylates<br>85% | Cumene Hydroperoxides<br>6% | Polyglycol Dioctoates<br>3%<br>Cellulose Acetate Butyrate 3%<br>Trialkylamine 3% | | .15<br>T - 1# | Unknown |
| Grade AVV<br>Loctite | Polyglycol Dimethacrylates<br>60% | Bis-Phenol A Fumarate Resin<br>35% | Cumene Hydroperoxides<br>3% | N,N-Dialkyltoluidines<br>1%<br>Saccharin<br>1% | T - 2# | Unknown |
| Locquic Primer T<br>Loctite | 1,1,1-Trichloroethane<br>90%<br>71-55-6 | Isopropyl Acohol<br>5% | N,N-Dialkyltoluidine<br>3% | Mercaptobenzothiazole<br>2% | | |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Locquic Primer N<br><br>Loctite | 1,1,1-Trichloroethane<br>97%<br><br>71-55-6 | Organo-Copper Salt<br>1% | Trialkylamine Carboxylate<br>1% | Aliphatic Carboxylic Acid<br>1% | | |
| Tak Pac Metered Mist Activator<br><br>Loctite | 1,1,2-Trichloro-1,2,2-Trifluoroethane<br>80%<br><br>76-13-1 | Butane<br>10% | Acetone<br>5% | Propane<br>3% | | |
| [illegible]<br><br>[illegible] | N,N-Dialkyltoluidine<br>1% | Hydroquinone<br><br>123-31-9 | [illegible] | [illegible] | [illegible] | [illegible] |
| Loncoterge TMS+<br><br>London Chemical | 1,1,2-Trichloro-1,2,2-Trifluoroethane<br><br>76-13-1 4108 | Methyl Alcohol<br>4%<br><br>67-56-1 183 | Ethyl Alcohol<br>4%<br><br>64-17-5 183 | Isopropyl Alcohol<br>1%<br>67-63-0<br>Nitromethane 1%<br>79-24-3 46 | V = 1700<br>V1 = 650<br>P = 2150<br>T = 4566 | V = 660<br>V1 = 300<br>P = 660 |
| 3M-Cyx Developer<br><br>3M | Water<br>75%<br><br>7732-18-5 | Sodium Sulfite<br>5%<br><br>7757-83-7 | Potassium Sulfite<br>5%<br><br>10117-38-1 | Hydroquinone<br>5%<br><br>123-31-9 | | |
| [illegible]<br><br>[illegible] | Potassium Hydroxide<br>5%<br><br>1310-58-3 | Sodium Thiocyanate<br>5%<br><br>540-72-7 | [illegible] | 5.5 oz. 1 gal. | [illegible] | [illegible] |
| 3M-Cyx Film Plate Stabilizer<br><br>3M | Water<br>90%<br><br>7732-18-5 | Potassium Phosphate<br>5% (Monobasic)<br><br>7778-77-0 | Potassium Phosphate<br>5% (Dibasic)<br><br>7758-11-4 | | | |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| 3M - "R" Scratch Remover<br>3M | Water<br>60%<br>7732-18-5 | Stoddard Solvent<br>30%<br>8052-41-3 | Potassium Hydroxide<br>2%<br>1310-58-3 | Sodium Silicate,<br>6% | | |
| Scotch Seal 801<br>3M | | | | | | |
| 3M Brand Liquid Lith Developer-LLD Part A<br>3M | Sodium Methanol Bisulfite<br>30%<br>870-72-4 | Triethylene Glycol<br>30%<br>112-27-6 | Hydroquinone<br>20%<br>123-31-9 | Water<br>10%<br>7732-18-5 | | |
| | Sodium Sulfite<br>5%<br>7757-83-7 | Boric Acid<br>5%<br>10043-35-3 | | 7.4 oz. 1 gal. | | |
| 3M Brand Liquid Lith Developer LLD Part B<br>3M | Water<br>70%<br>7732-18-5 | Potassium Carbonate<br>20%<br>584-08-7 | Sodium Hydroxide<br>5%<br>1310-73-2 | Sodium Bromide<br>5%<br>7647-15-6 | | |
| 3M Image-N-Transfer Developer<br>3M | Sodium Metasilicate<br>2%<br>6834-92-0 | Sodium Carbonate<br>1%<br>497-19-8 | Water<br>97%<br>7732-18-5 | | | |
| 3M Fountain Concentrate<br>3M | Water<br>70%<br>7732-18-5 | Zinc Salt<br>25% | Phosphoric Acid(75%)<br>3%<br>7664-38-2 | Ammonium Dichromate<br>2% | | |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Electrolyte Formula MSC 1<br><br>Marking Methods Inc. | | | | | | |
| Wonder Wash<br><br>Mastercloth Industries | (May have Glycol Ether - ?) | | | | | |
| **Skydrol 500B-4**<br><br>Monsanto | **Tributyl Phosphate**<br>**126-73-8** | **Dibutyl Phenol Phosphate**<br>**2528-36-1** | | | V = 660<br>V1 = 100<br>P = 300<br>T =1060 | V = 660<br>V1 = 60<br>P = 120 |
| Cee-Bee A-202<br><br>[illegible] | Methylene Chlororide<br>75%<br>75-09-2 | Phenol<br>15%<br>108-95-2 | Formic Acid<br>10%<br>64-18-6 | | No longer used product substitution | |
| Oakite Aluminum Cleaner 164<br><br>Oakite Products | Sodium Carbonate<br>35%<br>497-19-8 | Trisodium Phosphate<br>30%<br>10101-89-0 | Tetrasodium Pyrophosphate<br>20%<br>7722-88-5 | Sodium Metasilicate<br>10%<br>6834-92-0<br>Sodium Silicate 5%<br>1344-09-8 | V = 300<br>V1 = ----<br>P = 300<br>T = 600 | V = 100<br>V1 = ----<br>P = 100 |
| Brite Boy Metal Polish<br><br>Olde Tyme Prod., Inc. | Ammonia<br>7664-41-7 | Oxalic Acid<br>144-62-7 | | | V = 40<br>V1 = ----<br>P = 5<br>T = 45 | V = 10<br>V1 = ----<br>P = 10 |
| **Torque Seal F-900**<br><br>Organic Products Co. | **Methanol**<br>37%<br>67-56-1 | **Ethanol**<br>9%<br>64-17-5 | | | V<br>V1<br>P<br>T | V<br>V1<br>P |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Chloroethene SM<br><br>Parker | 1,1,1-Trichloroethane 96%<br><br>71-55-6 | Diethylene Ether 2%<br><br>123-91-1 | 1,2-Butylene Oxide 1%<br><br>106-88-7 | <br><br>75-52-5 | V = 12 Fl. oz | 2 oz. |
| Permabond 910 Adhesive<br><br>Permabond International | Methyl-2-Cyanoacry-late 90%<br><br>137-05-3 | | | | V = 5<br>V1 = 1<br>P = 2<br>T = 8 | V = (1#<br>V1 = ----<br>P (1# |
| Eccobond 45<br><br>Polytek Freeze Inc. | Epichlorohydrin<br><br>106-89-8 | | | | | |
| PR-1560-MIC Part A<br><br>Products Research | Polymethylene Polyphenylene Polyisocyanate (contains)<br>9016-87-9 | Monomeric 4,4' Diphenyl Methane Diisocyanate<br>101-68-8 | Gamma-Mercaptopro-pyl-Trimethoxy-silane<br>4420-74-0 | | | |
| PR-1560-MK Part B<br><br>Products Research | MEK<br><br>108-88-3 | VM&P Naphtha<br><br>8032-32-4 | Ethyl Benzene<br><br>100-41-4 | N-Butyl Acetate<br><br>123-86-4 | | |
| PR-1422-G Class A<br><br>Products Research | Calcium Bichromate 5%<br>Soluble Metallic-chromate 3% | Tolvene 7% | MEK 5%<br><br>108-88-3 | Dimethyl Formamide 3% | | |
| PR-1422-G Class B<br><br>Products Research | Calcium Dichromate 4% | Tolvene 5% | Dimethyl Formamide 3% | | | |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Mold Release<br><br>RAM Chemicals | Aliphatic Hydrocarbon<br>100%<br><br>64742-88-7 | | | | V = 10<br>V1 = ----<br>P = 5<br>T = 15 | V = <1#<br>V1 = ----<br>P = <1# |
| Break Through<br><br>Roberts and Porter | Aliphatic Petroleum Naphtha<br>50%<br><br>64742-88-7 | Aromatic Hydrocarbon Solvent<br>50%<br><br>64742-95-6 | | | | |
| Glaze-A-Way<br><br>Roberts and Porter | 2-Butoxyethanol<br>30%<br><br>111-76-2 | Aromatic Hydrocarbon<br>25%<br><br>64742-95-6 | | | | |
| T. T. Isofount<br><br>Roberts and Porter | Acetic Acid<br>3%<br><br>64-19-7 | Phosphoric Acid<br>2%<br><br>7664-38-2 | Chromium Salts (CR+3 only)<br>2%<br><br>7440-47-3 | 1,2 Benzisothiazolin<br>1%<br><br>26-34-33-5 (81-07-2) | 1.5 oz<br><br>1 gallon | |
| D2009 TMC Cleaner<br><br>Application Products | Freon TF<br>50%<br><br>76-13-1 | Methylene Chloride<br>45%<br><br>75-9-2 | Carbon Dioxide<br>5%<br><br>124-38-9 | | | |
| Tapmatic Cutting Fluid #2<br><br>Tapmatic Corp. | Mixed Fatty Acid Esters<br>25% | Petroleum Distillate<br>75% | | | | |
| TC- 285<br><br>Technform Labs | | | | | | |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| A-1. Parts A & B<br>Armstrong Products | Expoxy Resin & Adhesive | | | | | |
| Acetic Acid<br>Eastman Kodak | Acetic Acid<br>64-19-7 | | | | V = 10<br>V1 = 20<br>P = ----<br>T = 30 | V =<br>V1 = |
| Adhesive Sealant #290<br>Loctite Corp. | Polyglycol Dimeth-acrylates<br>90% | Hydroperoxides<br>4% | Sulfimide<br>3% | N,N Dialkyltolvidines<br>1% | | |
| Bravo Micronic 883<br>Bray Products | Triphenyl Phosphate<br>.2%<br>115-86-6 | | | | V = 160<br>V1 = ----<br>P = 175<br>T = 335 | V = 100<br>V1 = ----<br>P = 100 |
| Caustic Soda<br>Chase | Sodium Hydroxide<br>1310-73-2 | | | | V = 500<br>V1 = ----<br>P = 500<br>T =1000 | V = 200<br>V1 = ----<br>P = 200 |
| Cellulose Nitrate Gloss Lacquer<br>Hoppers Co. | Butyl Acetate | Isopropyl Alcohol | N Butanol<br>71-36-3 | MEK | V = 10<br>V1 = ----<br>P = ----<br>T = 10 | V = 10 |
| | Tolvene | Butyl Cellosolve | MIBK 108-10-1<br>MIBC<br>VM&P - Naphtha | Lead<br>7439-92-1<br>Chromium<br>7440-47-3 | V<br>V1 = 541<br>P =<br>T = 541 | V1 = 72 |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Solvent Soluble Holding Web<br><br>[illegible] | 1,1,1-Trichloroethane<br>65%<br><br>71-55-6 | | | | V = 15<br>V1 = 5<br>P = 5<br>T = 25 | V = 5<br>V1 = 35<br>P = 5 |
| Sili-Gel (Catalyst)<br><br>Sel [illegible] Metz | Organotin<br>95% | | | | | |
| E-Cast F-28<br><br>Unitika Resin | Epoxy Resin<br><br>25068-38-6 | | | | | |
| Hardener 380<br><br>Unitika Resin | Catalyst<br><br>60-56-0 | Odormask<br><br>61790-23-6 | | | V = 5<br>V1 = ----<br>P = ----<br>T = 5 | V = 3 |
| Capping Compound<br><br>United States Prod. | | | | | V = 6556<br>V1 = 50<br>P = 100<br>T = 6706 | V = 1000<br>V1 = 10<br>P = 20 |
| 3M Cleaner Conditioner<br><br>3M | Water<br>80%<br><br>7732-18-5 | Stoddard Solvent<br>9%<br><br>8052-41-3 | Phosphoric Acid<br>2%<br><br>7664-38-2 | Formaldehyde<br>.1%<br><br>50-00-00 | | |
| Cleaner Formula APC<br><br>Marking Methods | | | | | | |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| D-305 Cleaner/ Degreaser<br><br>Direct Image Corp. | Water<br>80%<br><br>7732-18-5 | Nitric Acid<br>3%<br><br>7697-37-2 | Aluminum Silicates<br>17% | | V = 350<br>V1 = ----<br>P = 600<br>T = 950 | V = 150<br>V1 = ----<br>P = 200 |
| D-325 Tray Cleaner<br><br>Direct Image Corp. | Sulphoric Acid<br>5% | Organic Bichromates<br>10% | | | V = 400<br>V1 = ----<br>P = 500<br>T = 900 | V = 200<br>V1 = ----<br>P = 200 |
| Propane | Dimethyl Methane<br>65% (Min.) | Ethane<br>4% | Propylene<br>2.5% | C4 & Higher Hydro-carbons<br>2.5% | V = 225<br>V1 = 50<br>P = 250<br>T = 525 | V = 50<br>V1 = ----<br>P = 100 |
| 3135A Epoxy<br><br>Crest Products | Bisphenol A<br><br>80-05-7 | | | | V = 50<br>V1 = 20<br>P = ----<br>T = 70 | V = 10<br>V1 = 5<br>P = ---- |
| Dange Oil-Red<br><br>Dewey Instruments | Kerosene<br>91%<br><br>8008-20-6 | Carbon Tetrachloride<br>9%<br><br>56-23-5 | Red Dye<br>.01% | | V = 20<br>V1 = ----<br>P = 20<br>T = 40 | V = 7<br>V1 = ----<br>P = 7 |
| G - P Sudsy Ammonia<br><br>Georgia-Pacific | Ammonia<br>5% | | | | V = 700<br>V1 = 150<br>P = 500<br>T = 1350 | V = 50<br>V1 = 25<br>P = 50 |
| Gentsolve DM Azeotrope<br><br>Allied<br>Micro Care Chem Corp | Trichlorotrifluoro-ethane<br>51%<br><br>76-13-1 | Methylene Chloride<br>49%<br><br>75-09-2 | | | V = 300<br>V1 = 257<br>P = 150<br>T = 707 | V = 50<br>V1 = 50<br>P = 20 |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| HD 3615<br>Hysol Div., Dexter Corp. | 4,4'-Diaminodiphenyl-methane (P,P'-Methylenedia-niline)<br>101-77-9 | | | | V = 10<br>V1 = 15<br>P = ----<br>T = 25 | V = .5<br>V1 = 1<br>P = ---- |
| Humiseal 1B31<br>Columbia Chase | Aromatic Solvent<br>50% | Ketone Solvent<br>15% | | | V = 15<br>V1 = 27<br>P = ----<br>T = 42 | V = 8 oz.<br>V1 = 1#<br>P = |
| Humiseal Thinner #521<br>Columbia Chase | Aromatic Solvent<br>100% | | | | V = 10<br>V1 = 15<br>P = ----<br>T = 25 | V = 1<br>V1 = 2<br>P = |
| Humiseal Thinner #535<br>Columbia Chase | Aromatic Solvent<br>100% | | | | V = 10<br>V1 = 15<br>P = ----<br>T = 25 | V = 2<br>V1 = 2<br>P = |
| 5606F Hydraulic Oil<br>Technolube | Light Petroleum Fractions | Viscosity Index Improver | Oxidation Inhibiter | TCP Anti-wear Agents | V = 3,500<br>V1 = ----<br>P = 1,000<br>T = 4,500 | V = 2,772<br>V1 = ----<br>P = 500 |
| Hydrochloric Acid<br>7647-01-0 | Hydrogen Chloride<br>38%<br>7647-01-0 | Water<br>7732-18-5 | | | V = 50<br>V1 = ----<br>P=<br>T= | V = 7 |
| 73X Marking Ink<br>Independent Ink Inc. | Isopropyl Alcohol<br>30%<br>67-63-0 | | | | | |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| LPS 2 General Purpose Lubricant<br>Holt Lloyd | Aliphatic Hydrocarbons 70%<br>64742-96-7 | Petroleum Oil 10% | | | V = 2000<br>V1 = ----<br>P = 3500<br>T = 5500 | V = 300<br>V1 = ----<br>P = 300 |
| Mobil Vacuum Pump Oil<br>Mobil Oil | Refined Mineral Oil 100% | | | | V = 1200<br>V1 = 800<br>P = 1200<br>T = 3200 | V<br>V1<br>P |
| Mold Lubricant<br>Mitaro, Inc. | Halogenated Hydrocarbons 95% | Glycol Fluid 5% | | | V<br>V1<br>P Unknown<br>T | V<br>V1<br>P Unknown |
| Molycote BR-2-Plus Grease<br>Dow Corning | | | | | V = 60<br>V1 = 20<br>P = ----<br>T = 80 | V = 10<br>V1 = 10<br>P = ---- |
| Molykote 33 Grease<br>Dow-Corning | | | | | V = 60<br>V1 = 30<br>P = ----<br>T = 90 | V = 10<br>V1 = 10<br>P = ---- |
| Neutralizing Solution<br>Beran Diagnostics | Methanol<br>67-56-1 | Water<br>7732-18-5 | | | V<br>V1<br>P Unknown<br>T | V<br>V1<br>P Unknown |
| Nitrogen LN2/GN2<br>727-5764 | | | | | V = 3,000<br>V1 = 3,200<br>P = 4,800<br>T =11,000 | V = 800<br>V1 = 400<br>P = 800 |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| PC16-1 Part A<br><br>Lysc. Div.,Dexter Corp | Butyl Glycidyl Ethel Modified Epoxy Resin 6%<br>1426-08-6 | | | | | |
| PC16-1 Part B<br><br>Lysc. Div,Dexter Corp | Reactive Polyamide 100%<br>37189-83-6 | | | | | |
| Pro-Seal 870-B 1/2<br><br>Products Research and Chemical | MEK<br><br>78-93-3 | Tolvene<br><br>108-88-3 | Phenol Polymer with Formaldehyde<br><br>9003-35-4 | | | |
| PRO3 Fountain Solution<br><br>Fin. ds Research Pa | Iso Prophy Alcohol 9%<br>41bs | Ethylene Glycol Mono Butyl Ether 9%<br>41bs | | | V = 20<br>V1 = 19<br>P = 20<br>T = 49 | V = 10<br>V1 = 2<br>P = 10 |
| Redu ing Varnish<br><br>Burk Graphics | Linseed Oil | | | | V = 20<br>V1 = ----<br>P = 15<br>T = 35 | V = 5<br>V1 = ----<br>P = 5 |
| Sila tic 734 RTV Adhe ive Sealant<br><br>Dow-Corning | Acetoxy Silane 5% | | | | V = 25<br>V1 = 15<br>P = 40 | V = 5<br>V1 = 5<br>P = --- |
| Salt<br><br> | Sodium Chloride<br><br>7647-14-5 | | | | | |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION: CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| [illegible] Dichromate<br>[illegible]<br>[illegible] | Sodium Dichromate<br>10588-01-9 | | | | 2.52<br>V = 60<br>V1 = ----<br>P = 60<br>T = 120 | V = 20<br>V1 = ----<br>P = 20 |
| [illegible] Hydroxide | Sodium Hydroxide<br>1310-73-2 | | | | V = 300<br>V1 = ----<br>P = 350<br>T = 650 | V = 50<br>V1 = ----<br>P = 50 |
| Sodium Sulfite, Anhydrous<br>[illegible] Kodak | 7757-83-7 | | | | 2.633<br>V = ----<br>V1= 55<br>P = ----<br>T = 55 | V = ----<br>V1 = 2<br>P = ---- |
| Solvene<br>[illegible]<br>T Baker | 108-88-3 | | | | V = ----<br>V1 = 262<br>P = ----<br>T = 262 | V = ----<br>V1 = 73<br>P = ---- |
| Vessel Solution Part A<br>Reagent | Pyridine/Sulfur Dioxide Mixture<br>110-86-1 | | | | unknown | unknown |
| Vessel Solution Part B<br>Reagent | Karl Fischer Reagent in Menthanol | | | | unknown | unknown |
| Wonder Wash<br>[illegible]<br>Industries | Glycol Ether | Detergents | Citrus Oils | | unknown | unknown |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Zip Aerosol D-5675 MC Cleaner<br>Titan, Inc. | 1,1,1-Trichloroethane<br>75%<br>71-55-6 | Dichloro Fluoro Methane<br>25%<br>75-71-8 | | | V = 50<br>V1 = 10<br>P = ----<br>T = 60 | V = 50<br>V1 = 5<br>P = ---- |
| Scotch-Grip Brand 4475 Plastic AD<br>3M | MEK<br>50%<br>78-93-3 | Polyurethane Resin<br>20% | Vinyl Chloride/Vinyl<br>20%<br>25085-82-9 | Acetate/Maleic Anhydride Terpolymer<br>108-31-6 | V1 = .15 oz. | V1 = 1 oz. |
| Scotch-Weld Brand Structural Adhesive 2216 Part A<br>3M | Aliphatic Amine<br>60% | | | | | |
| Scotch-Weld Brand Structural Adhesive 2216 Part B<br>3M | Bisphenol A Epoxy Resin<br>70% | | | | | |
| Scotch-Clad Brand Fuel Resistant Coating 776<br>3M | Methyl Iso Butyl Ketone<br>6% | Ethyl Alcohol<br>6% | | | | |
| Prime Coat P527E Part A<br>Hoppers Fab-Coat, Inc. | Strontium Chromium<br>20% (As Chromate) 5%<br>7789-06-2<br>Amorphous Silicon Dioxide 5%<br>61790-53-2 | MEK<br>10%<br>78-93-3 | TALC<br>14807-96-6 10%<br>Titanium Dioxide<br>13463-67-7 5%<br>Crystalline Silicon Dioxide 14808-60-7 .5 | Tolvene<br>5%<br>108-88-3 | V = 595<br>V1 = ----<br>P = ----<br>T = 595 | V = 70<br>V1 = ----<br>P = ---- |
| Prime Coat P527E Part B<br>Hoppers Fab-Coat, Inc. | Tolvene<br>20%<br>108-88-3 | Isopropyl Alcohol<br>60%<br>67-63-0 | N-Propyl Alcohol<br>10%<br>71-23-8 | | V = 600<br>V1 = ----<br>P = ----<br>T = 600 | V = 65<br>V1 = ----<br>P = ---- |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| per Lube | Synthetic Hydrocarbons<br>Base Fluid 9003-29-6<br>Teflon<br>9002-84-0<br>Fumed Silica<br>68611-44-9 | | | | V = 1200<br>V1 = ----<br>P = 500<br>T = 1700 | V = 300<br>V1 = ----<br>P = 200 |
| rma Wash<br>Division | Ammonium Sulfite<br>20%<br>10196-04-0 | Sodium Fulfite<br>7% | | | V = 400<br>V1 = ----<br>P = 400<br>T = 800 | V = 150<br>V1 = ----<br>P = 150 |
| st Setting Acrylate<br>rweld 7993-A/B<br>rdman | Methyl Methacrylate<br>55%<br>80-62-6 | Denzyl Peroxide<br>Plasticizer | | | unknown | unknown |
| Silicone Adhesive/<br>ealant 97914<br>rdman | Silicone/Acetoxy-<br>silane | | | | unknown | unknown |
| -36 Aerosol 3005<br>SC Chemical<br>Chem | Petroleum Distillate<br>67%<br>64742-47-8 | Carbon Dioxide<br>124-38-9 | Inhibited Paraffinic<br>Oil<br>29% | | V = 25<br>V1 = ----<br>P = 10<br>T = 35 | V = 5<br>V1 = ----<br>P = ---- |
| ast Remover Con-<br>entrate<br>SC Chemical | Phosphoric Acid<br>75%<br>62.4%<br>7664-38-2 | 2 Butoxy Ethanol<br>(Ethylene Glycol<br>Monobutyl Ether)<br>111-76-2 | | | V = 60<br>V1 = ----<br>P = 30<br>T = 90 | V = 20<br>V1 = ----<br>P = 10 |
| olyKote 321R Lub<br>ow-Corning | Methylene Chloride<br>(Dichloromethane)<br>13%<br>75-09-2 | 1,1,1-Trichloroethane<br>40%<br>71-55-6 | Butylacetate<br>(N-Butyl Acetate)<br>123-86-4 | | V = 600<br>V1 = ----<br>P = 1200<br>T = 1800 | V = 200<br>V1 = ----<br>P = 500 |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Edoc...t 1615 B<br><br>Fura. | Ethanol, 2-Amino<br>10%<br><br>141-43-5 | 1,2-Ethanediamine, N-Methyl-(2-Aminoethyl)<br>45%<br><br>111-40-0 | P,P'-Isopropylidene Diphenol<br>45%<br><br>80-05-7 | | | |
| Dolp: Spray<br>AC-2 75<br><br>Conn. Dolph | V,M,&P Naphtha<br>6%<br><br>64742-48-9 | Xylene<br>20%<br><br>1330-20-7 | Butyl Alcohol<br>17%<br><br>71-36-3 | | | |
| Chico A Sehling Compound<br><br>Prod. -Minds ECM Div. | Aluminum Oxide<br>1344-28-1<br>Calcium Oxide<br>1305-78-8 | Ferric Oxide<br>1309-37-1<br>Ferrous Oxide<br>1345-25-1 | Silicone Dioxide<br>7631-86-9<br>Titanium Dioxide<br>13463-67-7 | Portland Cement<br>65997-15-1 | | |
| Tool Makers Blue Spra. Ink 40-670<br><br>Idea. Industries | Magnesium Silicate as a Dust 1%<br>14807-96-6<br>Tolvene 10%<br><br>108-88-3 | Xylene<br>under 5%<br>1330-20-7<br>MEK under 5%<br><br>78-93-3 | MIBK<br>under 5%<br>108-10-1<br>IsoButyl Alcohol<br>under 5%<br>73-83-1 | N-Butanol<br>under 5%<br>71-36-3<br>Acetone 30%<br><br>67-64-1 | V = 250<br>V1 = 15<br>P = 300<br>T = 565 | V = 80<br>V1 = 10<br>P = ---- |
| | Ethyl-Ethoxypropio-nate, under 5%<br><br>763-69-9 | Methylene Chloride<br>25%<br><br>75-09-2 | Propane<br>15%<br><br>74-98-6 | | | |
| Dip Aerosol L-345 Mold Release<br><br>Dip-Chem | Methane, Dichlorodi-fluoro<br><br>75-71-8 | Methane, Trichloro-fluoro<br><br>75-69-4 | Polyalkylene Glycol Fluid | | V = 80<br>V1 = 5<br>P = ----<br>T = 85 | V = 10<br>V1 = 1<br>P = ---- |
| Aip Aerosol Stud Mold Release<br><br>...Chem | Methane, Dichlorodi-fluoro<br><br>75-71-8 | Methane, Trichloro-fluoro<br><br>75-69-4 | Polydimethyl Siloxane<br><br>63148-62-9 | | V = 40<br>V1 = 5<br>P = ----<br>T = 45 | V = 10<br>V1 = 2<br>P = ---- |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMU OF MATE AT ANY (PO |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Pro-Seal 890B<br><br>Products Research/Chem | Methyl Benzene (Tolvene) under 5%<br><br>108-88-3 | Phenol Formaldehyde Resin (Phenolic Resin) under 5%<br><br>9003-35-4 | | | | |
| PR-1560-MK Part C<br><br>Products Research & Chemical | MEK<br><br>78-93-3 | | | | | |
| Dubl-Chek Penetrants RC-65<br><br>Sherwin Inc. | Mixture Esters, Phosphate/Phthalate Plasticizing Agents<br><br>27961-21-5<br>68515-49-1 | Aliphatic Oil Refined Aydrotreated Middle Distillate<br><br>64742-46-7 | | | V = 1000<br>V1 = ----<br>P = 1000<br>T = 2000 | V =<br>V1 =<br>P = |
| I-319 Fluorescent Penetrant<br><br>Sherwin Inc. | Ethoxylated Nonyl-phenol<br>15%<br><br>9016-45-9 | | | | V = 800<br>V1 = ----<br>P = 750<br>T = 1550 | V =<br>V1 =<br>P = |
| Dubl-Chek D113G Developer<br><br>Sherwin Inc. | Sodium Nitrate under 5%<br><br>7632-00-0 | | | | V = 180<br>V1 = ----<br>P = 150<br>T = 330 | V =<br>V1 =<br>P = |
| Dubl-Chek D100 Developer<br><br>Sherwin, Inc. | Hydrocarbon Propellant (LPG)<br><br>68476-85-7 | Isopropyl Alcohol<br><br>67-63-0 | | | V = 200<br>V1 = ----<br>P = 220<br>T = 420 | V =<br>V1 =<br>P = |
| Dubl-Chek Clearner/ Remover DR60<br><br>Sherwin, Inc. | Hydrocarbon Propellant (LPG)<br><br>68476-85-7 | Light Petroleum Distillate<br><br>64742-48-9 | | | V = 245<br>V1 = ----<br>P = 240<br>T = 485 | V =<br>V1 =<br>P = |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Kodak Dektol Developer (Single Powder)<br>Eastman Kodak | Sodium Carbonate, Monohydrate 50%<br>5968-11-6 | Sodium Sulfite 35%<br>7757-83-7 | Hydroquinone 6%<br>123-31-9 | P-Methylaminophenol Sulfate 5%<br>55-55-0<br>Sodium Tetraphosphate 5%<br>14986-84-6 | V = 100<br>V1 = 150<br>P = ----<br>T = 250 | V = 25<br>V1 = 15<br>P = ---- |
| Kodak Developer D-76<br>Eastman Kodak | Sodium Sulfite 85%<br>7757-83-7 | Hydroquinone 5%<br>123-31-9 | P-Methylaminophenol Sulfate 5%<br>55-55-0 | Sodium Tetraborate, Pentahydrate 5%<br>1330-43-4 | V = 200<br>V1 = 210<br>P = ----<br>T = 410 | V = 15<br>V1 = 15<br>P = ---- |
| Kodak Replenisher D-76<br>Eastman Kodak | Sodium Sulfite 7757-83-7 75%<br>Sodium Tetraborate, Pentahydrate 10%<br>1330-43-4 | Hydroquinone 6%<br>123-31-9 | P-Methylaminophenol under 5%<br>55-55-0 | Diethylene Triamine Pentaacetic Acid Pentasodium Salt under 5%<br>140-01-2 | V = 200<br>V1 = 310<br>P = ----<br>T = 510 | V = 20<br>V1 = 20<br>P = ---- |
| Kodak HC-110 Developer/Replenisher<br>Eastman Kodak | Diethanolamine-Sulfur Dioxide Complex 35%<br>Water 20%<br>7732-18-5 | Diethanolamino 10%<br>111-42-2<br>Diethylene Glycol 5%<br>111-42-6 | 2-Aminoethanol 5%<br>141-43-5 | Hydroquinone 9%<br>123-31-9 | V = 305<br>V1 = 400<br>P = ----<br>T = 705 | V = 40<br>V1 = 20<br>P = ---- |
| Kodak T-Max Developer<br>Eastman Kodak | Diethanolamine Sulfur Dioxide 45%<br>63149-47-3 | Water 40%<br>7732-18-5 | Hydroquinone 4%<br>123-31-9 | Sodium Bisulfite 5%<br>7631-90-5 | V = 410<br>V1 = 450<br>P = ----<br>T = 860 | V = 40<br>V1 = 20<br>P = ---- |
| Fuser Oil for Kodak Starmate 500<br>Eastman Kodak | Silicone Oils 100%<br>63148-62-9 | | | | V = 180<br>V1 = 150<br>P = ----<br>T = 330 | V = 10<br>V1 = 5<br>P = ---- |
| Fuser Oil, Functional<br>Eastman Kodak | Organopolysiloxane 100% | | | | V = 80<br>V1 = 125<br>P = ----<br>T = 205 | V = 5<br>V1 = 1<br>P = ---- |

## ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Kodak Brushing Lacquer #4<br><br>Eastman Kodak | Ethyl Alcohol 40%<br><br>64-17-5 | Butyl Acetate 25%<br>123-86-4<br>Butyl Alcohol 13%<br><br>71-36-3 | Naphtha #1 5%<br>8030-30-6<br>Acetone 5%<br><br>67-64-1 | Lamp Black 5% | V = 25<br>V1 = 35<br>P = ----<br>T = 60 | V = 5<br>V1 = 5<br>P = ---- |
| Kodak Chromium Intensifier Part A<br><br>Eastman Kodak | Potassium Chloro-chromate 100%<br><br>16037-50-6 | | | | V = 70<br>V1 = 60<br>P = ----<br>T = 130 | V = 5<br>V1 = 5<br>P = ---- |
| Kodak Chromium Intensifier Part B<br><br>Eastman Kodak | Sodium Metabisulfite 100%<br><br>7681-57-4 | | | | V = 75<br>V1 = 60<br>P = ----<br>T = 135 | V1 = 5<br>V1 = 5<br>P = ---- |
| Kodak Farmer's Reducer Part A<br><br>Eastman Kodak | Potassium Ferricy-anide N 100%<br><br>13746-66-2 | | | | V = 30<br>V1 = 45<br>P = ----<br>T = 75 | V = 7<br>V1 = 7<br>P = ---- |
| Kodak Farmer's Reducer Part B<br><br>Eastman Kodak | Sodium Thiosulfate, Anaydrous 100%<br><br>7772-98-7 | | | | V = 30<br>V1 = 45<br>P = ----<br>T = 75 | V = 8<br>V1 = 8<br>P = ---- |
| Kodak Photo-Flo 200 Solution<br><br>Eastman Kodak | Water 60%<br><br>7732-18-5 | Propylene Gycol 25%<br><br>57-55-6 | P-Tertiary-Octyl-phenoxy Polyethyl Alcohol 10%<br><br>9002-93-1 | | V = 190<br>V1 = 220<br>P = ----<br>T = 410 | V = 30<br>V1 = 25<br>P = ---- |
| Kodak Sodium Thio-sulfate Pentahydrate<br><br>Eastman Kodak | Sodium Thiosulfate Pentahydrate N 100%<br><br>10102-17-7 | | | | V = 25<br>V1 = 35<br>P = ----<br>T = 60 | V = 10<br>V1 = 10<br>P = ---- |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| Kodak Sepia Toner Part A<br>Eastman Kodak | Potassium Bromide 55%<br>7758-02-3 | Potassium Ferricyanide 45%<br>13746-66-2 | | | V = ----<br>V1 = 220<br>P = ----<br>T = 220 | V = ----<br>V1 = 40<br>P = ---- |
| Kodak Sepia Toner Part B<br>Eastman Kodak | Sodium Sulfide Hydrate 100%<br>1313-84-4 | | | | V = ----<br>V1 = 220<br>P = ----<br>T = 220 | V = ----<br>V1 = 40<br>P = ---- |
| 44 Kleen Anti-Offset Compound<br>Hurst Graphics | Petroleum Hydrocarbons<br>64742-46-7 | | | | | |
| #220 All Purpose 3-Way Drier<br>Hurst Graphics | Naphtha<br>64742-88-7 | Cobalt Naphthenade<br>61789-51-3 | Manganase Naphthenade<br>61788-57-6 | | | |
| #230 Ink Conditioner<br>Hurst Graphics | Ethyl Alcohol 64-17-5<br>Napthalene<br>91-20-3 | Nonane 111-84-2<br>Trimethyl Benzene<br>95-63-6 | Xylene 1330-20-7<br>Alkaline Methl Silicate<br>14801-96-6 | Petroleum Distillate 64742-46-7<br>Organophyillic Clay<br>68953-58-2 | | |
| #337 Padding Compound<br>Hurst Graphics | Pathalate<br>84-74-2 | | | | | |
| #8 Plactic Gloss Ink Base<br>Hurst Graphics | Heavy Mineral Spirits<br>647=42-478 | | | | V = ----<br>V1 = 800<br>P = ----<br>T = 800 | V = ----<br>V1 = 100<br>P = ---- |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION: CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| D-305 Clearner Degreaser<br>[illegible]<br>[illegible] Corp. | Aluminum Silicate<br>1302-76-7 | Bentonite<br>1302-78-9 | Nitric Acid<br>7697-37-2 | | | |
| [illegible] Silv-Bird [illegible]<br>[illegible] Inc. | Butyl Benezyl Phthalate 22%<br>85-68-7 | Vinyl Acetate Monomer under 5%<br>108-05-4 | | | V = 300<br>V1 = ----<br>P = 150<br>T = 450 | V = 65<br>V1 = ----<br>P = 65 |
| [illegible] Weldwood [illegible]<br>[illegible] Inc. | Vinyl Acetate Monomer under 5%<br>108-05-4 | | | | V = 400<br>V1 = ----<br>P = 150<br>T = 550 | V = 100<br>V1 = ----<br>P = 55 |
| Roll-On-Stamp Pad [illegible]<br>[illegible] | Water 7732-18-5<br>Dye 56-61-5 | Glycerine<br>111-46-6 | Diethylene Glycol<br>25322-68-3 | Polyethylene Glycol | V = ----<br>V1 = 600<br>P = ----<br>T = 600 | V = ----<br>V1 = 200<br>P = ---- |
| [illegible] Cement<br>[illegible] Corp | Heptane<br>142-82-5 | Ethyl Alcohol<br>64-17-5 | | | | |
| [illegible] Slick<br>[illegible]<br>Masterlith Ind. | V.M.&P Naphtha 90%<br>64742-88-7 | Perchloroethylene (Tetrachloroethylene) 10%<br>127-18-4 | | | | |
| Superior #23 Flux<br>[illegible] | Zinc Chloride 30%<br>[illegible]46-85-7 | Hydrochloric Acid 15%<br>7647-01-1 | Acetic Acid 4%<br>64-19-7 | Water 50%<br>7732-18-5 | V = 143<br>V1 = ----<br>P = ----<br>T = 143 | V = 56<br>V1 = ----<br>P = ---- |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION: CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| -305 Clearner De-greaser<br>(DICO)<br>Direct Image Corp. | Aluminum Silicate<br>1302-76-7 | Bentonite<br>1302-78-9 | Nitric Acid<br>7697-37-2 | | | |
| Wilhold Gilv-Bird White Glue<br>Dap Inc. | Butyl Benezyl Phthalate 22%<br>85-68-7 | Vinyl Acetate Monomer under 5%<br>108-05-4 | | | V = 300<br>V1 = ----<br>P = 150<br>T = 450 | V = 65<br>V1 = ----<br>P = 65 |
| Dap Weldwood Carpenter's Glue<br>Dap Inc. | Vinyl Acetate Monomer under 5%<br>108-05-4 | | | | V = 400<br>V1 = ----<br>P = 150<br>T = 550 | V = 100<br>V1 = ----<br>P = 55 |
| Roll-On-Stamp Pad Poker<br>Sanford Corp | Water 7732-18-5<br>Dye 56-81-5 | Glycerine<br>111-46-6 | Diethylene Glycol<br>25322-68-3 | Polyethylene Glycol | V = ----<br>V1 = 600<br>P = ----<br>T = 600 | V = ----<br>V1 = 200<br>P = ---- |
| Rubber Cement<br>Sanford Corp | Heptane<br>142-82-5 | Ethyl Alcohol<br>64-17-5 | | | | |
| Quick'N Slick<br>(Read and Co.)<br>Masterlith Ind. | V.M.&P Naphtha 90%<br>64742-88-7 | Perchloroethylene (Tetrachloroethylene) 10%<br>127-18-4 | | | | |
| Superior #23 Flux<br>Superior Flux Mfg Co | Zinc Chloride 30%<br>7646-85-7 | Hydrochloric Acid 15%<br>7647-01-1 | Acetic Acid 4%<br>64-19-7 | Water 50%<br>7732-18-5 | V = 143<br>V1 = ----<br>P = ----<br>T = 143 | V = 56<br>V1 = ----<br>P = ---- |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION: CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| liobond 20<br>(shland Chemical)<br>J. Ruscoe Co. | Synthetic Rubber<br>10% | Alkyphenolic Resin<br>10% | Calcium Carbonate<br>2%<br>471-34-1 | MEK<br>78%<br>78-93-3 | | |
| urco Liquid Smut-Go<br>C<br>rco Products Inc | Nitric Acid<br>10%<br>7697-37-2 | Ferric Sulfate<br>5%<br>10028-22-5 | Hydrofluoric Acid<br>1%<br>7664-39-3 | | V = ----<br>V1 = ----<br>P = 350<br>T = 350 | V = ----<br>V1 = ----<br>P = 50 |
| akite 33<br>akite Products Inc. | Phosphoric Acid<br>50%<br>7664-38-2 | 2-Butoxyethanol<br>15%<br>111-76-2 | Nonylphenoxy Polyeth-oxyethanol<br>5%<br>9016-45-9 | | V = 600<br>V1 = ----<br>P = 650<br>T = 1250 | V = 55<br>V1 = ----<br>P = 110 |
| rystal Clear #1301<br>pray Coating, Krylon<br>rden | Acetone<br>67-64-1 10%<br>Propane 10%<br>74-98-6 | Isobutane<br>75-28-5 20%<br>Tolvene 10%<br>108-88-3 | Heptane<br>142-82-5 20%<br>Xylene 20%<br>1330-20-7 | Heavy Aromatic Solvent<br>Naphtha 5%<br>64742-94-5 | V = 50<br>V1 = 5<br>P = 10<br>T = 65 | V = 24<br>V1 = 5<br>P = 5 |
| rylon 1310 Pulling<br>pray<br>rden | Isopropyl Alcohol<br>20%<br>67-63-0 | 1,1,1-Trichloroethane<br>15%<br>71-55-6 | Propane<br>15%<br>74-98-6 | Isobutane<br>75-28-5 25%<br>Heptane 25%<br>142-82-5 | V = 46<br>V1 = ----<br>P = ----<br>T = 46 | V = 24<br>V1 = ----<br>P = ---- |
| rylon 1311 Matte<br>inish Spray<br>rden | Acetone<br>12.6%<br>67-64-1 | Propane<br>12.9%<br>74-98-6 | Isobutane<br>17.1%<br>75-28-5 | Tolvene<br>49.9%<br>108-88-3 | V = 18<br>V1 = ----<br>P = ----<br>T = 18 | V = 9<br>V1 = ----<br>P = ---- |
| eedbonder 324<br>tructural Adhesive<br>octite Corp | Polyurethane Metha-crylate Resins<br>50% | Hydroxyalkyl Metha-crylate<br>25% | T-Butyl Perbenzoate<br>3%<br>Acrylic Acid 2%<br>79-10-7 | Saccharin<br>2%<br>81-07-2<br>Higher Boiling Metha-crylate 15% | | |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION: CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| eedbonder 325<br>ructural Adhesive | Polyurethane Methacrylate Resin 45%<br>Polyglycol Dimethacrylates 30% | Acrylic Acid 50%<br>79-10-7<br>Hydroxyalkyl Methacrylate 10% | Cumene Hydroperoxide 2%<br>80-15-9<br>T-Butyl Perbenzoate 2% | Saccharin 1%<br>81-07-2<br>Methacrylated Silane 1% | | |
| eedbonder 326<br>ructural Adhesive<br>octite Corp. | Polyurethane Methacrylate Resin 45%<br>Hydroxyalkyl Methacrylate 30% | Acrylic Acid 79-10-7 3%<br>Cumene Hydroperoxide 1%<br>80-15-9 | Saccharin 81-07-2 1%<br>Acetylphenyhydrazine 1% | Higher Boiling Methacrylate 15% | | |
| ive/Sealant 242<br>te Corp. | Polyglycol Dimethacrylates 60%<br>Polyglycol Oleates 25% | Saccharin 5%<br>81-07-2<br>Silicon Dioxide | Cumene Hydroperoxide 2%<br>80-15-9 | N,N-Dialkyltolvidine 1% | | |
| it Lock/Grade CV<br>te Corp. | Polyglycol Dimethacrylates 75%<br>Polyglycol Dioctoates 15% | Cumene Hydroperoxide 3%<br>80-15-9 | Cellulose Acetate Butyrate, under 3% | Trialkylamine under 3% | | |
| ing Mount/Garde B<br>te Corp. | Polyglycol Dimethacrylates 75%<br>Polyglycol Dioctoates 15% | Cumene Hydroperoixde 3%<br>80-15-9 | Saccharin 2%<br>81-07-2 | Cellulose Acetate Butyrate 3%<br>N,N-Dialkyltolvidines 1% | | |
| te Garde A<br>octite Corp | Polyglycol Dimethacrylates 90% | Cumene Hydroperoxide 7%<br>80-15-9 | Trialkylamine 3% | | | |
| ettine Solvent and<br>her<br>Rubber, Inc. | Hexane 100%<br>110-54-3 | | | | | |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION: CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| [illegible]st-Dust Paper Cement<br>[illegible]ion Rubber, Inc. | Hexane<br>87%<br>110-54-3 | | | | | |
| [illegible] Image Guard<br>[illegible] | Water<br>60%<br>7732-18-5<br>Ethyl Butyl Ketone<br>25%<br>106-35-4 | Bisphenol A-Epichlorohydrin Cupolymer 5%<br>25068-38-6<br>Cellulose Sodium Glycolate 5%<br>9004-32-4 | Phosphoric Acid under 1%<br>7664-38-2 | Furmaldehyde under 1%<br>50-00-0 | | |
| [illegible]older S.B.5<br>[illegible]ter | Tin<br>95%<br>7440-31-5 | Antimony<br>5%<br>7440-36-0 | | | V = 400<br>V1 = 200<br>P = 50<br>T = 650 | V = 100<br>V1 = 50<br>P = 20 |
| [illegible]lder SN96<br>[illegible]ter | Tin<br>96%<br>7440-31-5 | Silver<br>4%<br>7440-22-4 | | | V = 420<br>V1 = 150<br>P = 50<br>T = 620 | V = 50<br>V1 = 50<br>P = 10 |
| [illegible]lder [illegible]N60<br>[illegible]ter | Tin<br>60%<br>7440-31-5 | Lead<br>39.65%<br>7439-92-1 | Antimony<br>.35%<br>7440-36-0 | | V = 150<br>V1 = 200<br>P = 50<br>T = 400 | V = 50<br>V1 = 50<br>P = 10 |
| [illegible]44 Rosin Flux<br>[illegible]ter | Ethanol<br>25%<br>64-17-5 | Sec-Butanol (Sec-Butyl Alcohol)<br>25%<br>78-92-2 | Rosin<br>50%<br>8050-09-7 | | V = 73<br>V1 = 42<br>P = 23<br>T = 138 | V = 10<br>V1 = 10<br>P = 5 |
| #15 Black Marking Ink<br>[illegible]ependent Ink Inc. | Cresylic Acid<br>75%<br>1319-77-3 | Aniline<br>8%<br>62-53-3 | | | | |

# ATTACHMENT "A"

## CHEMICAL USEAGE

| TRADE NAME | CHEMICAL COMPOSITION | | | | ANNUAL USAGE (POUNDS) | MAXIMUM VOLUME OF MATERIAL STORED AT ANY ONE TIME (POUNDS) |
|---|---|---|---|---|---|---|
| | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | CHEMICAL (%) | | |
| T-7 Solvent<br>Independent Ink Inc. | Ethanol<br>64-17-5 | Isopropanol<br>67-63-0 | Monohydroxymethane (Methanol) 5%<br>67-56-1 | 2-Pentatone,4-Methyl (MIK) 2%<br>108-10-1 | | |
| **Letraset Color-Key Developer** | **Water 50%**<br>7732-18-5 | **Propyl Alcohol 45%**<br>71-23-8 | **Trietylene Glycol 5%**<br>112-27-6 | | | |
| Barrett Cleaner<br>PSM Chemicals | Dipropylene Glycol Monomethyl Ether 2%<br>34590-94-8 | Potassium Hydroxide .5%<br>1310-58-3 | Ethylenediamine Tetraacetic Acid (EDTA) .25%<br>64-02-8 | Nonionic Surfactants 68131-40-8 2%<br>Dye 2610-10-8 .001%<br>Water Remainder 7732-18-5 | | |
| Scotch-Weld 1838-B Epoxy Adhesive<br>3M | Epoxy Resin 25068-38-6 70%<br>Kaolinite 20%<br>1318-74-7 | Clay 5%<br>68953-58-2 | Limestone 5%<br>1317-65-3 | Titanium Dioxide 1%<br>13463-67-7 | | |
| Y Brand TFE Lube<br>3 | 1,1,1-Trichloroethane 71-55-6 70%<br>Propane 10%<br>74-98-6 | 1,1,2-Trichloro-1,2,2-Trifluoro Ethane 76-13-1 5%<br>Dimethoxymethane 5%<br>109-87-5 | Polytetrafluoroethy- (PTFE) 5%<br>9002-84-0 | 1,4-Dioxane 5%<br>123-91-1 | | |
| Scotch Weld 1838-A Epoxy Adhesive<br>3M | Polyamide Resin 80%<br>68410-23-1 | Kaolinite 10%<br>1318-74-7 | Amorphous Silicon Dioxide 5%<br>7631-86-9 | | | |
| Scotch-Weld AF-42/3 M Structural Adhesive Film<br>3M | Polyamide Resin 60%<br>32131-17-2 | Epoxy Resin 20%<br>25068-38-6 | Caprolactam 10%<br>105-60-2 | Dicyandiamide 10%<br>461-58-5 | | |

2166-04749

# EXHIBIT D

## MANIFESTS

### RESPONSE TO QUESTION #11 PAGE 10

350118

# MARTIN INDUSTRIAL PUMPING SERVICE

P.O. Box 1608, Canyon Country, CA 91351 • Telephone (805) 251-3737

1-29-80

## PRODUCER OF WASTE (Must be filled by producer)

Name (print or type): HYDRAULIC RESEARCH — Code No.

Pick up Address: 12137 MONTAGUE (Number) (Street) PACOIMA (City)

Telephone Number: 213 896-2441 P.O. or Contract No.:

Order Placed By: H. MANN Date: 1-29-80

Type of Process which Produced Wastes: MACHINE CLEANING — Code No.

(Examples: metal plating, equipment cleaning, oil drilling--wastewater treatment, pickling bath, petroleum refining)

## DESCRIPTION OF WASTE (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☒ Oil ~~and water~~ SOLUBLE
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☒ Latex waste
14. ☐ ~~Mud and~~ water
15. ☐ Brine

☐ Other (Specify) — Code No.

Components:
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | ☐ | ☐ |
| 2. | | | ☐ | ☐ |
| 3. | | | ☐ | ☐ |
| 4. | | | ☐ | ☐ |
| 5. | | | ☐ | ☐ |
| 6. | | | ☐ | ☐ |

Hazardous Properties of Waste:
pH ~6 ☐ none ☒ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: 200 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: (Number) ☐ drums ☐ cartons ☐ bags ☐ other (specify)

Physical State: ☐ solid ☐ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any):

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

## HAULER OF WASTE (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE — Code No.

Business Address: P.O. Box 1608 (Number) (Street) Canyon Country, CA 91351 (City)

Telephone Number: (805) 251-3737 Pick Up: 1-29-80 (Date) Time: ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 2817 No. of Loads or Trips: 1 Unit No.:

Vehicle: ☒ vacuum truck ____ barrels, ☐ flatbed, ☐ other (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

## DISPOSER OF WASTE (Must be filled by disposer)

Name (print or type): CALCIUS — Code No.

Site Address: SOUTH

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): State fee (if any):

Handling Method(s):

☐ recovery

☐ treatment (specify): (Examples: incineration, neutralization, precipitation) — Code No.

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): — Code No.

If waste is held for disposal elsewhere specify final location:

Disposal Date:

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

**DOT** PROPER SHIPPING NAME

M NO 1709

**FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.**

2166-04740

2-14-80

# MARTIN INDUSTRIAL PUMPING SERVICE

P.O. Box 1608, Canyon Country, CA 91351 • Telephone (805) 251-3737

## PRODUCER OF WASTE (Must be filled by producer)

Name (print or type): [illegible] Code No.

Pick up Address: 12137 Montague St Vacuum (Number) (Street) (City)

Telephone Number: (813) 846-2411 P.O. or Contract No.:

Order Placed By: A. Mann Date: 2-14-80

Type of Process which Produced Wastes: Machine cleaning

(Examples: metal plating, equipment cleaning, oil drilling--Code No. wastewater treatment, pickling bath, petroleum refining)

## DESCRIPTION OF WASTE (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☒ Oil Soluble
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☒ ~~Mud and~~ water
15. ☐ Brine

☐ Other (Specify) _____ Code No.

Components:
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | ☐ | ☐ |
| 2. | | | ☐ | ☐ |
| 3. | | | ☐ | ☐ |
| 4. | | | ☐ | ☐ |
| 5. | | | ☐ | ☐ |
| 6. | | | ☐ | ☐ |

Hazardous Properties of Waste:
pH 7 ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: 2000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (Number) ☐ drums ☐ cartons ☐ bags ☐ other _____ (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

[signature]
Signature of authorized agent and title

## HAULER OF WASTE (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE Code No.

Business Address: P.O. Box 1608 Canyon Country, CA 91351 (Number) (Street) (City)

Telephone Number: (805) 251-3737 Pick Up: [illegible] (Date) Time: _____ ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 2856 No. of Loads or Trips: 1 Unit No.: 1

Vehicle: ☒ vacuum truck ____ barrels, ☐ flatbed, ☐ other _____ (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

[signature]
Signature of authorized agent and title

## DISPOSER OF WASTE (Must be filled by disposer)

Name (print or type): _____ Code No.

Site Address: _____

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): _____ State fee (if any): _____

Handling Method(s):

☐ recovery

☐ treatment (specify): _____ Code No.
(Examples: incineration, neutralization, precipitation)

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): _____ Code No.

If waste is held for disposal elsewhere specify final location: _____

Disposal Date: _____

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

_____
Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

**DOT PROPER SHIPPING NAME**

_____

M NO 1746

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

3-20-80

# MARTIN INDUSTRIAL PUMPING SERVICE

P.O. Box 1608, Canyon Country, CA 91351 • Telephone (805) 251-3737

## PRODUCER OF WASTE (Must be filled by producer)

Name (print or type): HUGHES RESEARCH Code No.

Pick up Address: 12137 MONTAGUE ST PACOIMA
(Number) (Street) (City)

Telephone Number: 213 896-2011 P.O. or Contract No.:

Order Placed By: A MANN Date: 3-20-80

Type of Process which Produced Wastes: MACHINE CLEANING Code No.
(Examples: metal plating, equipment cleaning, oil drilling--wastewater treatment, pickling bath, petroleum refining)

## DESCRIPTION OF WASTE (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☒ Oil ~~SOLUBLE~~
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☑ ~~Mud and~~ water
15. ☐ Brine

☐ Other (Specify) Code No.

Components:
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | ☐ | ☐ |
| 2. | | | ☐ | ☐ |
| 3. | | | ☐ | ☐ |
| 4. | | | ☐ | ☐ |
| 5. | | | ☐ | ☐ |
| 6. | | | ☐ | ☐ |

Hazardous Properties of Waste:
pH 7 ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: 10 ☐ gal ☐ tons ☒ barrels (42 gal) ☐ other (specify)

Containers: (Number) ☐ drums ☐ cartons ☐ bags ☐ other (specify)

Physical State: ☐ solid ☑ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any): NONE

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

## HAULER OF WASTE (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE Code No.

Business Address: P.O. Box 1608 Canyon Country, CA 91351
(Number) (Street) (City)

Telephone Number: (805) 251-3737 Pick Up: 3-21-80 (Date) Time: ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 2659 No. of Loads or Trips: 1 Unit No.: 1

Vehicle: ☒ vacuum truck ___ barrels, ☐ flatbed, ☐ other (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

## DISPOSER OF WASTE (Must be filled by disposer)

Name (print or type): Code No.

Site Address:

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): State fee (if any):

Handling Method(s):

☐ recovery

☐ treatment (specify): (Examples: incineration, neutralization, precipitation)-Code No.

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): Code No.

If waste is held for disposal elsewhere specify final location:

Disposal Date:

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

**DOT** PROPER SHIPPING NAME

M NO 1852

**FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.**

7-16-80

# MARTIN INDUSTRIAL PUMPING SERVICE

P.O. Box 1608, Canyon Country, CA 91351 • Telephone (805) 251-3737

## PRODUCER OF WASTE (Must be filled by producer)

Name (print or type): Hydraulic Research ☐☐☐☐☐ Code No.

Pick up Address: 12137 Montague Pacoima
(Number) (Street) (City)

Telephone Number: (213) 716-2411 P.O. or Contract No.: _____

Order Placed By: A. Mann Date: 7-16-80

Type of Process which Produced Wastes: Machine Cleaning ☐☐☐☐
(Examples: metal plating, equipment cleaning, oil drilling--Code No. wastewater treatment, pickling bath, petroleum refining)

## DESCRIPTION OF WASTE (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☒ Tank bottom sediment
9. ☒ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☒ Mud and water
15. ☐ Brine

☐ Other (Specify) _____ ☐☐☐ Code No.

Components:
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | ☐ | ☐ |
| 2. | | | ☐ | ☐ |
| 3. | | | ☐ | ☐ |
| 4. | | | ☐ | ☐ |
| 5. | | | ☐ | ☐ |
| 6. | | | ☐ | ☐ |

Hazardous Properties of Waste:
pH 1 ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: 2800 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (Number) ☐ drums ☐ cartons ☐ bags ☐ other _____ (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): None

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

[signature]
Signature of authorized agent and title

## HAULER OF WASTE (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE ☐☐☐ Code No.

Business Address: P.O. Box 1608 Canyon Country, CA 91351
(Number) (Street) (City)

Telephone Number: (805) 251-3737 Pick Up: 7-16-80 (Date) Time: _____ ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 3018 No. of Loads or Trips: 1 Unit No.: 1

Vehicle: ☒ vacuum truck ____ barrels, ☐ flatbed, ☐ other _____ (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

[signature]
Signature of authorized agent and title

## DISPOSER OF WASTE (Must be filled by disposer)

Name (print or type): _____ ☐☐☐ Code No.

Site Address: _____

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): _____ State fee (if any): _____

Handling Method(s):

☐ recovery

☐ treatment (specify): _____ ☐☐
(Examples: incineration, neutralization, precipitation)-Code No.

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): _____ ☐☐ Code No.

If waste is held for disposal elsewhere specify final location: _____

Disposal Date: _____

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

_____
Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

**DOT PROPER SHIPPING NAME**

_____

**M № 2060**

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

1-8-80

**MARTIN** INDUSTRIAL PUMPING SERVICE

P.O. Box 1608, Canyon Country, CA 91351 • Telephone (805) 259-8282

## PRODUCER OF WASTE (Must be filled by producer)

Name (print or type): [illegible] Hydraulic Res [illegible] Code No.

Pick up Address: 12137 Minnaqua St Pacoima
(Number) (Street) (City)

Telephone Number: 203 [illegible]-2411 P.O. or Contract No.:

Order Placed By: [illegible] Date: 1-8-80

Type of Process which Produced Wastes: Machine Cleaning
(Examples: metal plating, equipment cleaning, oil drilling--wastewater treatment, pickling bath, petroleum refining) Code No.

## DESCRIPTION OF WASTE (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☒ Oil Soluble
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☒ ~~Mud~~ and water
15. ☐ Brine

☐ Other (Specify) _____ Code No.

Components:
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | ☐ | ☐ |
| 2. | | | ☐ | ☐ |
| 3. | | | ☐ | ☐ |
| 4. | | | ☐ | ☐ |
| 5. | | | ☐ | ☐ |
| 6. | | | ☐ | ☐ |

Hazardous Properties of Waste:
pH 1 ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: _____ ☐ gal ☐ tons ☒ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (Number) ☐ drums ☐ cartons ☐ bags ☐ other _____ (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): _____

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

_____
Signature of authorized agent and title

## HAULER OF WASTE (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE Code No.

Business Address: P.O. Box 1608 Canyon Country, CA 91351
(Number) (Street) (City)

Telephone Number: (805) 259-8282 Pick Up: 1-8-80 (Date) Time: ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 2761 No. of Loads or Trips: 1 Unit No.:

Vehicle: ☒ vacuum truck ____ barrels, ☐ flatbed, ☐ other _____ (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

[signature]
Signature of authorized agent and title

## DISPOSER OF WASTE (Must be filled by disposer)

Name (print or type): _____ Code No.

Site Address: _____

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): _____ State fee (if any): _____

Handling Method(s):

☐ recovery

☐ treatment (specify): _____ Code No.
(Examples: incineration, neutralization, precipitation)

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): _____ Code No.

If waste is held for disposal elsewhere specify final location: _____

Disposal Date: _____

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

_____
Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

**DOT** PROPER SHIPPING NAME

_____

M No 2156

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

2-27-80

# MARTIN INDUSTRIAL PUMPING SERVICE

P.O. Box 1608, Canyon Country, CA 91351 • Telephone (805) 251-3737

## PRODUCER OF WASTE (Must be filled by producer)

Name (print or type): HYDRAULIC RESEARCH ☐☐☐☐☐ Code No.

Pick up Address: 12137 MONTAGUE VACUINA (Number) (Street) (City)

Telephone Number: (213) 896-2411 P.O. or Contract No.: _____

Order Placed By: H. MARTIN Date: 2-27-80

Type of Process which Produced Wastes: MACHINE CLEANING ☐☐☐☐ Code No.

(Examples: metal plating, equipment cleaning, oil drilling-wastewater treatment, pickling bath, petroleum refining)

## DESCRIPTION OF WASTE (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☒ Oil SOLUBLE
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☒ ~~Mud and~~ water
15. ☐ Brine

☐ Other (Specify) _____ ☐☐☐ Code No.

Components: (Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | ☐ | ☐ |
| 2. | | | ☐ | ☐ |
| 3. | | | ☐ | ☐ |
| 4. | | | ☐ | ☐ |
| 5. | | | ☐ | ☐ |
| 6. | | | ☐ | ☐ |

Hazardous Properties of Waste:

pH 7 ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: 2000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (Number) ☐ drums ☐ cartons ☐ bags ☐ other _____ (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): NONE

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

X [signature]

Signature of authorized agent and title

## HAULER OF WASTE (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE ☐☐☐ Code No.

Business Address: P.O. Box 1608 Canyon Country, CA 91351 (Number) (Street) (City)

Telephone Number: (805) 251-3737 Pick Up: 2-28-80 (Date) Time: _____ ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 2610 No. of Loads or Trips: 1 Unit No.: 1

Vehicle: ☒ vacuum truck ____ barrels, ☐ flatbed, ☐ other _____ (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

[signature]

Signature of authorized agent and title

## DISPOSER OF WASTE (Must be filled by disposer)

Name (print or type): _____ ☐☐☐ Code No.

Site Address: _____

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): _____ State fee (if any): _____

Handling Method(s):

☐ recovery

☐ treatment (specify): _____ ☐☐ Code No.

(Examples: incineration, neutralization, precipitation)

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): _____ ☐☐ Code No.

If waste is held for disposal elsewhere specify final location: _____

Disposal Date: _____

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

**DOT PROPER SHIPPING NAME**

_____

M № 1803

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

# MARTIN INDUSTRIAL PUMPING SERVICE

P.O. Box 579, Saugus, CA 91350 o Telephone (805) 251-3737

**PRODUCER OF WASTE** (Must be filled by producer)

Name (print or type): HYDRAULIC RESEARCH — Code No.

Pick up Address: 12137 (Number) MONTAGUE (Street) YAKIMA (City)

Telephone Number: 713, 896-2411 P.O. or Contract No.:

Order Placed By: A. MANN Date: 8-19-80

Type of Process which Produced Wastes: BLOOD DRAINS — Code No.

(Examples: metal plating, equipment cleaning, oil drilling--wastewater treatment, pickling bath, petroleum refining)

**DESCRIPTION OF WASTE** (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☐ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cennery waste
13. ☐ Latex waste
14. ☒ Mud and water
15. ☐ Brine

☐ Other (Specify) _____ Code No.

Components:
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

Hazardous Properties of Waste:

pH _____ ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: 1500 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other _____ (specify)

Containers: _____ (Number) ☐ drums ☐ cartons ☐ bags ☐ other _____ (specify)

Physical State: ☐ solid ☒ liquid ☒ sludge ☐ other _____ (specify)

Special Handling Instructions (if any): NONE

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

**HAULER OF WASTE** (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE — Code No.

Business Address: P.O. Box 579, Saugus, CA 91350 (Number) (Street) (City)

Telephone Number: (805) 251-3737 Pick Up: 8-20-80 (Date) Time: ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 3067 No. of Loads or Trips: 1 Unit No.:

Vehicle: ☒ vacuum truck ____ barrels, ☐ flatbed, ☐ other _____ (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

**DISPOSER OF WASTE** (Must be filled by disposer)

Name (print or type): _____ Code No.

Site Address: _____

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): _____ State fee (if any): _____

Handling Method(s):

☐ recovery

☐ treatment (specify): _____ Code No.
(Examples: incineration, neutralization, precipitation)

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): _____ Code No.

If waste is held for disposal elsewhere specify final location: _____

Disposal Date: 8/20/80

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

**DOT PROPER SHIPPING NAME**

_____

**M No. 3009**

**FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.**

# MARTIN INDUSTRIAL PUMPING SERVICE

P.O. Box 1608, Canyon Country, CA 91351 • Telephone (805) 259-8282

## PRODUCER OF WASTE (Must be filled by producer)

Name (print or type): HYDRAULIC RESEARCH — Code No.

Pick up Address: 11644 GLENOAKS BLVD (Number) (Street) PACOIMA (City) 91331

Telephone Number: 213 896-2411 P.O. or Contract No.:

Order Placed By: MR. MANN Date: 4-10-79

Type of Process which Produced Wastes: MACHINE CLEANING — Code No.

(Examples: metal plating, equipment cleaning, oil drilling--wastewater treatment, pickling bath, petroleum refining)

## DESCRIPTION OF WASTE (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☒ Oil SOLUBLE
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☒ Mud and water
15. ☐ Brine

☐ Other (Specify) — Code No.

Components: (Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

Hazardous Properties of Waste: ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

pH: — Bulk Volume: 3000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: (Number) ☐ drums ☐ cartons ☐ bags ☐ other (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any): NONE

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

R. Mann
Signature of authorized agent and title

## HAULER OF WASTE (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE — Code No.

Business Address: P.O. Box 1608 Canyon Country, CA 91351 (Number) (Street) (City)

Telephone Number: (805) 259-8282 Pick Up: 4-10-79 (Date) Time: 1:00 ☒ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 2539 No. of Loads or Trips: 1 Unit No.: 1

Vehicle: ☒ vacuum truck ___ barrels, ☐ flatbed, ☐ other (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

## DISPOSER OF WASTE (Must be filled by disposer)

Name (print or type): CALABASAS LANDFILL #5 — Code No.

Site Address: 26819 W VENTURA FWY, AGOURA

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): 4 Loads State fee (if any):

Handling Method(s):

☐ recovery

☐ treatment (specify): (Examples: incineration, neutralization, precipitation)-Code No.

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): — Code No.

If waste is held for disposal elsewhere specify final location:

Disposal Date: 4-10-79

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

RECEIVED

APR 18 1979

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

DOT PROPER SHIPPING NAME
HYD. RES. & MFG. CO.

M NO 1470

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

**MARTIN** INDUSTRIAL PUMPING SERVICE

P.O. Box 579, Saugus, CA 91350 ○ Telephone (805) 251-3737

**PRODUCER OF WASTE** (Must be filled by producer)

Name (print or type): HYDRAULIC RESEARCH — Code No.

Pick up Address: 17137 (Number) MANTECA (Street) PACOIMA (City)

Telephone Number: 213 896-2411 P.O. or Contract No.:

Order Placed By: A. MANN Date: 10-14-80

Type of Process which Produced Wastes: MACHINE CLEANING — Code No.
(Examples: metal plating, equipment cleaning, oil drilling--wastewater treatment, pickling bath, petroleum refining)

**DESCRIPTION OF WASTE** (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☐ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☒ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☒ ~~Mud and~~ water
15. ☐ Brine

☐ Other (Specify) — Code No.

Components:
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

Hazardous Properties of Waste:
pH 7 ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive

Bulk Volume: 200 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: (Number) ☐ drums ☐ cartons ☐ bags ☐ other (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any): NONE

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

**HAULER OF WASTE** (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE — Code No.

Business Address: P.O. Box 579, Saugus, CA 91350 (Number) (Street) (City)

Telephone Number: (805) 251-3737 Pick Up: 10-17-80 (Date) Time: ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 3162 No. of Loads or Trips: 1 Unit No.: 1

Vehicle: ☒ vacuum truck ___ barrels, ☐ flatbed, ☐ other (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

**DISPOSER OF WASTE** (Must be filled by disposer)

Name (print or type): Operating Engineers — Code No.

Site Address:

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): State fee (if any):

Handling Method(s):

☒ recovery

☐ treatment (specify): (Examples: incineration, neutralization, precipitation)--Code No.

☐ disposal (specify): ☐ pond ☐ spreading ☐ landfill ☐ injection well ☐ other (specify): — Code No.

If waste is held for disposal elsewhere specify final location:

Disposal Date: 10-24-80

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

**DOT** PROPER SHIPPING NAME

M NO 3107

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

# MARTIN INDUSTRIAL PUMPING SERVICE

P.O. Box 579, Saugus, CA 91350 o Telephone (805) 251-3737

**PRODUCER OF WASTE** (Must be filled by producer) (EPA I.D.) CAD041162330

Name (print or type): HYDRAULIC RESEARCH Code No.

Pick up Address: 10445 GLENOAKS BLVD. (Number) (Street) PACOIMA (City)

Telephone Number: (805) 259-4030 587 P.O. or Contract No.:

Order Placed By: CHUCK YOUNGJOHN Date: 12/5/80

Type of Process which Produced Wastes: MACHINE CLEANING Code No.

(Examples: metal plating, equipment cleaning, oil drilling--wastewater treatment, pickling bath, petroleum refining)

**DESCRIPTION OF WASTE** (Must be filled by producer)

Check type of wastes:

1. ☐ Acid solution
2. ☐ Alkaline solution
3. ☐ Pesticides
4. ☐ Paint sludge
5. ☒ Solvent
6. ☐ Tetraethyl lead sludge
7. ☐ Chemical toilet wastes
8. ☐ Tank bottom sediment
9. ☒ Oil
10. ☐ Drilling mud
11. ☐ Contaminated soil and sand
12. ☐ Cannery waste
13. ☐ Latex waste
14. ☒ Mud and water
15. ☐ Brine

☒ Other (Specify) MACHINE COOLANT Code No.

Components:
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

| | Concentration: Upper | Lower | % | ppm |
|---|---|---|---|---|
| 1. IGNITABLES 0001 | 30 | 20 | | |
| 2. III TRICHLOROETHANE U226 | 50 | 40 | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

Hazardous Properties of Waste:
pH 7 ☐ none ☐ toxic ☒ flammable ☐ corrosive ☐ explosive

Bulk Volume: 1000 ☒ gal ☐ tons ☐ barrels (42 gal) ☐ other (specify)

Containers: (Number) ☐ drums ☐ cartons ☐ bags ☐ other (specify)

Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)

Special Handling Instructions (if any):

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Chuck Young
Signature of authorized agent and title

**HAULER OF WASTE** (Must be filled by hauler)

Name (print or type): MARTIN INDUSTRIAL PUMPING SERVICE Code No.

Business Address: P.O. Box 579, Saugus, CA 91350 (Number) (Street) (City)

Telephone Number: (805) 251-3737 Pick Up: 12-8-80 (Date) Time: ☐ am ☐ pm

State Liquid Waste Hauler's Registration No. (if applicable): 335

Job No.: 3229 No. of Loads or Trips: 1 Unit No.: 1

Vehicle: ☒ vacuum truck ___ barrels, ☐ flatbed, ☐ other (specify)

The described waste was hauled by me to the disposal facility named below and was accepted.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

EPA CAD 006 628 636
Tom Martin
Signature of authorized agent and title

**DISPOSER OF WASTE** (Must be filled by disposer)

Name (print or type): EPC Westside Pits Code No.

Site Address: Fellows Calif

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable): 1000 Gal State fee (if any):

Handling Method(s): EPA CAT040001253

☐ recovery

☐ treatment (specify):

☒ disposal (specify): ☐ pond ☒ spreading ☐ landfill ☐ injection well ☐ other (specify):

(Examples: incineration, neutralization, precipitation)-Code No.

Code No.

If waste is held for disposal elsewhere specify final location:

Disposal Date: 12-9-80

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

PH 6.0
Signature of authorized agent and title

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

EPC # 10655

**DOT PROPER SHIPPING NAME**

M NA 3176

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
Please type or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 342780

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name HYDRAULIC RESEARCH, TEXTRON
EPA # C A D 0 0 4 1 1 6 2 3 3 0
Address 10445 Glenoaks blvd Phone 259-4030
City, State, Zip Pacoima, Ca. 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name BARON • BLAKESLEE
EPA # C A D 0 9 7 4 6 5 1 3 2
Address 525 E. Alondra Phone (213) 532-0730
City, State, Zip Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

5

| U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS | NUMBER OF CONTAINERS 9 |
|---|---|---|---|---|---|
| WASTE HAZARDOUS WASTE LIQUID | ORM-E | NA9189 | 450 | Gals | TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER |
| WASTE (FREON) | | | | | |

6 Waste Category 64 7 Ext. Haz. Waste Permit No NA 8 Generating Process Parts cleaning

| 9 LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| A. BLACO-TRON (FREON) | 90 | 80 | ☒ % ☐ ppm | E. | | | ☐ % ☐ ppm |
| B. OIL | 20 | 10 | ☒ % ☐ ppm | F. | | | ☐ % ☐ ppm |
| C. | | | ☐ % ☐ ppm | G. | | | ☐ % ☐ ppm |
| D. | | | ☐ % ☐ ppm | Non-Hazardous Material | | | % |

10 WASTE PROPERTIES: pH 7 ☒ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

13 Signature of Authorized Agent and Title HAZARDOUS WASTE COORD Date Shipped 11/16/81

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME BARON • BLAKESLEE
ADDRESS 525 E. Alondra PHONE (213) 532-0730
CITY, STATE, ZIP Gardena, CA 90248

15 PICK-UP DATE 11-16-81
EPA NO. C A D 0 9 7 4 6 5 1 3 2 Time 2:00 ☐ AM ☒ PM
16 Signature of Authorized Agent and Title DRIVER Date 11-16-81

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

17 NAME BARON • BLAKESLEE
EPA NO. C A D 0 9 7 4 6 5 1 3 2
PHONE NO. (213) 532-0730

18 QUANTITY (If Measured)
19 STATE FEE (If Any)

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☒ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name EPA NO.

23 Signature of Authorized Agent and Title Date Accepted

Copy 1–WHITE: TSD Facility Keeps (Send Copy to DOHS) Copy 2–YELLOW: To Transporter from TSDF Copy 3–PINK: To Generator from TSDF Copy 4–GOLDENROD: Generator Keeps (Send Copy to DOHS)

2166-0479

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

555- 007785
① MANIFEST NUMBER

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME Hydraulic Research Textron
EPA NO. C A D 0 4 1 1 6 2 3 3 6
ADDRESS 10445 Glenoaks Blvd
CITY, STATE, ZIP CODE Pacoima Ca. 91331
PHONE NO. (818) 896 2411
ORDER PLACED BY E Miller ORDER DATE 11-30-81
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME Olympic Oil Co
EPA NO. C A D 0 0 0 6 2 9 6 1 8
ADDRESS 5156 Triggs ST
CITY, STATE, ZIP CODE Commerce CA 90022
PHONE NO. 213-269-0170

## ④ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE Oil NOS | Comb. Liquid | NA 1270 | 390 | Gals | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☒ TANK TRUCK ☐ OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 46
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS Pressure Testing

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|---|---|---|---|---|---|
| A | Hydraulic oil | 95 | 90 | ☒ | ☐ | E | | | ☐ | ☐ |
| B | Water | 5 | 10 | ☒ | ☐ | F | | | ☐ | ☐ |
| C | | | | ☐ | ☐ | G | | | ☐ | ☐ |
| D | | | | ☐ | ☐ | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☐ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ E Miller Mgr Facilities — SIGNATURE OF AUTHORIZED AGENT & TITLE
11 30-81 — DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Olympic Oil Company
EPA NO. C A D 0 0 0 6 2 9 6 1 8
ADDRESS 5156 Triggs Street
CITY, STATE, ZIP CODE Commerce, CA. 90022
PHONE NO. (213) 269-0170

JOB NO. 14844
UNIT NO. #16

⑮ PICK-UP DATE 11-30-81
TIME 10:45 ☒ AM ☐ PM

⑯ Jerry Scott — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME
EPA NO.

㉓ SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

555-001185
① MANIFEST NUMBER

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME Hydraulic Research, Textron
EPA NO. CAD041162330
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacoima CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 9/2/81
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME Olympic Oil Company
EPA NO. CAD000629618
ADDRESS 5156 Triggs St.
CITY, STATE, ZIP CODE Commerce CA 90022
PHONE NO. (213) 269-0170

## ④ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE Flammable Liquid N.O.S. | Flammable Liquid | UN1993 | 1200 | Gals | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☒ TANK TRUCK ☐ OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 64
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS Parts Cleaning

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|
| A | Stoddard Solvent | 95 | 90 | ☒ % ☐ PPM | E | | | ☐ % ☐ PPM | |
| B | Oil | 10 | 5 | ☒ % ☐ PPM | F | | | ☐ % ☐ PPM | |
| C | | | | ☐ % ☐ PPM | G | | | ☐ % ☐ PPM | |
| D | | | | ☐ % ☐ PPM | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn Hazardous Waste Coord. — SIGNATURE OF AUTHORIZED AGENT & TITLE
DATE SHIPPED 9/2/81

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Olympic Oil Company
EPA NO. CAD000629618
ADDRESS 5156 Triggs Street
CITY, STATE, ZIP CODE Commerce, CA. 90022
PHONE NO. (213) 269-0170

JOB NO. 27796
UNIT NO. #16

⑮ PICK-UP DATE 9-2-81
TIME 10:55 ☒ AM ☐ PM

⑯ Jerry Scott — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME Olympic Oil
EPA NO.

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME Resource Recovery
EPA NO.

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ R. C. — SIGNATURE OF AUTHORIZED AGENT & TITLE
DATE ACCEPTED 9-2-81

11/80

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
Please type or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 — 342477

## GENERATOR (GENERATOR MUST COMPLETE)

2 Name: HYDRAULIC RESEARCH, TEXTRON
EPA #: CAD041162330
Address: 10445 GLENOAKS Phone: 896-2417
City, State, Zip: PACOIMA, CA 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name: BARON • BLAKESLEE
EPA #: CAD097465132
Address: 525 E. Alondra Phone: (213) 532-0730
City, State, Zip: Gardena, CA 90248

4 Alternate TSD Facility
Name:
EPA #:
Address: Phone:
City, State, Zip:

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE 111 TRICHLOROETHANE FOOL MIXTURE | ORM-A | UN2831 | 150 | GALS |
| WASTE | | | | |

NUMBER OF CONTAINERS: 3
TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

6 Waste Category: 63
7 Ext. Haz. Waste Permit No.: N/A
8 Generating Process: VAPOR DEGREASER

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|
| 9A 111 TRICHLOROETHANE | 85 | 80 | ☒% ☐ppm |
| B OIL (NON HAZ) | 25 | 15 | ☒% ☐ppm |
| C INHIBITOR | 3 | 1 | ☒% ☐ppm |
| D | | | ☐% ☐ppm |

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|
| E | | | ☐% ☐pp |
| F | | | ☐% ☐pp |
| G | | | ☐% ☐pp |

Non-Hazardous Material: %

10 WASTE PROPERTIES: pH 7 ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] Signature of Authorized Agent and Title — Date Shipped: 9/11/81

## TRANSPORTER (HAULER MUST COMPLETE)

14 TRANSPORTER NAME: BARON • BLAKESLEE
ADDRESS: 525 E. Alondra PHONE: (213) 532-0730
CITY, STATE, ZIP: Gardena, CA 90248

15 PICK-UP DATE: 9/11/81
EPA NO.: CAD097465132 Time: ☐ AM ☐

16 [signature] Signature of Authorized Agent and Title — Date: 9/11/81

## TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

17 NAME: BARON • BLAKESLEE
EPA NO.: CAD097465132
PHONE NO.: (213) 532-0730

18 QUANTITY (If Measured):
19 STATE FEE (If Any):

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

IF IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
Facility Name:
EPA NO.:

23 Signature of Authorized Agent and Title — Date Accepted

(Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to ...

See reverse side for instructions.
Please type or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 — 342399

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name HYDRAULIC RESEARCH, TEXTRON
EPA # C A D 0 4 1 1 6 2 3 3 0
Address 10445 GLENOAKS Blvd. Phone 846-2411
City, State, Zip PACOIMA, CA 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name BARON • BLAKESLEE
EPA # C A D 0 9 7 4 6 5 1 3 2
Address 525 E. Alondra Phone (213) 532-0730
City, State, Zip Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS | NUMBER OF CONTAINERS 10 |
|---|---|---|---|---|---|
| WASTE HAZARDOUS WASTE LIQUID | ORM-E | 9189 | 500 | GALS | TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER |
| WASTE (FREON) | | | | | |

6 Waste Category G4 7 Ext. Haz. Waste Permit No. NA 8 Generating Process PARTS CLEANING

| LIST COMPONENTS | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| 9 A BLACKTRON TF | 90 | 80 | ☒ % ☐ ppm | E | | | ☐ % ☐ ppm |
| B OIL | 20 | 10 | ☒ % ☐ ppm | F | | | ☐ % ☐ ppm |
| C | | | ☐ % ☐ ppm | G | | | ☐ % ☐ ppm |
| D | | | ☐ % ☐ ppm | Non-Hazardous Material % | | | |

10 WASTE PROPERTIES pH 7 ☒ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☒ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] Hazardous Waste Cond. 9/11/81
Signature of Authorized Agent and Title Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME BARON • BLAKESLEE
ADDRESS 525 E. Alondra PHONE (213) 532-0730
CITY, STATE, ZIP Gardena, CA 90248

15 PICK-UP DATE 9/11/81
EPA NO. C A D 0 9 7 4 6 5 1 3 2 Time 3:00 ☐ AM ☒ PM

16 [signature] 9/11/81
Signature of Authorized Agent and Title Date

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

17 NAME BARON • BLAKESLEE
EPA NO. C A D 0 9 7 4 6 5 1 3 2
PHONE NO. (213) 532-0730

18 QUANTITY (If Measured)
19 STATE FEE (If Any)

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY.
Designated TSD Facility Name EPA NO.

23
Signature of Authorized Agent and Title Date Accepted

TSD Facility Keeps (Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to DOHS)

RECEIVED
Transportation Commission
BLAKESLEE CA

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
Please type or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 342779

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name HYDRAULIC RESEARCH
EPA # CAD041162330
Address 10445 GLENOAK ST Phone 254-4030
City, State, Zip PACOIMA CA 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name BARON • BLAKESLEE
EPA # CAD097465132
Address 525 E. Alondra Phone (213) 532-0730
City, State, Zip Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS | NUMBER OF CONTAINERS 2 |
|---|---|---|---|---|---|
| WASTE HAZARDOUS WASTE LIQUID | ORM-E | NA9189 | 100 | GALS | TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER |
| WASTE (FREON) | | | | | |

6 Waste Category 64 7 Ext. Haz. Waste Permit No. NA 8 Generating Process PARTS CLEANING

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| 9 A. BLACO-TIRON | 90 | 80 | ☒% ☐ppm | E. | | | ☐% ☐ppm |
| B. OIL | 20 | 10 | ☒% ☐ppm | F. | | | ☐% ☐ppm |
| C. | | | ☐% ☐ppm | G. | | | ☐% ☐ppm |
| D. | | | ☐% ☐ppm | Non-Hazardous Material ____ % | | | |

10 WASTE PROPERTIES: pH 7 ☒ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 Chuck Youngblood HAZARDOUS WASTE COORD. 10/12/81
Signature of Authorized Agent and Title Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME BARON • BLAKESLEE
ADDRESS 525 E. Alondra PHONE (213) 532-0730
CITY, STATE, ZIP Gardena, CA 90248

15 PICK-UP DATE
EPA NO. CAD097465132 Time ☐ AM ☒ PM

16 [illegible]
Signature of Authorized Agent and Title Date

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

17 NAME BARON • BLAKESLEE 18 QUANTITY (If Measured)
EPA NO. CAD097465132 19 STATE FEE (If Any)
PHONE NO. (213) 532-0730

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
22 Designated TSD Facility Name EPA NO.

23 Signature of Authorized Agent and Title Date Accepted

Copy 1—WHITE: TSD Facility Keeps (Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to DOHS)

...e for instructions.
...ype or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 — 341169

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name HYDRAULIC RESEARCH, TEXTRON
EPA # CAD041162330
Address 10445 GLENOAKS BLVD (805) Phone 259-4030
City, State, Zip PACOIMA CA 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name BARON • BLAKESLEE
EPA # CAD097465132
Address 525 E. Alondra Phone (213) 532-0730
City, State, Zip Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

5

| U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE 111 TRICHLOROETHANE MIXTURE FOOD | ORM-A | UN2831 | 50 | GALS |
| WASTE | | | | |

NUMBER OF CONTAINERS 1
TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

6 Waste Category 63 7 Ext. Haz. Waste Permit No. NA 8 Generating Process VAPOR DEGREASER

| LIST COMPONENTS | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|
| 9 A 111 TRICHLOROETHANE | 85 | 80 | ☒% ☐ppm |
| B OIL (NON HAZ) | 25 | 15 | ☒% ☐ppm |
| C INHIBITOR | 3 | 1 | ☒% ☐ppm |
| D | | | ☐% ☐ppm |

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|
| E | | | ☐% ☐ppm |
| F | | | ☐% ☐ppm |
| G | | | ☐% ☐ppm |

Non-Hazardous Material ____ %

10 WASTE PROPERTIES: pH 7 ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other MAKE SURE BUNGS ARE TIGHT AND NONE OF THE DRUMS ARE LEAFING

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

13 Chuck Youngjohn Hazardous Waste Coordinator Chuck Youngjohn 10/12/81
Signature of Authorized Agent and Title Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME BARON • BLAKESLEE
ADDRESS 525 E. Alondra PHONE (213) 532-0730
CITY, STATE, ZIP Gardena, CA 90248

15 PICK-UP DATE 10-12-81
EPA NO. CAD097465132 Time 1:30 ☐ AM ☒ PM

16 Dave Dunoon DRIVER 10-12-81
Signature of Authorized Agent and Title Date

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

17 NAME BARON • BLAKESLEE
EPA NO. CAD097465132
PHONE NO. (213) 532-0730

18 QUANTITY (If Measured) 49g
19 STATE FEE (If Any)

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name EPA NO.

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☒ Recycle

23 Joe Meres Super. 10-22-81
Signature of Authorized Agent and Title Date Accepted

Copy 1—WHITE: TSD Facility Keeps (Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to DOHS)

...UR
...LEASE TYPE
...CEARLY.
PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

555- 001182
① MANIFEST NUMBER

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME: HYDRAULIC RESEARCH, TEXTRON
EPA NO.: CAD041162330
ADDRESS: 10445 GLENOAKS BLVD
CITY, STATE, ZIP CODE: PACOIMA, CA. 91331
PHONE NO.: (213) 896-2411
ORDER PLACED BY: CHUCK YOUNGJOHN ORDER DATE: 8/24/81
P.O. / CONTRACT NO.:

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME: Olympic Oil Company
EPA NO.: CAD000629618
ADDRESS: 5156 TRIGGS STREET
CITY, STATE, ZIP CODE: Commerce, CA 90022
PHONE NO.: (213) 269-0170

## ④ ALTERNATE TSD FACILITY

NAME:
EPA NO.:
ADDRESS:
CITY, STATE, ZIP CODE:
PHONE NO.:

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE OIL N.O.S. NA 1270 | COMBUSTIBLE LIQ | NA1270 | 300 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☒ TANK TRUCK ☐ OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY: 46
⑦ EX. HAZ. WASTE PERMIT NO.: NA
⑧ GENERATING PROCESS: PRESSURE TESTING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | HYDRAULIC OIL | 95 | 90 | ☒ % | ☐ PPM | E | | | ☐ % | ☐ PPM |
| B | WATER | 10 | 5 | ☐ % | ☐ PPM | F | | | ☐ % | ☐ PPM |
| C | | | | ☐ % | ☐ PPM | G | | | ☐ % | ☐ PPM |
| D | | | | ☐ % | ☐ PPM | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☐ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ James F. Smith - Maint Sup't — SIGNATURE OF AUTHORIZED AGENT & TITLE
8-25-81 — DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME: Olympic Oil Company
EPA NO.: CAD000629618
ADDRESS: 5156 Triggs Street
CITY, STATE, ZIP CODE: Commerce, CA. 90022
PHONE NO.: (213) 269-0170

JOB NO.: 27815
UNIT NO.: #16

⑮ PICK-UP DATE: 8.25.81
TIME: 12:15 ☐ AM ☒ PM

⑯ Jerry Scott — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME: OLYMPIC OIL
EPA NO.:

⑱ QUANTITY (IF MEASURED):
⑲ STATE FEE (IF ANY) $:

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME: Resource Recovery
EPA NO.:

㉑ [signature] — SIGNATURE OF AUTHORIZED AGENT & TITLE
8-26-81 — DATE ACCEPTED

REVISED 11/80

or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 342456

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name HYDRAULIC RESEARCH TEXTRON
EPA # C A D 0 4 1 1 6 3 3 0
Address 10145 LEMONA BLVD Phone 367-4030
City, State, Zip PACOIMA CA 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name BARON • BLAKESLEE
EPA # C A D 0 9 7 4 6 5 1 3 2
Address 525 E. Alondra Phone (213) 532-0730
City, State, Zip Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

5

| U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE 111 TRICHLOROETHANE MIXTURE | ORM-A | UN 2831 | 50 | GALS |
| WASTE | | | | |

NUMBER OF CONTAINERS 5
TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

6 Waste Category 63 7 Ext. Haz. Waste Permit No. N A 8 Generating Process VAPOR DEGREASER

| 9 LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| A 111 TRICHLOROETHANE | 85 | 50 | ☐% ☐ppm | E | | | ☐% ☐ppm |
| B OIL (NON HAZ) | 25 | 15 | ☒% ☐ppm | F | | | ☐% ☐ppm |
| C INHIBITOR | 3 | 1 | ☒% ☐ppm | G | | | ☐% ☐ppm |
| D | | | ☐% ☐ppm | Non-Hazardous Material | | | % |

10 WASTE PROPERTIES: pH 7 ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen
11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other
12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other MAKE SURE ALL BUNGS ARE TIGHT AND NONE OF THE DRUMS ARE LEAKING

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] Signature of Authorized Agent and Title — Date Shipped 7/2/81

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME BARON • BLAKESLEE
EPA NO. C A D 0 9 7 4 6 5 1 3 2
ADDRESS 525 E. Alondra PHONE (213) 532-0730
CITY, STATE, ZIP Gardena, CA 90248

15 PICK-UP DATE 7-2-81 Time 1:00 ☐ AM ☒ PM
16 [signature] DRIVER — Signature of Authorized Agent and Title — Date 7-2-81

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

17 NAME BARON • BLAKESLEE
EPA NO. C A D 0 9 7 4 6 5 1 3 2
PHONE NO. (213) 532-0730

18 QUANTITY (If Measured) 196 NA gal / 51 3/4 gal
19 STATE FEE (If Any)

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:
NOT ALL 111 TRAVE 1 DRUM LEFT

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

22 Designated TSD Facility Name
EPA NO.

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☒ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☒ Recycle

23 [signature] Signature of Authorized Agent and Title — Date Accepted 7-7-81

Copy 1–WHITE: TSD Facility Keeps (Send Copy to DOHS) Copy 2–YELLOW: To Transporter from TSDF Copy 3–PINK: To Generator from TSDF Copy 4–GOLDENROD: Generator Keeps (Send Copy to DOHS)

REVISED 11-80

# CALIFORNIA HAZARDOUS WASTE MANIFEST

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

See reverse side for Instructions.
Please type or print clearly. Press Hard.

(1) Manifest Number 481-007852

**GENERATOR** (Generator Must Complete)

(2) Name [illegible]
EPA NO. CA0041162330
Address 10445 [illegible] Phone No. [illegible]
City, State, Zip [illegible] 11331
Order Placed By [illegible] ORDER DATE 6-2-81
P.O./CONTRACT NO.

(3) DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
Name Lakewood Oil [illegible]
EPA NO. CA0009677808
Address 12015 E [illegible]
City, State, Zip [illegible]
Phone No. [illegible] 863 8755

(4) ALTERNATE TSD FACILITY
Name
EPA NO.
Address
City, State, Zip
Phone No.

| (5) U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE Oil, N.O.S. | Combustible Liq | NA1270 | 570 | GALS |
| WASTE | | | | |

CONTAINERS: NUMBER
TYPE: ☐ DRUMS ☐ BAGS ☐ CARTONS ☒ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

(6) WASTE CATEGORY 46.64
(7) EX. HAZ. WASTE PERMIT NO. NA
(8) GENERATING PROCESS Machine Tool Coolant

LIST COMPONENTS:

| (9) | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|---|
| A. | [illegible] | 55 | 50 | ☒ % ☐ ppm. | E. | | | | ☐ % ☐ ppm. |
| B. | [illegible] | 45 | 40 | ☒ % ☐ ppm. | F. | | | | ☐ % ☐ ppm. |
| C. | | | | ☐ % ☐ ppm. | G. | | | | ☐ % ☐ ppm. |
| D. | 7 | | | ☐ % ☐ ppm. | Non Hazardous Material | % | | | |

(10) WASTE PROPERTIES: pH ☐ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen
(11) PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other
(12) SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

(13) [signature] Signature of Authorized Agent and Title — 6/2/81 Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

(14) NAME [illegible]
EPA NO.
ADDRESS [illegible] PHONE NO. [illegible]
CITY, STATE, ZIP [illegible]
JOB NO.
UNIT NO.
(15) PICK-UP DATE 6-2-81
TIME 10:30 ☒ AM ☐ PM
(16) [signature] Signature of Authorized Agent and Title — 6-2-81 Date

**TSD FACILITY** (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME
EPA NO.
PHONE NO.
(18) QUANTITY (If Measured) 1420
(19) STATE FEE (If Any) $
(20) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT: Waste Co-mingled with unmanifested used oil
IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
(22) NAME
EPA NO.
(21) HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Reuse ☐ Storage/Transfer

(23) Henry F Oier Signature of Authorized Agent and Title — 6-2-81 Date Accepted

[illegible] AFTER SIGNED BY TRANSPORTER (SEND PHOTOCOPY TO DDHS)

CALIFORNIA HAZARDOUS WASTE MA...

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number

...e reverse side for instructions.
...ease type or print clearly. Press Hard.

**GENERATOR** (GENERATOR MUST COMPLETE)

Name: Hydraulic Research
EPA #: CAD041162330
Address: 12137 Montefiore Phone: 896-2411
City, State, Zip: Pacoima

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name: BARON • BLAKESLEE
EPA #: CAD097465132
Address: 525 E. Alondra Phone: (213) 532-0730
City, State, Zip: Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address
City, State, Zip
Phone

NUMBER OF CONTAINERS: 13
TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE Blacktron TF | ORME | 9189 | 54 | Gal |
| WASTE | | | | |

6 Waste Category: 64

7 Ext. Haz. Waste Permit No.

8 Generating Process: Vapor Degreaser

| LIST COMPONENTS | CONCENTRATION RANGE UPPER | CONCENTRATION RANGE LOWER | UNITS |
|---|---|---|---|
| A. Blacktron TF | 90 | 80 | ☒ % ☐ ppm |
| B. oil | 10 | 20 | ☒ % ☐ ppm |
| C. | | | ☐ % ☐ ppm |
| D. | | | ☐ % ☐ ppm |

LIST COMPONENTS:
E.
F.
G.
Non-Hazardous Material %
☐ Sensitizer ☐ Carcinogen/Mutagen

10 WASTE PROPERTIES: pH 7 ☒ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive
11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other
12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☐ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] (Receiving Clerk) 5-14-81
Signature of Authorized Agent and Title — Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME: BARON • BLAKESLEE PHONE: (213) 532-0730
ADDRESS: 525 E. Alondra
CITY, STATE, ZIP: Gardena, CA 90248

15 PICK-UP DATE: 1230 ☐ AM ☒ PM
EPA NO. CAD097465132
16 [signature] 5-14-81
Signature of Authorized Agent and Title — Date

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

17 NAME: BARON • BLAKESLEE
EPA NO. CAD097465132
PHONE NO. (213) 532-0730

18 QUANTITY (If Measured): 598 gals
19 STATE FEE (If Any)

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☒ Recycle

EPA NO. 5-15-81
Date Accepted

22 Designated TSD Facility Name

23 [signature] Super.
Signature of Authorized Agent and Title

...YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to ...

# CALIFORNIA HAZARDOUS WASTE MANIFEST

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

...de for instructions.
...e or print clearly. Press Hard.

1 Manifest Number 428 — 004827

BL 27496

**GENERATOR** (GENERATOR MUST COMPLETE)

Name HYDRAULIC RESEARCH, TEXTRON
EPA # C A D 0 4 1 1 6 2 3 3 0
Address 10445 GLENOAKS BLVD. Phone (805) 259-4030
City, State, Zip PACOIMA, CA 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name OIL AND SOLVENT PROCESS COMPANY
EPA # C A D 0 0 8 3 0 2 9 0 3
Address 1704 West First Street Phone (213) 334-5117
City, State, Zip Azusa, California 91702

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE FOOD SOLVENT NOS | ORM-E | UN2831 | ~~450~~ 400 | GALLONS |
| WASTE | | | | |

NUMBER OF CONTAINERS 8
TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

6 Waste Category 63 7 Ext. Haz. Waste Permit No. NA 8 Generating Process PARTS CLEANING

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| 9 A 111 TRICHLOROETHANE | 85 | 80 | ☒% ☐ppm | E | | | ☐% ☐ppm. |
| B INHIBITOR | 3 | 1 | ☒% ☐ppm | F | | | ☐% ☐ppm. |
| C METHYLENE CHLORIDE | 3 | 0 | ☒% ☐ppm | G | | | ☐% ☐ppm. |
| D PERCHLORETHYLENE | 3 | 0 | ☒% ☐ppm | Non-Hazardous Material 25 15 % | | | |

10 WASTE PROPERTIES: pH 7 ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other MAKE SURE ALL BUNGS ARE TIGHT AND NONE OF THE DRUMS ARE LEAKING

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

13 [signature] Haz. Waste Coord. 4/23/81
Signature of Authorized Agent and Title Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME OIL AND SOLVENT PROCESS COMPANY
ADDRESS 1704 West First Street PHONE (213) 334-5117
CITY, STATE, ZIP Azusa, California 91702

15 PICK-UP DATE 4-23-81
EPA NO. C A D 0 0 8 3 0 2 9 0 3 Time 11:00 ☒ AM ☐ PM

16 [signature] Hartman Driver 4-23-81
Signature of Authorized Agent and Title Date

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

17 NAME Oil and Solvent Process Company
EPA NO. C A D 0 0 8 3 0 2 9 0 3
PHONE NO. (213) 334-5117

18 QUANTITY (If Measured) 392 gallons
19 STATE FEE (If Any) None

21 HANDLING OR DISPOSAL METHOD:
☐ Recycling for Customer
☒ Recycling
☐ Landfill

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:
n/a

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name n/a EPA NO. n/a

23 [signature] 4-23-81
Signature of Authorized Agent and Title Date Accepted
Mary Koenig / Manifest Secretary

Copy 1—WHITE: TSD Facility Keeps (Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to DOHS)

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

555-001178
① MANIFEST NUMBER

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEKTRONIX
EPA NO. CAD041163386
ADDRESS 10445 ALENDALE BLVD.
CITY, STATE, ZIP CODE JACUMA CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 3/16/81
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME OLYMPIC OIL COMPANY
EPA NO. CAD000629618
ADDRESS 5156 TRIGGS STREET
CITY, STATE, ZIP CODE COMMERCE CA 90022
PHONE NO. (213) 269-0170

## ④ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER 10 |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE LIQ | UN 1993 | 510 | GALS | ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☐ TANK TRUCK ☐ OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 64
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS BUBBLE TESTING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|
| A | ETHYL ALCOHOL | 97 | 85 | ☑ % ☐ PPM |
| B | METHYL ALCOHOL | 4 | 3 | ☑ % ☐ PPM |
| C | ETHYL ACETATE | 1 | 0 | ☑ % ☐ PPM |
| D | METHYL ISOBUTYL KETONE | 1 | 0 | ☑ % ☐ PPM |
| E | WATER | 7 | 6 | ☑ % ☐ PPM |
| F | | | | ☐ % ☐ PPM |
| G | | | | ☐ % ☐ PPM |

NONHAZARDOUS MATERIAL ____ %

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER MAKE SURE ALL BUNGS ARE TIGHT AND NONE OF THE DRUMS ARE LEAKING

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn Hazardous Waste Coord. — SIGNATURE OF AUTHORIZED AGENT & TITLE
DATE SHIPPED 3/18/81

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Olympic Oil Company
EPA NO. CAD000629618
ADDRESS 5156 Triggs Street
CITY, STATE, ZIP CODE Commerce, CA. 90022
PHONE NO. (213) 269-0170

JOB NO.
UNIT NO. 4

⑮ PICK-UP DATE 3-18-1981
TIME 12.30 ☐ AM ☑ PM

⑯ [signature] — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME [illegible]
EPA NO. [illegible]

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY): $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☒ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME
EPA NO.

㉓ [signature] — SIGNATURE OF AUTHORIZED AGENT & TITLE
DATE ACCEPTED 3-19-81

REVISED 11/80

341170

BC#031-30

# CALIFORNIA HAZARDOUS WASTE MANIFEST

See reverse side for instructions.
Please type or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 428 — 000642

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name HYDRAULIC RESEARCH, TEXTRON
EPA # CAD041116233 0
Address 10445 GLENOAKS Phone (800) 259-4030
City, State, Zip PACOIMA, CA. 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name OIL AND SOLVENT PROCESS COMPANY
EPA # CAD008302903
Address 1704 West First Street Phone (213) 334-5117
City, State, Zip Azusa, California 91702

4 Alternate TSD Facility
Name NONE
EPA #
Address Phone
City, State, Zip

5

| U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE F002 ~~WASTE 1H TRICHLOROETHANE~~ SOLVENT NOS | ORM-E | UN2831 | 750 GAL | GAL |
| WASTE F002-SOLVENT N.O.S. ORM-E | | | 750 | GALLONS |

NUMBER OF CONTAINERS 15
TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

6 Waste Category 63 7 Ext. Haz. Waste Permit No. NA 8 Generating Process PARTS CLEANING

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|
| 9 A. 111 TRICHLOROETHANE | 85 | 80 | ☒% ☐ppm. |
| OMIT B. ~~OIL (NON-HAZ)~~ | ~~25~~ | ~~15~~ | ☒% ☐ppm. |
| C. INHIBITOR | 3 | 1 | ☒% ☐ppm. |
| D. METHYLENE CHLORIDE | 3 | 0 | ☒% ☐ppm. |
| E. PERCHLRETHYLENE | 3 | 0 | ☒% ☐ppm. |
| F. | | | ☐% ☐ppm. |
| G. | | | ☐% ☐ppm. |

Non-Hazardous Material 25 15 %

10 WASTE PROPERTIES: pH 7 ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other MAKE SURE ALL BUNGS ARE TIGHT AND NONE OF THE DRUMS ARE LEAKING

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 Chuck Youngblom Hazardous Waste Coord. 3/5/81
Signature of Authorized Agent and Title Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME OIL AND SOLVENT PROCESS COMPANY
ADDRESS 1704 West First Street PHONE (213) 334-5117
CITY, STATE, ZIP Azusa, California 91702

15 PICK-UP DATE 3-5-81
EPA NO. CAD008302903 Time 1:05 ☐ AM ☒ PM

16 [signature] (DRIVER) 3-5-81
Signature of Authorized Agent and Title Date

**TSD FACILITY** (FACILITY-OPERATOR MUST COMPLETE)

17 NAME Oil and Solvent Process Company 18 QUANTITY (If Measured) 584 GALLONS
EPA NO. CAD008302903 19 STATE FEE (If Any) NONE
PHONE NO. (213) 334-5117

21 HANDLING OR DISPOSAL METHOD:
☐ Recycling for Customer
☒ Recycling
☐ Landfill

INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:
4 GALLONS DIFFERENCE between MANIFEST & T.S.D. Facility MEASUREMENT.

WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
Designated TSD Facility Name N/A EPA NO. N/A

23 Roy Cammack Supervisor Shipping & Rec. 3-5-81
Signature of Authorized Agent and Title Date Accepted

TSD Facility Keeps (Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to DOHS)

...ted by ... the date that the ... monthly basis of ... fer activities, the ... th copies of all ... manifest subm...

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
Please type or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 — 341170

**GENERATOR** (GENERATOR MUST COMPLETE)

Name HYDRAULIC RESEARCH, TEXTRON
EPA # C A D 0 4 1 1 6 2 3 3 0
Address 10445 GLENOAKS Phone (805) 259-4030
City, State, Zip PACOIMA CA. 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name BARON • BLAKESLEE
EPA # C A D 0 9 7 4 6 5 1 3 2
Address 525 E. Alondra Phone (213) 532-0730
City, State, Zip Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

| U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS | NUMBER OF CONTAINERS 11 |
|---|---|---|---|---|---|
| WASTE HAZARDOUS WASTE LIQUID N.O.S | ORM-E | NA 9189 | 550 | GALS | TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER |
| WASTE | | | | | |

Waste Category 63 7 Ext. Haz. Waste Permit No. NA 8 Generating Process PARTS CLEANING

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| A. FREON | 95 | 90 | ☒ % ☐ ppm | E. | | | ☐ % ☐ ppm |
| B. OIL | 10 | 5 | ☒ % ☐ ppm | F. | | | ☐ % ☐ ppm |
| C. | | | ☐ % ☐ ppm | G. | | | ☐ % ☐ ppm |
| D. | | | ☐ % ☐ ppm | Non-Hazardous Material % | | | |

WASTE PROPERTIES: pH 7 ☐ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☒ Other

SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other MAKE SURE ALL BUNGS ARE TIGHT AND NONE OF THE DRUMS ARE LEAKING

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.**

13 [signature] Hazardous Waste Corp. 3-9-81
Signature of Authorized Agent and Title Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

TRANSPORTER NAME BARON • BLAKESLEE
ADDRESS 525 E. Alondra PHONE (213) 532-0730
CITY, STATE, ZIP Gardena, CA 90248

15 PICK-UP DATE
EPA NO. C A D 0 9 7 4 6 5 1 3 2 Time ☐ AM ☐ PM
16 [signature] 3-9-81
Signature of Authorized Agent and Title Date

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

NAME BARON • BLAKESLEE 18 QUANTITY (If Measured)
EPA NO. C A D 0 9 7 4 6 5 1 3 2 19 STATE FEE (If Any)
PHONE NO. (213) 532-0730

INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
Designated TSD Facility Name EPA NO.

23 Signature of Authorized Agent and Title Date Accepted

TSD Facility Keeps (Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to DOHS)

TYPE OR PRINT CLEARLY (PLEASE TYPE)
PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001038

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH
EPA NO. E A D 0 4 1 1 6 2 3 3 0
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGTOWN
P.O./CONTRACT NO. ORDER DATE 1/15/81

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME B.F.K.
EPA NO.
ADDRESS 2210 AZUSA AVE
CITY, STATE, ZIP CODE WEST COVINA CA 9
PHONE NO. 965-0916

## ④ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID NOS | D001 | UN 1993 | | | X TANK TRUCK; DRUMS; BAGS; CARTONS; DUMP TRUCK; OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 64

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|
| A | STODDARD SOLVENT D001 | 50 | | % PPM |
| B | H2O | 50 | | % PPM |
| C | | | | PPM |
| D | | | | PPM |
| E | | | | |
| F | | | | |
| G | | | | |

⑦ EX. HAZ. WASTE PERMIT NO. NA

⑧ GENERATING PROCESS FUEL TESTING

⑩ WASTE PROPERTIES:
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY — PH 5
☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
☐ NONHAZARDOUS MATERIAL
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ GAS ☐ RESPIRATOR ☐ OTHER

NONHAZARDOUS MATERIAL — CONC. RANGE UPPER / LOWER / UNITS: ☐ % ☐ PPM

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngtown — SIGNATURE OF AUTHORIZED AGENT & TITLE — 1/15/81 DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. C A D 0 0 0 6 2 8 6 3 6
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3276
UNIT NO. 1

⑮ PICK-UP DATE 1-15-81
TIME 4:30 ☐ AM ☒ PM

⑯ [signature] — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME B.F.K.
EPA NO. C A D 0 6 2 7 8 6 2 4 9

⑱ QUANTITY (IF MEASURED) 1722
⑲ STATE FEE (IF ANY) $ 17.22

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD
☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓ [signature] — SIGNATURE OF AUTHORIZED AGENT & TITLE — 1-16-81 DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.
PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

$190.00 Ton

① MANIFEST NUMBER 335 - 001046

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD
CITY, STATE, ZIP CODE PACOIMA CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNG/JOHN ORDER DATE 1/28/81
P.O. CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME B.K.K.
EPA NO. CAD066726749
ADDRESS 2210 S. AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA CA.
PHONE NO. 965-0916

## ④ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID NOS | FLAMMABLE LIQ. | UN1993 | 2000GAL | | DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK [ ] TANK TRUCK [X] OTHER [ ] |
| WASTE | | | | | |

⑥ WASTE CATEGORY 43 & 66
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|---|
| A | Cooling Oil | 45 | 40 | ✓ | |
| B | STODDARD SOLVENT D001 | 15 | 10 | ✓ | |
| C | H2O | 40 | 35 | ✓ | |
| D | | | | | |
| E | | | | | |
| F | | | | | |
| G | | | | | |

NONHAZARDOUS MATERIAL %

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Young — SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED 1/29/81

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3286
UNIT NO. 1
⑮ PICK-UP DATE 1-29-81
TIME [ ] AM [ ] PM
⑯ Tom Martin — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.
⑱ QUANTITY (IF MEASURED) 1000 GAL
⑲ STATE FEE (IF ANY) $
⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT
㉑ HANDLING OR DISPOSAL METHOD:
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMENT
[ ] TREATMENT (SPECIFY)
[ ] RECOVERY OR REUSE [ ] STORAGE/TRANSFER
㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.
㉓ SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001076

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAK BLVD
CITY STATE ZIP CODE PACOIMA CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGSON NO. ORDER DATE 2/19/81
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME ENVIRONMENTAL PROTECTION CORP
EPA NO.
ADDRESS 3046 19TH
CITY STATE ZIP CODE BAKERSFIELD
PHONE NO. 805 768 4806

④ ALTERNATE TSD FACILITY
NAME BKI CORP
EPA NO.
ADDRESS 2210 S. ACUSA
CITY STATE ZIP CODE [illegible] WESTCOVINA
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE LIQ | UN 1993 | 2000 | GAL | DRUMS / BAGS / CARTONS / DUMP TRUCK |
| WASTE | | | | | X TANK TRUCK / OTHER |

⑥ WASTE CATEGORY 43 & 66
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|---|
| A | Cooling Oil | 45 | 40 | ✓ | |
| B | STODDARD Solvent Dool | 10 | 8 | ✓ | |
| C | H 20 | 45 | 35 | ✓ | |
| D | | | | | |
| E | | | | | |
| F | | | | | |
| G | | | | | |

NONHAZARDOUS MATERIAL

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngson — SIGNATURE OF AUTHORIZED AGENT & TITLE — 2/20/81 DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY STATE ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3325
UNIT NO.

⑮ PICK-UP DATE 2-20-81
TIME ☐ AM ☐ PM

⑯ [signature] SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME [signature]
EPA NO. [illegible]

⑱ QUANTITY (IF MEASURED) see 1103
⑲ STATE FEE (IF ANY) $

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓ [signature] SIGNATURE OF AUTHORIZED AGENT & TITLE — 3-3-81 DATE ACCEPTED

REVISED 11/80

CALIFORNIA HAZARDOUS WASTE MANIFEST

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

*Reverse side for instructions.*
Please type or print clearly. Press Hard.

1 Manifest Number **147 000066**

MAR 16 1981

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name: HYDROLIC RESEARCH
EPA #: CAD041162330
Address: 10445 Glenoaks Phone: 805/259-4030
City, State, Zip: Pacoima 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name: CASMALIA DISPOSAL
EPA #: CAD020748125
Address: Phone:
City, State, Zip: Casmalia

4 Alternate TSD Facility
Name:
EPA #:
Address: Phone:
City, State, Zip:

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE See attached list | | | 5 Gal | 3 |
| WASTE | | | | |

NUMBER OF CONTAINERS
TYPE: [X] DRUMS [ ] BAGS [ ] CARTONS [ ] TANK TRUCK [ ] DUMP TRUCK [ ] OTHER

6 Waste Category: 41
7 Ext. Haz. Waste Permit No.:
8 Generating Process:

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNIT |
|---|---|---|---|---|---|---|---|
| 9 A | | | [ ] % [ ] ppm | E | | | [ ] % [ ] |
| B | | | [ ] % [ ] ppm | F | | | [ ] % [ ] |
| C | | | [ ] % [ ] ppm | G | | | [ ] % [ ] |
| D | | | [ ] % [ ] ppm | Non-Hazardous Material % | | | |

10 WASTE PROPERTIES: pH ____ [X] Toxic [ ] Flammable [X] Corrosive/Irritant [ ] Reactive [ ] Sensitizer [ ] Carcinogen/Mutagen

11 PHYSICAL STATE: [X] Solid [X] Liquid [ ] Sludge [ ] Slurry [ ] Gas [ ] Other

12 SPECIAL HANDLING INSTRUCTIONS: [X] Gloves [ ] Goggles [ ] Respirator [ ] Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] Hazardous Waste Coord. — Signature of Authorized Agent and Title
2-17-81 — Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME: Containerized Chemical Disposal Inc.
ADDRESS: P. O. Box 1142 PHONE: (213) 445-5344
CITY, STATE, ZIP: Monrovia, CA 91016

15 PICK-UP DATE:
EPA NO.: CAT000611483 Time: 915 [X] AM

16 [signature] — Signature of Authorized Agent and Title
2-17-81 — Date

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE) 48977

17 NAME: Casmalia Disposal
EPA NO.: CAD020748125
PHONE NO.:

18 QUANTITY (If Measured):
19 STATE FEE (If Any):

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
[ ] Surface Impoundment [ ] Landfill
[ ] Injection Well [ ] Land Treatment
[ ] Treatment (Specify)
[ ] Recovery or Re-use [ ] Storage/Transfer
[ ] Recycle

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name:
EPA NO.:

23 [signature] — Signature of Authorized Agent and Title
2-18-81 — Date Accepted

Copy 1—WHITE: TSD Facility Keeps
Copy 2—YELLOW: To Transporter from TSDF
Copy 3—PINK: To Generator from TSDF
Copy 4—GOLDENROD: Generator Keeps
Copy 5—GREEN: TSD Facility Sends to DOHS
Copy 6—BLUE: Generator Sends to DOHS · DOHS

# Hydraulic Research, Pacoima

| | | |
|---|---|---|
| | Drum #1 | ORM- |
| 1 lb | Nickel Ammonium Sulfate | NA 913 |
| | Drum #2 Corrosive NOS | |
| 1 lb | Chromium Oxide | |
| ¼ lb | Sodium Bisulfate | UN 28 |
| 1 lb | Arsenic Trioxide | NA 1561 |
| 1 gal | Dimethyl Sulfoxide in oil | |
| | Drum #3 Poison B | |
| .1 lb | Zinc chips | UN 16 |
| .5 lb | Uranyl | |
| .4 lb | Zinc Sulfid | |
| .7 lb | Sodium Silicate | |
| 1 oz | Magnesium Sulfid | |
| .1 lb | Dieldrin | |
| 1 lb | Freon R11 | |
| .1 lb | Potassium Perchlorate | |
| .4 lb | " Iodide | |
| .1 lb | Sodium Cyanide | NA 1935 |
| .1 | Lead Acetate | UN 17 |
| .2 lb | Thallium Chloride | |

| | | |
|---|---|---|
| | Drum #3 (Cont) | |
| .3 lb | Potassium Ferrocyanide | |
| .1 lb | Lead Oxide | |
| ½ lb | Stannous Chloride | NaOH |
| .5 lb | Potassium Bromide | |
| .1 lb | Cadmium Sulfate | |
| .7 lb | Formaldehyde | use |
| .7 lb | Sodium Bisulfate | use |

| ept. | Product | Product waste | | Container | |
|---|---|---|---|---|---|
| | | Use amount | Disposed amount | Waste Quan. | Waste meth. |
| 037 | CHROMIUM OXIDE | CORR (T) | 1.0 lb | — | |
| 1 | SODIUM BISULFATE | " (T) | 0.25 lb | UN 2837 | |
| — | NICKEL AMMONIUM SULFATE | | 1.0 lb | | ORM-E |
| — | ZINC (ELEMENTAL) POWDER | | 0.1 lb | — | |
| x | CHROMIUM TRIOXIDE | | 0.1 lb | | |
| x | PHENOL (CRYSTALLINE) | | 0.8 lb | | |
| v | ZINC (SOLID) | — | 0.4 lb | — | |
| v | SODIUM SILICATE | — | 0.7 lb | — | |
| x | MAGNESIUM (SOLID) | | 1 oz | ✓ | |
| x | IODINE (SOLID) | | 0.1 lb | — | |
| v | FREON R11 | — | 1.0 lb | — | |
| x | POTASSIUM BICHROMATE | | 0.7 lb | — | |
| v | POTASSIUM IODIDE | | 0.4 lb | — | |
| x | SODIUM DICHROMATE | | 0.1 lb | | |
| v | LEAD NITRATE | — | 0.1 lb | | |
| x | CALCIUM CHLORIDE | — | 0.2 lb | — | |
| v | POTASSIUM FERRICYANIDE | — | 0.3 lb | — | |
| x | LEAD OXIDE | | 0.1 lb | | |
| x | STANNOUS CHLORIDE | | 0.25 lb | | |
| v | POTASSIUM BROMIDE | — | 0.2 lb | — | |
| x | CADMIUM (SOLID) | | 0.1 lb | | |
| v | FORMALDEHYDE | | 0.5 lb | | |
| v | SODIUM BISULFATE | | 0.7 lb | UN 2837 | |
| v | Dimethyl Sulfoxide | | 1 gal | | |

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001131

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CAD041116230
ADDRESS 10445 GLENOAKS BLVD
CITY, STATE, ZIP CODE PACOIMA CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 3/25/81
P.O. CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME ENVIRONMENTAL PROTECTION CORP
EPA NO. CAT080010283
ADDRESS 3040 19TH ST
CITY, STATE, ZIP CODE BAKERSFIELD
PHONE NO. 805 768-4806

## ④ ALTERNATE TSD FACILITY

NAME BKK CORP
EPA NO. CAD016717816719
ADDRESS 2210 AZUSA AVE
CITY, STATE, ZIP CODE WEST COVINA
PHONE NO. 213 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE LIQ | UN1993 | 2000 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☒ TANK TRUCK ☐ OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 43 & 66
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|
| A | Cooling Oil | 45 | 40 | ☑ % ☐ PPM | E | | | ☐ % ☐ PPM |
| B | STODDARD Solvent Dool | 10 | 8 | ☑ % ☐ PPM | F | | | ☐ % ☐ PPM |
| C | WATER | 45 | 35 | ☑ % ☐ PPM | G | | | ☐ % ☐ PPM |
| D | | | | ☐ % ☐ PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn — SIGNATURE OF AUTHORIZED AGENT & TITLE — 3/26/81 DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3371
UNIT NO. 1

⑮ PICK-UP DATE 3-26-81
TIME ☐ AM ☐ PM

⑯ Tom Martin — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME EPC Westside Disp
EPA NO. CAT080010283

⑱ QUANTITY (IF MEASURED) 2000 gal
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☒ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME
EPA NO.

㉓ Evelyn Skaggs — SIGNATURE OF AUTHORIZED AGENT & TITLE — 3-26-81 DATE ACCEPTED

Th. 7 EPC #W 723

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001039

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 3/10/81
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY 3-31-81
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME ENVIRONMENTAL PROTECTION CORP
EPA NO. CAT080010283
ADDRESS 3040 19TH ST
CITY, STATE, ZIP CODE BAKERSFIELD
PHONE NO. (805) 768-4806

④ ALTERNATE TSD FACILITY
NAME BKK CORP
EPA NO. CAD087786746
ADDRESS 2210 AZUSA AVE
CITY, STATE, ZIP CODE WEST COVINA
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE LIQ | UN1993 | 2000 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | | | | | ☒ TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 43 & 66
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|---|
| A | Cooling oil | 45 | 40 | ☒ % ☐ PPM | E | | | | ☐ % ☐ PPM |
| B | Stoddard Solvent Dool | 10 | 8 | ☒ % ☐ PPM | F | | | | ☐ % ☐ PPM |
| C | H2O | 45 | 35 | ☒ % ☐ PPM | G | | | | ☐ % ☐ PPM |
| D | | | | ☐ % ☐ PPM | NONHAZARDOUS MATERIAL | | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn — SIGNATURE OF AUTHORIZED AGENT & TITLE — 3/11/81 DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3352
UNIT NO. 1

⑮ PICK-UP DATE 3-11-81
TIME ☐ AM ☐ PM

⑯ Tom Martin — SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

Ph. 3 EPC #W 723

⑰ NAME EPC Westside Disp
EPA NO. CAD080010283

⑱ QUANTITY (IF MEASURED) 2000 gal
⑲ STATE FEE (IF ANY) $

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☒ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓ Evelyn Skaggs — SIGNATURE OF AUTHORIZED AGENT & TITLE — 3-25-81 DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 041097

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH TEXTRON
EPA NO. CAD041116230
ADDRESS 10445 GLENOAKS BLVD
CITY, STATE, ZIP CODE PACOIMA, CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 3/2/81
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY

NAME B.K.K.
EPA NO. CAD066778617499
ADDRESS 2210 AZUSA AVE
CITY, STATE, ZIP CODE WEST COVINA CA. 9
PHONE NO. 9650916

## ④ ALTERNATE TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME ~~ENVIRO~~ ENVIRONMENTAL PROTECTOR
EPA NO. CAT080011028 3
ADDRESS 3040 19TH ST
CITY, STATE, ZIP CODE BAKERSFIELD, CA.
PHONE NO. (805) 768-4806

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE LIQ | UN1993 | 2000 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | | | | | ☒ TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 43 & 66
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|
| A | COOLING OIL | 45 | 40 | ✓ % | ☐ PPM | | | ✓ % | ☐ PPM |
| B | STODDARD SOLVENT D001 | 10 | 8 | ✓ % | ☐ PPM | | | ☐ % | ☐ PPM |
| C | H2O | 45 | 35 | ✓ % | ☐ PPM | | | ☐ % | ☐ PPM |
| D | | | | ☐ % | ☐ PPM | | | | |

NONHAZARDOUS MATERIAL _____ %

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn — SIGNATURE OF AUTHORIZED AGENT & TITLE — 3/2/81 DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3335
UNIT NO. 1
⑮ PICK-UP DATE 3-2-81
TIME 10:00 ☒ AM ☐ PM

⑯ _____ SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

due 1103

⑰ NAME RYK
EPA NO. CAD066778617499
⑱ QUANTITY (IF MEASURED) _____
⑲ STATE FEE (IF ANY) $ _____

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT _____

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY) _____
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME _____
EPA NO. _____

㉓ _____ SIGNATURE OF AUTHORIZED AGENT & TITLE — 3-3-81 DATE ACCEPTED

REVISED 11/80

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
Please type or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number **147000102**

**GENERATOR** (GENERATOR MUST COMPLETE)

CADO41162330 12137 Montague Pacoma CA.

2 Name HYDRAULIC RESEARCH
EPA # [illegible]
Address [illegible] 805/259-4030
City, State, Zip Valencia [illegible]

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name CASMALIA DISPOSAL
EPA # C A D 0 2 0 7 4 8 1 2 5
Address NTU Rd Phone
City, State, Zip Casmalia, Ca

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

5

| U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS | NUMBER OF CONTAINERS |
|---|---|---|---|---|---|
| WASTE Acetic Acid Corrosive Material | | UN2789 | 55 Gal | 2 | TYPE: X DRUMS ☐ BAGS ☐ CARTONS |
| WASTE Sodium Hydroxide Liquid Corrosive Material | | UN1824 | 55 Gal | 2 | ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER |

6 Waste Category 2 5 7 Ext. Haz. Waste Permit No. 8 Generating Process

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| 9 A. | | | ☐% ☐ppm | E. | | | ☐% ☐ppm |
| B. | | | ☐% ☐ppm | F. | | | ☐% ☐ppm |
| C. | | | ☐% ☐ppm | G. | | | ☐% ☐ppm |
| D. | | | ☐% ☐ppm | Non-Hazardous Material | | | % |

10 WASTE PROPERTIES: pH ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen
11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other
12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☐ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 X Chuck Younger Hazardous Waste Coord. 3/18/81
Signature of Authorized Agent and Title — Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME Containerized Chemical Disposal Inc.
ADDRESS P. O. Box 1142 PHONE (213) 445-5344
CITY, STATE, ZIP Monrovia, CA 91016

15 PICK-UP DATE 3-18-81
EPA NO. C A T 0 0 0 6 1 1 4 8 3 Time 1:35 ☒ AM. ☐ PM.
16 R Hagenbuch 3-18-81
Signature of Authorized Agent and Title — Date

**TSD FACILITY** (FACILITY-OPERATOR MUST COMPLETE) M-94 50352

17 NAME Casmalia Disposal 18 QUANTITY (If Measured)
EPA NO. C A D 0 2 0 7 4 8 1 2 5 19 STATE FEE (If Any)
PHONE NO.

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☒ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name EPA NO.

23 Dee Rehmann 3/23/81
Signature of Authorized Agent and Title — Date Accepted

Copy 1—WHITE: TSD Facility Keeps | Copy 2—YELLOW: To Transporter from TSDF | Copy 3—PINK: To Generator from TSDF | Copy 4—GOLDENROD: Generator Keeps
Copy 5—GREEN: TSD Facility Sends to DOHS | Copy 6—BLUE: Generator Sends to DOHS—DOHS

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001058

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME Hydraulic Research, Textron
EPA NO. CAD041162330
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacoima CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 2/6/81
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME B.K.K.
EPA NO. CAD009758749
ADDRESS 2210 Azusa Ave.
CITY, STATE, ZIP CODE West Covina CA.
PHONE NO. 965-0916

## ④ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE Flammable Liquid N.O.S. | Flammable Liq. | UN 1993 | 2000 Gals | | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☒ TANK TRUCK ☐ OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 43 : 66
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS Machine Cleaning

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|
| A | Cooling Oil | 45 | 40 | ☑ % ☐ PPM | E | | | ☐ % ☐ PPM |
| B | Standard Solvent 0001 | 15 | 10 | ☑ % ☐ PPM | F | | | ☐ % ☐ PPM |
| C | H 20 | 40 | 35 | ☑ % ☐ PPM | G | | | ☐ % ☐ PPM |
| D | | | | ☐ % ☐ PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn — SIGNATURE OF AUTHORIZED AGENT & TITLE — 2/9/81 DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3302
UNIT NO. 1

⑮ PICK-UP DATE 2-9-81
TIME 1:00 ☐ AM ☒ PM

⑯ SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME
EPA NO.

㉓ SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001170

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA CA.
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNG JOHN ORDER DATE 4/27/81
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME B.K.K.
EPA NO. CAD067786749
ADDRESS 2210 AZUSA AVE
CITY, STATE, ZIP CODE WEST COVINA, CA.
PHONE NO. (213) 965-0916

## ④ ALTERNATE TSD FACILITY

NAME ENVIRONMENTAL PROD. CORP.
EPA NO. CAT080011028 3
ADDRESS 3640 19TH. ST.
CITY, STATE, ZIP CODE BAKERSFIELD, CA
PHONE NO. (805) 768-4806

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE LIQ. | UN1993 | 2000 | GALS | [ ] DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK; [X] TANK TRUCK [ ] OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 43 E16
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|
| A | Cooling Oil | 45 | 40 | [✓] % [ ] PPM |
| B | Stoddard Solvent | 10 | 8 | [✓] % [ ] PPM |
| C | H 20 | 45 | 35 | [✓] % [ ] PPM |
| D | | | | [ ] % [ ] PPM |
| E | | | | [ ] % [ ] PPM |
| F | | | | [ ] % [ ] PPM |
| G | | | | [ ] % [ ] PPM |

NONHAZARDOUS MATERIAL ____ %

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Young — SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED 4/28/81

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3420
UNIT NO. 1

⑮ PICK-UP DATE 4-28-81
TIME 10.00 [X] AM [ ] PM

⑯ Tom Martin — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMENT
[ ] TREATMENT (SPECIFY)
[ ] RECOVERY OR REUSE [ ] STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME
EPA NO.

㉓ SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001107

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CA0041162330
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA CA. 91331
PHONE NO. (805) 251-4030
ORDER PLACED BY CHUCK YOUNG/JOHN ORDER DATE 4/7/81
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY

NAME ENVIRONMENTAL PROTECTION CORP.
EPA NO. CAT080010283
ADDRESS 3040 19TH ST.
CITY, STATE, ZIP CODE BAKERSFIELD CA
PHONE NO. (805) 326-4806

## ④ ALTERNATE TSD FACILITY

(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME B.K.K.
EPA NO. CAD006775679
ADDRESS 2210 AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA CA
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE LIQ | UN1993 | 2000 | GALS | [ ] DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK; [X] TANK TRUCK [ ] OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 43 & 66
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | Cooling Oil | 45 | 40 | [✓] % | [ ] PPM | E | | | [ ] % | [ ] PPM |
| B | STODDARD SOLVENT D001 | 10 | 8 | [✓] % | [ ] PPM | F | | | [ ] % | [ ] PPM |
| C | H20 | 45 | 35 | [✓] % | [ ] PPM | G | | | [ ] % | [ ] PPM |
| D | | | | [ ] % | [ ] PPM | NONHAZARDOUS MATERIAL | | | | % |

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ [signature] SIGNATURE OF AUTHORIZED AGENT & TITLE — 4/7/81 DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3389
UNIT NO. 1
⑮ PICK-UP DATE 4-7-81
TIME 11:00 [X] AM [ ] PM

⑯ [signature] SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.
⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $
⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT
㉑ HANDLING OR DISPOSAL METHOD: [ ] SURFACE IMPOUNDMENT [ ] LANDFILL [ ] INJECTION WELL [ ] LAND TREATMENT [ ] TREATMENT (SPECIFY) [ ] RECOVERY OR REUSE [ ] STORAGE/TRANSFER
㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME
EPA NO.
㉓ SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001345

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH TEXTRON
EPA NO. C A D 0 4 1 1 6 2 3 3 0
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (213) 221-4030
ORDER PLACED BY CHUCK TOMLINSON ORDER DATE 7/13/81
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME ERC CORP
EPA NO. C A T 0 8 0 1 0 2 5 8
ADDRESS 3540 19TH
CITY, STATE, ZIP CODE BAKERSFIELD, CA
PHONE NO. (805) 768-4506

## ④ ALTERNATE TSD FACILITY

NAME PSC CORP
EPA NO. C A D 0 7 8 6 7 0 4 9
ADDRESS 7710 ALONDRA AVE
CITY, STATE, ZIP CODE LOS ALAMITOS, CA
PHONE NO. 995-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE LIQ. | UN1993 | 2000 | GALS | DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☐ TANK TRUCK ☒ OTHER ☐ |
| WASTE | | | | | |

⑥ WASTE CATEGORY 43, 63
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE TOOL COOLANT

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | CUTTING OILS | 45 | 40 | ☒ % | ☐ PPM | E | | | ☐ % | ☐ PPM |
| B | SURFACTANT DEOI | 7 | 5 | ☒ % | ☐ PPM | F | | | ☐ % | ☐ PPM |
| C | WATER | 45 | 40 | ☒ % | ☐ PPM | G | | | ☐ % | ☐ PPM |
| D | | | | ☐ % | ☐ PPM | NONHAZARDOUS MATERIAL | WATER SOLUBLE | | % | |

⑩ WASTE PROPERTIES: PH 9 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Tomlinson Hazardous Waste Coord. 7/14/81
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. C A D 0 0 0 6 2 8 6 3 6
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3541
UNIT NO. 1
⑮ PICK-UP DATE 7-14-81
TIME 1:00 ☐ AM ☒ PM

⑯ Tom Martin (Driver)
SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

PH 9.0 F-25 JW-01 EPC # 16182

⑰ NAME [illegible] OF STOCKTON, INC.
EPA NO. [illegible]
⑱ QUANTITY (IF MEASURED) 2000 gal. 14 bbls
⑲ STATE FEE (IF ANY) $
⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☒ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓ [illegible]
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED 7-17-81

REVISED 11/80

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
**Please type or print clearly. Press Hard.**

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number **147 000234**

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name: HYDRAULIC RESEARCH
EPA #: CAD041162330
Address: 10445 Glenoaks Phone: 805/259-4030
City, State, Zip: Pacoima, Ca

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name: CASMALIA DISPOSAL
EPA #: CAD020748125
Address: NTU RD Phone:
City, State, Zip: Casmalia

4 Alternate TSD Facility
Name:
EPA #:
Address: Phone:
City, State, Zip:

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS | NUMBER OF CONTAINERS |
|---|---|---|---|---|---|
| WASTE See attached list | | | 55gal | 4 | TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER |
| WASTE | | | | | |

6 Waste Category: 7 Ext. Haz. Waste Permit No: 8 Generating Process:

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| 9 A. | | | ☐% ☐ppm | E. | | | ☐% ☐ppm |
| B. | | | ☐% ☐ppm | F. | | | ☐% ☐ppm |
| C. | | | ☐% ☐ppm | G. | | | ☐% ☐ppm |
| D. | | | ☐% ☒ppm | Non-Hazardous Material | | | % |

10 WASTE PROPERTIES: pH ☒ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen
11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☒ Sludge ☐ Slurry ☐ Gas ☐ Other
12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☐ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] Hazardous Waste Coord. 7/13/81
Signature of Authorized Agent and Title — Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

15 PICK-UP DATE 7/13/81

14 TRANSPORTER NAME: Containerized Chemical Disposal Inc.
ADDRESS: P. O. Box 1142 PHONE: (213) 445-5344
CITY, STATE, ZIP: Monrovia, CA 91016

EPA NO. CAT000611483 Time 10/15 ☒AM ☐PM

16 [signature] Res 7/10/81
Signature of Authorized Agent and Title — Date

**TSD FACILITY** (FACILITY-OPERATOR MUST COMPLETE) #55250

17 NAME: Casmalia Disposal
18 QUANTITY (If Measured):
EPA NO. CAD020748125
19 STATE FEE (If Any):
PHONE NO.

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☒ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name: EPA NO.

23 Paulette Schelstraete
Signature of Authorized Agent and Title

8-05-81
Date Accepted

Copy 1—WHITE: TSD Facility Keeps — Copy 2—YELLOW: To Transporter from TSDF — Copy 3—PINK: To Generator from TSDF — Copy 4—GOLDENROD: Generator Keeps

Hydraulic Research
10445 Glenoaks
Pacoima, Ca

| | | | | |
|---|---|---|---|---|
| 10 gal | Nitric Acid | Less than 70% | Corrosive Material | NA1760 |
| 1 x 55 gal | Oil, nos | | Combustible liquid | NA1270 |
| 2 x 55 gal | Acid, liquid, nos | | Corrosive Material | NA1760 |

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

FACILITIES ENGINEERING OCT 23 1981

① MANIFEST NUMBER 335 - 001487

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME Hydraulic Research, Textron
EPA NO. CAD 911 62330
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacoima, CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Young-John ORDER DATE 10/5/81
P.O./CONTRACT NO. 211379

③ DESIGNATED TSD FACILITY
NAME Environmental Protection Corp
EPA NO. CAT080010283
ADDRESS 3040 19th Street
CITY, STATE, ZIP CODE Bakersfield, CA.
PHONE NO. (805) 768-4806

④ ALTERNATE TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME B.K.K. Corp.
EPA NO. CAD067786749
ADDRESS 2210 Azusa Ave.
CITY, STATE, ZIP CODE West Covina CA.
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE Combustible Liquid N.O.S. | Combustible Liq. | NA 1993 | 2000 | Gals | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | | | | | ☒ TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 43, 63
⑦ EX. HAZ. WASTE PERMIT NO. N/A
⑧ GENERATING PROCESS Machine Tool Coolant

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|---|
| A | Cutting Oils | 35 | 30 | ☒ % ☐ PPM | E | | | | ☐ % ☐ PPM |
| B | Water | 65 | 60 | ☒ % ☐ PPM | F | | | | ☐ % ☐ PPM |
| C | Stoddard Solvent Dool | 1 | <1 | ☒ % ☐ PPM | G | | | | ☐ % ☐ PPM |
| D | Methyl Ethyl Ketone Dool | <1 | 0 | ☒ % ☐ PPM | NONHAZARDOUS MATERIAL | | | | % |

⑩ WASTE PROPERTIES: PH 9 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN

⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER

⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER Avoid Skin Contact

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ [signature] 10-6-81
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3670
UNIT NO

⑮ PICK-UP DATE 10-6-81
TIME 3:30 ☐ AM ☒ PM

⑯ [signature] (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

JW 0.1 Ph 9.5 EPC# 18401 722

⑰ NAME [illegible]
EPA NO. [illegible]

⑱ QUANTITY (IF MEASURED) 48 Bls
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☒ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME
EPA NO.

㉓ [signature] H 10-15-81
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

...ERSE SIDES FOR ...CTIONS. PLEASE TYPE ...INT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001572

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 11/30/81
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME ENVIRONMENTAL PROTECTION CORP.
EPA NO. CAT080010283
ADDRESS 3040 19TH STREET
CITY, STATE, ZIP CODE BAKERSFIELD
PHONE NO. (805) 768-4806

④ ALTERNATE TSD FACILITY
NAME B.K.K. CORP.
EPA NO. CA0067786747
ADDRESS 2210 AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA CA.
PHONE NO. 965-0716

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | COMBUSTIBLE | NA 1993 | 2000 | GALS | [ ] DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK |
| WASTE | | | | | [X] TANK TRUCK [ ] OTHER |

⑥ WASTE CATEGORY 43, 63
⑦ EX. HAZ. WASTE PERMIT NO. N/A
⑧ GENERATING PROCESS MACHINE TOOL COOLANT

⑨ LIST COMPONENTS:

| | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| A CUTTING OILS | 35 | 30 | [X] % [ ] PPM | E | | | [ ] % [ ] PPM |
| B WATER | 65 | 60 | [X] % [ ] PPM | F | | | [ ] % [ ] PPM |
| C STODDARD SOLVENT | 11 | <1 | [X] % [ ] PPM | G | | | [ ] % [ ] PPM |
| D DENATURED ETHYL ALCOHOL | 2 | 1 | [X] % [ ] PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 9 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

⑬ [signature] 11-30-81
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3740
UNIT NO. 1

⑮ PICK-UP DATE 11-30-81
TIME 2:00 [ ] AM [X] PM

⑯ [signature] (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME EPA Western Disposal Bakersfield CA
EPA NO. [illegible]

⑱ QUANTITY (IF MEASURED) 44 BBL
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD: Field 30
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [X] LAND TREATMENT
[ ] TREATMENT (SPECIFY)
[ ] RECOVERY OR REUSE [ ] STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓ [signature] site att 12-9-81
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
**Please type or print clearly. Press Hard.**

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number **147 000458**

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name HYDRAULIC RESEARCH
EPA # | | | | | | | | | | | | |
Address 10445 Glenoaks Phone 896-2411
City, State, Zip Pacoima 91355

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name CASMALIA DISPOSAL
EPA # | | | | | | | | | | | | |
Address NTU Rd Phone 805-937-8449
City, State, Zip Casmalia 93429

4 Alternate TSD Facility
Name
EPA # | | | | | | | | | | | | |
Address Phone
City, State, Zip

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS | NUMBER OF CONTAINERS 3 |
|---|---|---|---|---|---|
| WASTE See attached list | | | 55gal | 3 | TYPE: XX DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER |
| WASTE | | | | | |

6 Waste Category 7 Ext. Haz. Waste Permit No. 3-2387 8 Generating Process

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| 9 A. | | | ☐% ☐ppm. | E. | | | ☐% ☐ppm. |
| B. | | | ☐% ☐ppm. | F. | | | ☐% ☐ppm. |
| C. | | | ☐% ☐ppm. | G. | | | ☐% ☐ppm. |
| D. | | | ☐% ☐ppm. | Non-Hazardous Material | | | % |

10 WASTE PROPERTIES: pH ☐Toxic ☐Flammable ☐Corrosive/Irritant ☐Reactive ☐Sensitizer ☐Carcinogen/Mutagen
11 PHYSICAL STATE: ☐Solid ☐Liquid ☐Sludge ☐Slurry ☐Gas ☐Other
12 SPECIAL HANDLING INSTRUCTIONS: ☐Gloves ☐Goggles ☐Respirator ☐Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] [illegible] 12/22/[illegible]
Signature of Authorized Agent and Title — Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME Containerized Chemical Disposal Inc.
ADDRESS P. O. Box 1142 PHONE (213) 445-5344
CITY, STATE, ZIP Monrovia, CA 91016

15 PICK-UP DATE
EPA NO. C A T 0 0 0 6 1 1 4 8 3 Time ☐AM ☐PM

16 Signature of Authorized Agent and Title — Date

**TSD FACILITY** (FACILITY-OPERATOR MUST COMPLETE)

17 NAME 18 QUANTITY (If Measured)
EPA NO. | | | | | | | | | | | | |
19 STATE FEE (If Any)
PHONE NO.

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
☐Surface Impoundment ☐Landfill
☐Injection Well ☐Land Treatment
☐Treatment (Specify)
☐Recovery or Re-use ☐Storage/Transfer
☐Recycle

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name EPA NO. | | | | | | | | | | | | |

23 Signature of Authorized Agent and Title — Date Accepted

Copy 1—WHITE: TSD Facility Keeps
Copy 2—YELLOW: To Transporter from TSDF
Copy 3—PINK: To Generator from TSDF
Copy 4—GOLDENROD: Generator Keeps
Copy 5—GREEN: TSD Facility Sends to DOHS
Copy 6—BLUE: Generator Sends to DOHS · DOHS

| | |
|---|---|
| 1 gal. | Methylene Chloride UN1953 U080<br>Hazard Class: ORM-A |
| 2 gal. | Chloroform UN1888 U044<br>Hazard Class: ORM-A |
| 4 gal. | U188/U209<br>Phenol/1.1.2.2 - Tetrachloroethane 60/40 mixture |
| 1 gal. | Waste Heavy Metal Chloride Solution<br>(Strontium, Manganese 1/2, Barium, Calcium, Magnesium)<br>Hazard Class: Toxic |
| 2 1/2 gal. | Butynediol |
| 1/3 gal. | Decahydronapthalene UN1147<br>Hazard Class: Combustible Liquid |
| 1 gal. | Hydrofluoric Acid UN1790, 70% wt.<br>(Refer to extremely Hazard Waste Permit 3-2387)<br>Hazard Class: Corrosive Material |
| 55 gal. | Acetic Acid UN2789<br>Hazard Class: Corrosive Material |

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
Please type or print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 342781

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name HYDRAULIC RESEARCH, TEXTRON
EPA # C A D 0 4 1 1 1 2 3 3 0
Address 10445 Glenoaks blvd. 259-4030
City, State, Zip Valpima, Ca. 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name BARON • BLAKESLEE
EPA # C A D 0 9 7 4 6 5 1 3 2
Address 525 E. Alondra Phone (213) 532-0730
City, State, Zip Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address
City, State, Zip

5

| U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE 111 TRICHLOROETHANE MIXTURE | ORM-A | UN2831 | [illegible] | GALS |
| WASTE | | | | |

NUMBER OF CONTAINERS 4
TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

6 Waste Category 63 7 Ext. Haz. Waste Permit No. NA 8 Generating Process VAPOR DEGREASER

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| 9 A. 111 TRICHLOROETHANE | 85 | 80 | ☒ % ☐ ppm | B. | | | ☐ % ☐ ppm |
| B. OIL | 25 | 15 | ☒ % ☐ ppm | F. | | | ☐ % ☐ ppm |
| C. INHIBITOR | 3 | 1 | ☒ % ☐ ppm | G. | | | ☐ % ☐ ppm |
| D. | | | ☐ % ☐ ppm | Non-Hazardous Material ____ % | | | |

10 WASTE PROPERTIES: pH 7 ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] HAZARDOUS WASTE COND 1-22-82
Signature of Authorized Agent and Title — Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

14 TRANSPORTER NAME BARON • BLAKESLEE
ADDRESS 525 E. Alondra PHONE (213) 532-0730
CITY, STATE, ZIP Gardena, CA 90248

15 PICK-UP DATE
EPA NO. C A D 0 9 7 4 6 5 1 3 2 Time ☐ AM ☒ PM

16 [signature]
Signature of Authorized Agent and Title — Date

**TSD FACILITY** (FACILITY OPERATOR MUST COMPLETE)

17 NAME BARON • BLAKESLEE
EPA NO. C A D 0 9 7 4 6 5 1 3 2
PHONE NO. (213) 532-0730

18 QUANTITY (If Measured)
19 STATE FEE (If Any)

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name
EPA NO.

23 Signature of Authorized Agent and Title — Date Accepted

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

Copy 1—WHITE: TSD Facility Keeps (Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to DOHS)

2166-04749

...ES FOR
...PLEASE TYPE
...ARLY.
...RESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 000112

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD
CITY, STATE, ZIP CODE PACOIMA CA 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGTON ORDER DATE 1-12-82
P.O. CONTRACT NO.

③ DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 ORANGE AVE
CITY, STATE, ZIP CODE LONG BEACH, CA 90807
PHONE NO. 595-9461

④ ALTERNATE TSD FACILITY
NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | COMBUSTIBLE | NA 1993 | 560 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | LIQUID | | | | ☒ TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 64 & 45
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS PARTS CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|
| A | CUTTING OILS | 39 | 38 | ☒ % ☐ PPM | E | | | ☐ % ☐ PPM |
| B | STODDARD SOLVENT | 62 | 61 | ☒ % ☐ PPM | F | | | ☐ % ☐ PPM |
| C | | | | ☐ % ☐ PPM | G | | | ☐ % ☐ PPM |
| D | | | | ☐ % ☐ PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngton HAZARDOUS WASTE COORD 1-13-82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. CAD990669400
ADDRESS P.O. Box [illegible]
CITY, STATE, ZIP CODE [illegible]
PHONE NO. [illegible]

JOB NO. 00297
UNIT NO. #16

⑮ PICK-UP DATE 1-13-82
TIME 11:30 ☒ AM ☐ PM

⑯ Jerry Scotto
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

REVISED 11/80

㉓
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

CALIFORNIA HAZARDOUS WASTE MANIFEST

...or instructions.
...print clearly. Press Hard.

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 317 343279

GENERATOR (GENERATOR MUST COMPLETE)
Name HYDRAULIC RESEARCH, TEXTRON
EPA # C A D 0 4 1 1 6 2 3 3 0
Address 10445 Glencoke blvd. Phone 259-4030
City, State, Zip Pacoima Ca. 91331

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name BARON • BLAKESLEE
EPA # C A D 0 9 7 4 6 5 1 3 2
Address 525 E. Alondra Phone (213) 532-0730
City, State, Zip Gardena, CA 90248

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS |
|---|---|---|---|---|
| WASTE HAZARDOUS WASTE LIQUID (FREON) | ORM-E | NA9189 | 250 | Gals |

NUMBER OF CONTAINERS 5
TYPE: ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

6 Waste Category 84 7 Ext. Haz. Waste Permit No. N/A 8 Generating Process Parts cleaning

| LIST COMPONENTS | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| [illegible] (FREON) | 90 | 80 | ☒% ☐ppm | E | | | ☐% ☐ppm |
| [illegible] | 20 | 10 | ☒% ☐ppm | F | | | ☐% ☐ppm |
| | | | ☐% ☐ppm | G | | | ☐% ☐ppm |
| | | | ☐% ☐ppm | Non-Hazardous Material ____ % | | | |

[illegible] ☒ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen
☐ Sludge ☐ Slurry ☐ Gas ☐ Other
☒ Gloves ☒ Goggles ☐ Respiratory ☐ Other

[illegible] certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the [illegible] Transportation and EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD 1-800-424-8802

13 [signature] HAZARDOUS WASTE (Good) 1-22-82
Signature of Authorized Agent and Title Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)
Name BARON • BLAKESLEE
EPA # C A D 0 9 7 4 6 5 1 3 2
PHONE (213) 532-0730
Gardena, CA 90248

15 PICK-UP DATE 1-22-82
Time [illegible] ☐ AM ☒ PM
[signature] DRIVER 1-22-82
Signature of Authorized Agent and Title Date

[illegible] (FACILITY OPERATOR MUST COMPLETE)
Name BARON • BLAKESLEE
EPA # C A D 0 9 7 4 6 5 1 3 2
Phone (213) 532-0730

18 QUANTITY (If Measured)

[illegible] ANCIES BETWEEN MANIFEST AND SHIPMENT

[illegible] SPECIFY THE DESIGNATED TSD FACILITY

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery of Recycle ☐ Storage/Transfer
☐ Recycle

EPA NO.

23 Signature of Authorized Agent and Title Date Accepted

Copy 1—WHITE: TSD Facility Keeps (Send Copy to DOHS) Copy 2—YELLOW: To Transporter from TSDF Copy 3—PINK: To Generator from TSDF Copy 4—GOLDENROD: Generator Keeps (Send Copy to DOHS)

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA#146—

① MANIFEST NUMBER 000122

## GENERATOR (GENERATOR MUST COMPLETE)

③ NAME HYDRAULIC RESEARCH TEXTRON
EPA NO. C A D 0 4 1 1 6 2 5 3 0
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Young/John ORDER DATE 2-2-82
P.O./CONTRACT NO.

## ⑤ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME FACET ENERGY
EPA NO. C A D 0 0 6 6 9 4 0 0
ADDRESS 3020 ORANGE AVE.
CITY, STATE, ZIP CODE LONG BEACH, CA. 90807
PHONE NO. (213) 595-9481

## ⑧ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑥ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE | UN1993 | 200 | GALS | DRUMS ___ BAGS ___ CARTONS ___ DUMP TRUCK ___ |
| WASTE | LIQUID | | | | X TANK TRUCK ___ OTHER |

⑥ WASTE CATEGORY 63 ⑦ EX. HAZ. WASTE PERMIT NO. N/A ⑧ GENERATING PROCESS FUEL TESTING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | STODDARD SOLVENT D80 | 95 | 85 | X % | ___ PPM | E | | | ___ % | ___ PPM |
| B | | 15 | 5 | X % | ___ PPM | F | | | ___ % | ___ PPM |
| C | | 7 | 5 | X % | ___ PPM | G | | | ___ % | ___ PPM |
| D | | | | ___ % | ___ PPM | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES: PH 7 ___ TOXIC X FLAMMABLE ___ CORROSIVE/IRRITANT ___ REACTIVE ___ SENSITIZER ___ CARCINOGEN/MUTAGEN

⑪ PHYSICAL STATE: ___ SOLID X LIQUID ___ SLUDGE ___ SLURRY ___ GAS ___ OTHER

⑫ SPECIAL HANDLING INSTRUCTIONS: X GLOVES X GOGGLES ___ RESPIRATOR ___ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

④ [signature] HAZARDOUS WASTE Engineer — SIGNATURE OF AUTHORIZED AGENT & TITLE

DATE SHIPPED 2/3/82

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. C A D 9 9 0 6 6 9 4 0 0
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO. (213) 595-9481 (714) 761-4611

JOB NO.
UNIT NO. 5

⑮ PICK-UP DATE 2 - 3 - 82
TIME X AM ___ PM

⑯ Jerry Scott Driver
SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ HANDLING OR DISPOSAL METHOD:
___ SURFACE IMPOUNDMENT ___ LANDFILL
___ INJECTION WELL X LAND TREATMENT
___ TREATMENT (SPECIFY)
___ RECOVERY OR REUSE ___ STORAGE/TRANSFER

㉑ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓ SIGNATURE OF AUTHORIZED AGENT & TITLE

DATE ACCEPTED

REVISED 11/80

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 000126

**GENERATOR** (GENERATOR MUST COMPLETE)

NAME HYDRAULIC RESEARCH TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacoima, Ca. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 2/24/82
P.O. / CONTRACT NO.

③ DESIGNATED TSD FACILITY

NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 Orange Ave.
CITY, STATE, ZIP CODE Long Beach Ca. 90807
PHONE NO. 595-9461

④ ALTERNATE TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE Combustible Liquid N.O.S. | Combustible | NA1993 | 603 | Gals | DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☐ |
| WASTE | Liquid | | | | X TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 64 & 45 ⑦ EX. HAZ. WASTE PERMIT NO. N/A ⑧ GENERATING PROCESS

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC RANGE UPPER | CONC RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | CUTTING OIL | 75 | 70 | X % | ☐ PPM | E | | | ☐ % | ☐ PPM |
| B | STODDARD SOLVENT | 30 | 25 | X % | ☐ PPM | F | | | ☐ % | ☐ PPM |
| C | | | | ☐ % | ☐ PPM | G | | | ☐ % | ☐ PPM |
| D | | | | ☐ % | ☐ PPM | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN

⑪ PHYSICAL STATE: ☐ SOLID ☐ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER

⑫ SPECIAL HANDLING INSTRUCTIONS: ☐ GLOVES ☐ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Hazardous Waste Coordinator Chuck Youngjohn Chuck Youngjohn 2/25/82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. CAD990669400
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO. (213) 595-9461 (714) 761-4611

01522
JOB NO #01521
UNIT NO #16

⑮ PICK UP DATE 2-25-82
TIME 12:10 ☐ AM ☒ PM

⑯ Jerry Scott
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME Facet Energy
EPA NO. CAD990669400

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME Resource Recovery
EPA NO.

㉓ T.R. Cook Gen. Mgr.
SIGNATURE OF AUTHORIZED AGENT & TITLE — 2-25-82 DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA#146—

① MANIFEST NUMBER 000142

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME H.R. TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacomia, Ca. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 3/24/82
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 Orange Ave.
CITY, STATE, ZIP CODE Long Beach Ca.
PHONE NO. 595-9461

④ ALTERNATE TSD FACILITY
NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE Oil N.O.S. | Combustible | NA1270 | 575 | Gals | [ ] DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK |
| WASTE | Liquid | | | | [X] TANK TRUCK [ ] OTHER |

⑥ WASTE CATEGORY 45
⑦ EX. HAZ. WASTE PERMIT NO. na
⑧ GENERATING PROCESS machine tool coolant

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|
| A | HYDRAULIC Oil | 65 | 60 | [X] % [ ] PPM | E | | | [ ] % [ ] PPM |
| B | CUTTING Oil | 40 | 35 | [X] % [ ] PPM | F | | | [ ] % [ ] PPM |
| C | | | | [ ] % [ ] PPM | G | | | [ ] % [ ] PPM |
| D | | | | [ ] % [ ] PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn HAZARDOUS WASTE COORD 3/29/82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. CAD990669400
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO. (213) 595-9461 (714) 761-4611

JOB NO. 06913
UNIT NO #16

⑮ PICK-UP DATE 3-29-82
TIME 11:30 [X] AM [ ] PM

⑯ Jerry Scott
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME Facet Energy
EPA NO. CAD990669400

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD.
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMENT
[ ] TREATMENT (SPECIFY)
[X] RECOVERY OR REUSE [ ] STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME Resource Recovery
EPA NO.

㉓ R.R. Cook Gen Mgr
SIGNATURE OF AUTHORIZED AGENT & TITLE — 3-29-82 DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA#146_

① MANIFEST NUMBER 000121

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HR TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacoima Ca. 91355
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 4/29/82
P.O. / CONTRACT NO.

## ③ DESIGNATED TSD FACILITY

(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 Orange Ave.
CITY, STATE, ZIP CODE Long Beach, Ca. 90807
PHONE NO. 595-9461

## ④ ALTERNATE TSD FACILITY

(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE OIL N.O.S. | Combustible | NA1270 | 410 | Gals | DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | Liquid | | | | X TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 45 ⑦ EX. HAZ. WASTE PERMIT NO. NA ⑧ GENERATING PROCESS machine tool cool

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | Hydraulic oil | 65 | 60 | X % | ☐ PPM | E | | | ☐ % | ☐ PPM |
| B | Cutting oil | 40 | 35 | X % | ☐ PPM | F | | | ☐ % | ☐ PPM |
| C | | | | ☐ % | ☐ PPM | G | | | ☐ % | ☐ PPM |
| D | | | | ☐ % | ☐ PPM | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC X FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN

⑪ PHYSICAL STATE ☐ SOLID X LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER

⑫ SPECIAL HANDLING INSTRUCTIONS: X GLOVES X GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Hazardous Waste Coordinator
Chuck Youngjohn
SIGNATURE OF AUTHORIZED AGENT & TITLE

4/30/82
DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO CAD990669400
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO (213) 595-9461 (714) 761-4611

JOB NO. 03712
UNIT NO. #14

⑮ PICK-UP DATE 4-30-82
TIME 11:54 X AM ☐ PM

⑯ SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME Facet Energy
EPA NO. CAD990669400

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT
Resource Recovery

㉑ HANDLING OR DISPOSAL METHOD.
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

REVISED 11/80

㉓ R. Cook Gen. Mgr
SIGNATURE OF AUTHORIZED AGENT & TITLE

5-4-82
DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA#146_

① MANIFEST NUMBER 000131

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME H.P. TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacoima, Ca. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 2/6/82
P.O. / CONTRACT NO.

③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 Orange Ave.
CITY, STATE, ZIP CODE Long Beach, Ca. 90807
PHONE NO. (213) 565-9461

④ ALTERNATE TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S.Mx | FLAMMABLE | UN1993 | 230 | Gals | [ ] DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK |
| WASTE | LIQUID | | | | [X] TANK TRUCK [ ] OTHER |

⑥ WASTE CATEGORY 62
⑦ EX. HAZ. WASTE PERMIT NO. N/A
⑧ GENERATING PROCESS Parts cleanin

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|
| A | STODDARD SOLVENT | 95 | 90 | [X] % [ ] PPM | E | | | [ ] % [ ] |
| B | OIL | 10 | 5 | [X] % [ ] PPM | F | | | [ ] % [ ] |
| C | | | | [ ] % [ ] PPM | G | | | [ ] % [ ] |
| D | | | | [ ] % [ ] PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND AR IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn Hazardous Waste Coordinator — SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPE 4/8/82

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. CAD990669400
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO. (213) 595-9461 (714) 761-4611

JOB NO 07560
UNIT NO #16

⑮ PICK-UP DATE 4/8/82
TIME 12:35 [ ] AM [X]

⑯ Jerry Lee — SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME Facet Energy
EPA NO. CAD990669400

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMEN
[ ] TREATMENT (SPECIFY)
[X] RECOVERY OR REUSE [ ] STORAGE/TRANSI

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME Resource Recovery
EPA NO.

㉓ T.R. Cook Gen Mgr — SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED 4-8-82

REVISED 11/80

SEE REVERSE SIDE FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 791-02094

**GENERATOR** (GENERATOR MUST COMPLETE)

③ NAME HR Textron
EPA NO. C A D 0 4 1 1 6 3 2 5 C
ADDRESS 10445 Glenoaks Blvd
CITY, STATE, ZIP CODE Pacoima, CA 91331
PHONE NO. [illegible]
ORDER PLACED BY [illegible] ORDER DATE 4/29/
P.O./ CONTRACT NO.

⑤ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME RHO-CHEM CORPORATION
EPA NO. C A D 0 0 8 3 6 4 4 3 2
ADDRESS 425 ISIS AVENUE
CITY, STATE, ZIP CODE INGLEWOOD, CA. 90301
PHONE NO. (213) 776-6233

④ ALTERNATE TSD FACILITY
NAME BKK CORPORATION
EPA NO. C A D 0 6 7 7 8 6 7 4 9
ADDRESS 2210 S. AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA, CA. 91790
PHONE NO. (213) 965-0911

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS | NUMBER |
|---|---|---|---|---|---|---|
| WASTE 111 Trichloroethane mixture | [illegible] | [illegible] | 300 | [illegible] | ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☐ TANK TRUCK ☐ OTHER | 6 |

⑥ WASTE CATEGORY 63
⑦ EX. HAZ. WASTE PERMIT NO. NOT APPLIC.
⑧ GENERATING PROCESS Vapor Degreaser

⑨ LIST COMPONENTS

| | | CONC. RANGE UPPER | LOWER | | | CONC. RANGE UPPER | LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|
| A | 111 Trichloroethane | 95 | 50 | ☒ % | ☐ PPM | E | | | ☐ % ☐ PPM |
| B | Oil | 25 | 15 | ☒ % | ☐ PPM | F | | | ☐ % ☐ PPM |
| C | [illegible] | 3 | 1 | ☒ % | ☐ PPM | G | | | ☐ % ☐ PPM |
| D | | | | ☐ % | ☐ PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES PH 7 ☐ TOXIC ☐ FLAMMABLE ☒ CORROSIVE IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN MUTAGEN
⑪ PHYSICAL STATE ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ Chuck Youngjohn Hazardous Waste Coordinator
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED 5/3/82

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME RHO-CHEM CORPORATION
EPA NO. C A D 0 0 8 3 6 4 4 3 2
ADDRESS 425 ISIS AVENUE
CITY, STATE, ZIP CODE INGLEWOOD, CA. 90301
PHONE NO. (213) 776-6233

JOB NO. 60556
UNIT NO. 2
⑮ PICK UP DATE 5/3/82
TIME [illegible] ☐ AM ☒ PM
⑯ Pete Lugo OLIVER
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME RHO-CHEM CORPORATION
EPA NO. C A D 0 0 8 3 6 4 4 3 2

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

㉑ HANDLING OR DISPOSAL METHOD
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE TRANSFER

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY.
NAME BKK CORPORATION WEST COVINA, CA.
EPA NO. C A D 0 6 7 7 8 6 7 4 9

㉓ [illegible]
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED 5-3-82

REVISED 11-80

the most
r "Heavy

...DES FOR
...PLEASE TYPE
...ARLY.
...ESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA# 146__

① MANIFEST NUMBER 000119

**...ERATOR** (GENERATOR MUST COMPLETE)

NAME H R TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 5/25/82
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 ORANGE AVE.
CITY, STATE, ZIP CODE LONG BEACH, CA. 90807
PHONE NO. (213) 595-9461

④ ALTERNATE TSD FACILITY
NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE | UN1993 | 100 | GALS | DRUMS / BAGS / CARTONS / DUMP TRUCK |
| WASTE | LIQUID | | | | X TANK TRUCK / OTHER |

⑥ WASTE CATEGORY 62
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS PARTS CLEANING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|---|
| A | STODDARD SOLVENT | 90 | 85 | X % | PPM | E | | | % PPM |
| B | OIL | 10 | 5 | X % | PPM | F | | | % PPM |
| C | | | | % | PPM | G | | | % PPM |
| D | | | | % | PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ Hazardous Waste Coordinator Chuck Youngjohn [signature] 5/25/82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. CAD990669400
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO. (213) 595-9461 (714) 761-4611

JOB NO. 09152
UNIT NO #16

⑮ PICK-UP DATE 5-25-82
TIME 1:20 ☐ AM ☒ PM

⑯ Jerry Scotto Driver
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME FACET ENERGY
EPA NO. CAD990669400

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☒ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME Resource Recovery
EPA NO.

㉓ Jim Bryant
SIGNATURE OF AUTHORIZED AGENT & TITLE
5-28-82
DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDE FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER **791-03947**

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HR TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 6/21/82
P.O./ CONTRACT NO.

③ DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME RHO-CHEM CORPORATION
EPA NO. CAD008364432
ADDRESS 425 ISIS AVENUE
CITY, STATE, ZIP CODE INGLEWOOD, CA. 90301
PHONE NO. (213) 776-6233

④ ALTERNATE TSD FACILITY
NAME BKK CORPORATION
EPA NO. CAD067788749
ADDRESS 2210 S. AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA, CA. 91790
PHONE NO. (213) 965-0911

| ⑤ U. S. DOT PROPER SHIPPING NAME | U. S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS 4 NUMBER |
|---|---|---|---|---|---|
| WASTE 111 TRICHLOROETHANE MIXTURE | ORM-A | UN2831 | 200 | GALS | ☒ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☐ TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 63
⑦ EX. HAZ. WASTE PERMIT NO. NOT APPLIC.
⑧ GENERATING PROCESS VAPOR DEGREASER

⑨ LIST COMPONENTS

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | | UNITS |
|---|---|---|---|---|---|
| A | 111 TRICHLOROETHANE | 85 | 60 | ☒ % ☐ PPM | |
| B | OIL | 35 | 15 | ☒ % ☐ PPM | |
| C | IMPURITIES | 3 | 1 | ☒ % ☐ PPM | |
| D | | | | ☐ % ☐ PPM | |
| E | | | | ☐ % ☐ PPM | |
| F | | | | ☐ % ☐ PPM | |
| G | | | | ☐ % ☐ PPM | |

NONHAZARDOUS MATERIAL ____ %

⑩ WASTE PROPERTIES PH 7 ☐ TOXIC ☐ FLAMMABLE ☒ CORROSIVE IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN MUTAGEN
⑪ PHYSICAL STATE ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ HAZARDOUS WASTE COORDINATOR CHUCK YOUNGJOHN — SIGNATURE OF AUTHORIZED AGENT & TITLE — 6/22/82 DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME RHO-CHEM CORPORATION
EPA NO. CAD008364432
ADDRESS 425 ISIS AVENUE
CITY, STATE, ZIP CODE INGLEWOOD, CA. 90301
PHONE NO. (213) 776-6233

JOB NO. 03711
UNIT NO.
⑮ PICK UP DATE 6-23-82
TIME 1140 ☒ AM ☐ PM
⑯ [signature] DRIVER
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME RHO-CHEM CORPORATION
EPA NO. CAD008364432
⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $
㉑ HANDLING OR DISPOSAL METHOD
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☒ TREATMENT (SPECIFY) ____
☐ RECOVERY OR REUSE ☐ STORAGE TRANSFER
㉒ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT
㉓ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY.
NAME BKK CORPORATION WEST COVINA, CA.
EPA NO. CAD067788749
㉔ [signature] CHUCK YOUNGJOHN 6-23-82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

㉕ REVISED 11-80

# CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 000370

INSTRUCTIONS: PLEASE TYPE OR PRINT CLEARLY. PRESS HARD

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME H R TEXTRON
EPA NO. CAD041116233 9
ADDRESS 10445 GLENOAKS Blvd.
CITY, STATE, ZIP CODE PACOIMA CA. ~~91355~~ 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 6/14/92
P.O. / CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 ORANGE AVE.
CITY, STATE, ZIP CODE LONG BEACH, CA 90807
PHONE NO. 595-9461

## ④ ALTERNATE TSD FACILITY

NAME RUTHERFORD/PACIFIC
EPA NO. CAD990669400
ADDRESS 3020 ORANGE
CITY, STATE, ZIP CODE LONG BEACH
PHONE NO. CA 90807

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE OIL N.O.S. | COMBUSTIBLE | NA1270 | 425 | GALS | [ ] DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK |
| WASTE | LIQUID | | | | [X] TANK TRUCK [ ] OTHER |

⑥ WASTE CATEGORY 45
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE TOOL COOLA.

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | HYDRAULIC OIL | 65 | 60 | [X] % | [ ] PPM | E | | | [ ] % | [ ] PPM |
| B | CUTTING OIL | 40 | 35 | [X] % | [ ] PPM | F | | | [ ] % | [ ] PPM |
| C | | | | [ ] % | [ ] PPM | G | | | [ ] % | [ ] PPM |
| D | | | | [ ] % | [ ] PPM | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN MUTAGEN
⑪ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Hazardous Waste Coordinator Chuck Youngjohn 6-16-92
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. CAD990669400
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO. (213) 595-9461 (714) 761-4611

JOB NO 09260
UNIT NO. #16

⑮ PICK-UP DATE 6-16-92
TIME 11:25 [X] AM [ ] PM

⑯ Jerry Scott Driver
SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME RUTHERFORD/PACIFIC
EPA NO. CAD990669400

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMENT
[ ] TREATMENT (SPECIFY)
[X] RECOVERY OR REUSE [ ] STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME Resource Recovery
EPA NO.

㉓ K. [illegible]
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED 6-17-92

REVISED 11/80

SIDES FOR
NS. PLEASE TYPE
CLEARLY.
PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA# 140—
① MANIFEST NUMBER 000118

## ② GENERATOR (GENERATOR MUST COMPLETE)

② NAME HR TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS Blvd.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 359-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 7/23/82
P.O. / CONTRACT NO.

## ③ DESIGNATED TSD FACILITY

(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 ORANGE AVE.
CITY, STATE, ZIP CODE LONG BEACH, CA 90807
PHONE NO. 595-9461

## ④ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE Oil N.O.S. | COMBUSTIBLE | NA1270 | 178 | GALS | [ ] DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK |
| WASTE | LIQUID | | | | [X] TANK TRUCK [ ] OTHER |

⑥ WASTE CATEGORY 45
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE TOOL COOLA

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | HYDRAULIC OIL | 65 | 60 | [X] % | [ ] PPM | E | | | [ ] % | [ ] PPM |
| B | CUTTING OIL | 40 | 35 | [X] % | [ ] PPM | F | | | [ ] % | [ ] PPM |
| C | | | | [ ] % | [ ] PPM | G | | | [ ] % | [ ] PPM |
| D | | | | [ ] % | [ ] PPM | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ HAZARDOUS WASTE COORDINATOR
CHUCK YOUNGJOHN Chuck Youngjohn — SIGNATURE OF AUTHORIZED AGENT & TITLE
7/23/82 — DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. CAD990669400
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO. (213) 595-9461 (714) 761-4611

JOB NO. ENV #10225
UNIT NO.
⑮ PICK-UP DATE 7-23-82
TIME 1:00 [ ] AM [X] PM

⑯ Rutherford Pacific
SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.
⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $
⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMENT
[ ] TREATMENT (SPECIFY)
[X] RECOVERY OR REUSE [ ] STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓ SIGNATURE OF AUTHORIZED AGENT & TITLE
DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA#146_

① MANIFEST NUMBER 000368

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HR TEXTRON
EPA NO. CAD981162330
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN
ORDER DATE 9/9/82
P.O. / CONTRACT NO.

## ③ DESIGNATED TSD FACILITY

NAME FACET ENERGY
EPA NO. CAD981066940 0
ADDRESS 3020 ORANGE AVE.
CITY, STATE, ZIP CODE LONG BEACH CA 90807
PHONE NO. 595-9461

## ④ ALTERNATE TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE OIL N.O.S. | COMBUSTIBLE | NA1270 | 740 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | LIQUID | | | | ☒ TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 45
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE TOOL COOLANT

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|---|
| A | HYDRAULIC OIL | 70 | 65 | ☒ % | ☐ PPM | E | | | ☐ % | ☐ PPM |
| B | CUTTING OIL | 30 | 25 | ☒ % | ☐ PPM | F | | | ☐ % | ☐ PPM |
| C | | | | ☐ % | ☐ PPM | G | | | ☐ % | ☐ PPM |
| D | | | | ☐ % | ☐ PPM | NONHAZARDOUS MATERIAL | | | % | |

⑩ WASTE PROPERTIES. PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN-MUTAGEN
⑪ PHYSICAL STATE ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Hazardous Waste Coordinator Chuck Youngjohn — SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED 9/10/82

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Rutherford/Pacific Inc.
EPA NO. CAD990669400
ADDRESS P.O. Box 7485
CITY, STATE, ZIP CODE Long Beach, CA 90807
PHONE NO (213) 595-9461 (714) 761-4611

JOB NO
UNIT NO

⑮ PICK-UP DATE 9/10/82
TIME 12:16 ☐ AM ☒ PM

⑯ Ronnie R Montgomery DRIVER — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME Facet Energy Inc
EPA NO. CAD981066940

⑱ QUANTITY (IF MEASURED) 740
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD.
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☒ TREATMENT (SPECIFY) RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY.
NAME
EPA NO.

㉓ Michael L. Moser — SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED 9-10-82

REVISED 11/80

...IDES FOR ... PLEASE TYPE

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA#146__

① MANIFEST NUMBER

**GENERATOR** (GENERATOR MUST COMPLETE)

② HR TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS Blvd.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 11/
P.O. / CONTRACT NO.

③ DESIGNATED TSD FACILITY
NAME FACET ENERGY
EPA NO. CAD990669400
ADDRESS 3020 ORANGE AVE
CITY, STATE, ZIP CODE LONG BEACH, CA. 90807
PHONE NO. (213) 595-9461

④ ALTERNATE TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. | FLAMMABLE | UN1993 | 263 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | LIQUID | | | | ☒ TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 62 ⑦ EX. HAZ. WASTE PERMIT NO. NA ⑧ GENERATING PROCESS [illegible]

| ⑨ LIST COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| A STODDARD SOLVENT Dool | 90 | 85 | ☒ % ☐ PPM | E | | | ☐ % ☐ PPM |
| B OIL | 10 | 5 | ☒ % ☐ PPM | F | | | ☐ % ☐ PPM |
| C | | | ☐ % ☐ PPM | G | | | ☐ % ☐ PPM |
| D | | | ☐ % ☐ PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/ARRIVANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN

⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER

⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ HAZARDOUS WASTE COORDINATOR CHUCK YOUNGJOHN
SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

[illegible] Pacific Inc.
CAD990669400
JOB NO. 10105
UNIT NO.

⑮ PICK-UP DATE 9-16-82
TIME 1:56 ☐ AM ☒ PM

[illegible]
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (HAULER MUST COMPLETE)

[illegible]
DISCREPANCIES BETWEEN MANIFEST AND [illegible]
IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED [illegible]
NAME
EPA NO.

HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

SIGNATURE OF AUTHORIZED AGENT & TITLE DATE ACCEPTED

REVISED 11/80

e most Heavy

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

(1) MANIFEST NUMBER 791-03952

(2) GENERATOR MUST COMPLETE)

NAME HR TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS Blvd.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 4/10/82
P.O./CONTRACT NO.

(3) DESIGNATED TSD FACILITY

(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME RHO-CHEM CORPORATION
EPA NO. CAD008364432
ADDRESS 425 ISIS AVENUE
CITY, STATE, ZIP CODE INGLEWOOD, CA. 90301
PHONE NO. (213) 776-6233

(4) ALTERNATE TSD FACILITY

NAME BKK CORPORATION
EPA NO. CAD067786749
ADDRESS 2210 S. AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA, CA. 91790
PHONE NO. (213) 965-0911

| PROPER SHIPPING NAME | U. S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS 6 NUMBER |
|---|---|---|---|---|---|
| TRICHLOROETHANE MIXTURE | ORM-A | UN 2831 | 300 | GALS | X DRUMS; TANK TRUCK; BAGS; OTHER; CARTONS; DUMP TRUCK |

(6) WASTE CATEGORY 63

(7) EX. HAZ. WASTE PERMIT NO. NOT APPLIC.

(8) GENERATING PROCESS VAPOR DEGREE

(9) LIST COMPONENTS

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | % | PPM |
|---|---|---|---|---|---|
| A | 111 TRICHLOROETHANE | 85 | 80 | X | |
| B | OIL | 25 | 15 | X | |
| C | INHIBITOR | 3 | 1 | X | |
| D | | | | | |
| E | | | | | |
| F | | | | | |
| G | | | | | |

NONHAZARDOUS MATERIAL ____ %

(10) WASTE PROPERTIES PH 7 ☐ TOXIC ☐ FLAMMABLE ☒ CORROSIVE IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN MUTAGEN

(11) PHYSICAL STATE ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER

(12) SPECIAL HANDLING INSTRUCTIONS ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

(13) HAZARDOUS WASTE COORDINATOR CHUCK YOUNGJOHN
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED 4/11/82

**TRANSPORTER** (HAULER MUST COMPLETE)

(14) NAME RHO-CHEM CORPORATION
EPA NO. CAD008364432
ADDRESS 425 ISIS AVENUE
CITY, STATE, ZIP CODE INGLEWOOD, CA. 90301
PHONE NO. (213) 776-6233

JOB NO.
UNIT NO.

(15) PICK UP DATE
TIME ☐ AM ☒ PM

(16) SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

(17) NAME RHO-CHEM CORPORATION
EPA NO. CAD008364432

(18) QUANTITY (IF MEASURED)
(19) STATE FEE (IF ANY) $

(20) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

(21) HANDLING OR DISPOSAL METHOD
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE TRANSFER

(22) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY.
NAME BKK CORPORATION WEST COVINA, CA.
EPA NO. CAD067786749

(23) SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11-80

RSE SIDES FOR
ONS. PLEASE TYPE
T CLEARLY
PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

CA#146__

① MANIFEST NUMBER 000117

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME: HR TEXTRON
EPA NO.: CAD041162330
ADDRESS: 10445 GLENOAKS Blvd.
CITY, STATE, ZIP CODE: PACOIMA, CA 91331
PHONE NO.: (805) 259-4030
ORDER PLACED BY: CHUCK YOUNGJOHN ORDER DATE: 10/25/82
P.O./CONTRACT NO.:

③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME: FACET ENERGY
EPA NO.: CAD[illegible]669400
ADDRESS: 3020 ORANGE AVE
CITY, STATE, ZIP CODE: LONG BEACH, CA. 90807
PHONE NO.: 595-9461

④ ALTERNATE TSD FACILITY

NAME:
EPA NO.:
ADDRESS:
CITY, STATE, ZIP CODE:
PHONE NO.:

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE OIL N.O.S. | COMBUSTIBLE | NA1270 | 459 | GALS | DRUMS / BAGS / CARTONS / DUMP TRUCK |
| WASTE | LIQUID | | | | X TANK TRUCK / OTHER |

⑥ WASTE CATEGORY: 45
⑦ EX. HAZ. WASTE PERMIT NO.: NA
⑧ GENERATING PROCESS: CUTTING OIL

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|---|
| A | CUTTING OIL | 65 | 60 | X % | PPM | E | | | % PPM |
| B | HYDRAULIC OIL | 35 | 30 | X % | PPM | F | | | % PPM |
| C | | | | % | PPM | G | | | % PPM |
| D | | | | % | PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ HAZARDOUS WASTE COORDINATOR
Ex CHUCK YOUNGJOHN [signature] 10/29/82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME: Rutherford/Pacific Inc.
EPA NO.: CAD990669400
ADDRESS: P.O. Box 7[illegible]
CITY, STATE, ZIP CODE: Long Beach, CA 90807
PHONE NO.: (213) [illegible] (714) [illegible]

JOB NO.: 21195
UNIT NO.:

⑮ PICK-UP DATE: 10 29 82
TIME: 11:32 ☒ AM ☐ PM

[signature] "DRIVER"
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME:
EPA NO.:
⑱ QUANTITY (IF MEASURED):
⑲ STATE FEE (IF ANY): $
⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:
㉑ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME:
EPA NO.:

㉒ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001576

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 1/4/82
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME ENVIRONMENTAL PROTECTION CORP.
EPA NO. CAT080010283
ADDRESS 3040 19TH STREET
CITY, STATE, ZIP CODE BAKERSFIELD CA.
PHONE NO. (805) 768-4806

④ ALTERNATE TSD FACILITY
NAME B.K.K.
EPA NO. CAD067756799
ADDRESS 2210 AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA CA.
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | COMBUSTIBLE | NA 1993 | 2000 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | LIQUID | | | | ☒ TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 43, 63
⑦ EX. HAZ. WASTE PERMIT NO. N/A
⑧ GENERATING PROCESS MACHINE TOOL COOLANT

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|---|
| A | SOLUBLE CUTTING OILS | 9 | 5 | ☒ % ☐ PPM | E | | | | ☐ % ☐ PPM |
| B | WATER | 90 | 85 | ☒ % ☐ PPM | F | | | | ☐ % ☐ PPM |
| C | STODDARD SOLVENT | 1 | <1 | ☒ % ☐ PPM | G | | | | ☐ % ☐ PPM |
| D | | | | ☐ % ☐ PPM | NONHAZARDOUS MATERIAL | | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ Hazardous Waste Coordinator Chuck Youngjohn [signature] 1-5-82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3786
UNIT NO. 1

⑮ PICK-UP DATE 1-5-82
TIME 9:00 ☒ AM ☐ PM

⑯ [signature] (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

Ph 9.5 EPC# 20185 7-35

⑰ NAME EPC Westside Disp
EPA NO. CAT080010283

⑱ QUANTITY (IF MEASURED) 4 BBLS
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☒ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

㉓ [signature] 1-5-82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001660

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 GLENOAKS BLVD
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 1/20/82
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY
NAME ENVIRONMENTAL PROTECTION CO.
EPA NO. CAT080010283
ADDRESS 3040 19TH STREET
CITY, STATE, ZIP CODE BAKERSFIELD, CA
PHONE NO. (805) 768-4806

④ ALTERNATE TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME B.K.K
EPA NO. CAD067786749
ADDRESS 2210 AZUSA AVE
CITY, STATE, ZIP CODE WEST COVINA, CA.
PHONE NO. 965-0416

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | COMBUSTIBLE | NA 1993 | 2000 | GALS | DRUMS / BAGS / CARTONS / DUMP TRUCK |
| WASTE | LIQUID | | | | ✓ TANK TRUCK / OTHER |

⑥ WASTE CATEGORY 43, 63
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE TOOL COOLANT

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|---|
| A | SOLUBLE CUTTING OIL | 9 | 5 | X % | PPM | E | | | % PPM |
| B | WATER | 90 | 85 | X % | PPM | F | | | % PPM |
| C | STODDARD SOLVENT | 1 | <1 | X % | PPM | G | | | % PPM |
| D | | | | % | PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ [signature] HAZARDOUS WASTE COORD 1-20-82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3810
UNIT NO. 1

⑮ PICK-UP DATE 1-20-82
TIME 1:30 ☐ AM ☒ PM

⑯ [signature] (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

JW.1 Ph 6.0 F21 EPC#20808

⑰ NAME EPC Westside Disp.
EPA NO. CAD080010283

⑱ QUANTITY (IF MEASURED) 49 B/S
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☒ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME

㉓ [signature] 1-26-82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 004577

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CAD041163330
ADDRESS 10415 GLENOAKS blvd.
CITY, STATE, ZIP CODE SACOIMA, CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 2-11-82
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME ENVIRONMENTAL PROTECTION CORP
EPA NO. CAT080010283
ADDRESS 3040 19th Street
CITY, STATE, ZIP CODE Bakersfield Ca. 93301
PHONE NO. (805) 768-4806

④ ALTERNATE TSD FACILITY
NAME P.K.K. Corp
EPA NO. CAD067786749
ADDRESS 2210 Azusa Ave.
CITY, STATE, ZIP CODE West Covina Ca.
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | Combustible | NA1993 | 2000 | Gals | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK |
| WASTE | Liquid | | | | X TANK TRUCK ☐ OTHER |

⑥ WASTE CATEGORY 43, 63
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS Machine tool coolant

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|---|
| A | SOLUBLE CUTTING OIL | 10 | 5 | X % ☐ PPM | E | | | ☐ % ☐ PPM |
| B | WATER | 90 | 85 | X % ☐ PPM | F | | | ☐ % ☐ PPM |
| C | STODDARD SOLVENT | 1 | < 1 | X % ☐ PPM | G | | | ☐ % ☐ PPM |
| D | | | | ☐ % ☐ PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC X FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID X LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: X GLOVES X GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ Hazardous Waste Coord. Chuck Youngjohn [signature] 2/11/82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3838
UNIT NO. 1

⑮ PICK-UP DATE 2-12-82
TIME ☐ AM ☐ PM

⑯ [signature]
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME [illegible]
EPA NO. [illegible]

⑱ QUANTITY (IF MEASURED) 14.10
⑲ STATE FEE (IF ANY) $ 14.10

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓ [signature] 2/12/82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDE FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 01031

PRESS HARD 25320

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HYDRAULIC RESEARCH, TEXTRON
EPA NO. CAD064116233
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA CA. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY CHUCK YOUNG/JOHN ORDER DATE 2/3/82
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY

NAME ENVIRONMENTAL PROTECTION CORP.
EPA NO. CAT080011038 3
ADDRESS 3040 19TH STREET
CITY, STATE, ZIP CODE BAKERSFIELD CA.
PHONE NO. (805) 768-4806

## ④ ALTERNATE TSD FACILITY

(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME B.K.K. CORP
EPA NO. CAD066776547
ADDRESS 2210 AZUSA AVE
CITY, STATE, ZIP CODE WEST COVINA CA.
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE WASTE STODDARD SOLVENT, | ORM-E | NA9187 | 2000 | GALS | [ ] DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK |
| WASTE WATER & MUD | | | | | [X] TANK TRUCK [ ] OTHER |

⑥ WASTE CATEGORY RAIN WATER & MUD
⑦ EX. HAZ. WASTE PERMIT NO. N/A
⑧ GENERATING PROCESS RAIN

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|
| A | WATER | 90 | 85 | [X] % | [ ] PPM | E | | | [ ] % [ ] PPM |
| B | MUD | 8 | 7 | [X] % | [ ] PPM | F | | | [ ] % [ ] PPM |
| C | STODDARD SOLVENT | 2 | 1 | [X] % | [ ] PPM | G | | | [ ] % [ ] PPM |
| D | | | | [ ] % | [ ] PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [ ] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: [ ] GLOVES [ ] GOGGLES [ ] RESPIRATOR [ ] OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ Chuck Young HAZARDOUS WASTE COORD. 2-
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350-
PHONE NO. (805) 251-3737

JOB NO. 3831
UNIT NO. 1

⑮ PICK-UP DATE 2-8-82
TIME 2:00 [ ] AM [X] PM

⑯ [signature] DRIVER
SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME BKK
EPA NO. CAD066776547

5.90 (70) SEE

⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

㉑ HANDLING OR DISPOSAL METHOD:
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMENT
[ ] TREATMENT (SPECIFY)
[ ] RECOVERY OR REUSE [ ] STORAGE/TRANSFER

㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY
NAME
EPA NO.

㉓
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

USE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001732

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME H.R. TEXTRON
EPA NO. CAD041162330
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacoima, Ca. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 8/29/82
CONTRACT NO. 89581

③ DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME ENVIRONMENTAL PROTECTION CORP
EPA NO. CAT080010283
ADDRESS 3040 19th Street
CITY, STATE, ZIP CODE Bakersfield Ca. 93301
PHONE NO. (805) 768-4808

④ ALTERNATE TSD FACILITY
NAME B.K.K.
EPA NO. CAD0677[illegible]6749
ADDRESS 2210 Azusa Ave.
CITY, STATE, ZIP CODE West Covina Ca.
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | Combustible | NA1993 | 2000 | Gals | DRUMS / BAGS / CARTONS / DUMP TRUCK |
| WASTE | Liquid | | | | X TANK TRUCK / OTHER |

⑥ WASTE CATEGORY 43.63 ⑦ EX. HAZ. WASTE PERMIT NO. NA ⑧ GENERATING PROCESS Machine tool cool

| LIST COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| SOLUBLE CUTTING OIL | 10 | 5 | X % | E | | | % PPM |
| WATER | 90 | 85 | X % | F | | | % PPM |
| STODDARD SOLVENT | 1 | 1 | X % | G | | | % PPM |
| | | | % | NONHAZARDOUS MATERIAL | | | % |

WASTE PROPERTIES: 7 TOXIC X FLAMMABLE CORROSIVE/IRRITANT REACTIVE SENSITIZER CARCINOGEN/MUTAGEN
PHYSICAL STATE: LIQUID X LIQUID SLUDGE SLURRY GAS OTHER
SPECIAL HANDLING INSTRUCTIONS: X GLOVES X GOGGLES RESPIRATOR OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑫ Hazardous Waste Coordinator
Chuck Youngjohn [signature] 3/30/82
SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

NAME Martin Industrial Pumping Service
[illegible]28636

JOB NO. 3906
UNIT NO.

⑮ PICK-UP DATE 3-30-82
TIME 16:00 X AM PM

[signature] (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

[illegible] (COMPLETE)

[illegible] 1390

⑬ HANDLING OR DISPOSAL METHOD:
SURFACE IMPOUNDMENT X LANDFILL
INJECTION WELL LAND TREATMENT
TREATMENT (SPECIFY)
RECOVERY OR REUSE STORAGE/TRANSFER

[illegible] DISCREPANCIES BETWEEN [illegible]

[illegible] LIVERY ELSEWHERE [illegible]

60
SIGNATURE OF AUTHORIZED AGENT & TITLE 3-30-82
DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

23103

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 00730

**GENERATOR** (GENERATOR MUST COMPLETE)

HYDRAULIC RESEARCH

② NAME H. R. TEXTRON
EPA NO. CAD041116233
ADDRESS 10445 GLENOAKS Blvd.
CITY, STATE, ZIP CODE PACOIMA, CA 91331
PHONE NO. (818) 259-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 3/18/92
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME ENVIRONMENTAL [illegible]
EPA NO. CAT080011628
ADDRESS 3040 19TH STREET
CITY, STATE, ZIP CODE BAKERSFIELD, CA 93301
PHONE NO. (805) 768-4806

④ ALTERNATE TSD FACILITY

NAME BKI
EPA NO. CAD066778767
ADDRESS 2210 Azusa Ave
CITY, STATE, ZIP CODE West Covina, CA
PHONE NO. 966-0711

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE WASTE OIL, RAIN WATER | ORM-E | NA9189 | 2000 | GALS | ☐ DRUMS ☐ BAGS ☐ CARTONS ☐ DUMP TRUCK ☒ TANK TRUCK ☐ OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY RAIN WATER & MUD ⑦ EX. HAZ. WASTE PERMIT NO. NA ⑧ GENERATING PROCESS [illegible]

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | |
|---|---|---|---|---|---|---|---|---|---|
| A | WATER | 95 | 90 | ☒ % | ☐ PPM | E | | | |
| B | SOLUBLE CUTTING OIL | 10 | 5 | ☒ % | ☐ PPM | F | | | |
| C | MUD | 1 | <1 | ☒ % | ☐ PPM | G | | | |
| D | | | | ☐ % | ☐ PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 7 ☐ TOXIC ☐ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN

⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER

⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ [signature] HAZARDOUS WASTE [illegible]
SIGNATURE OF AUTHORIZED AGENT & TITLE

3/17/92
DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 3881
UNIT NO. 1

⑮ PICK-UP DATE 3-17-92
TIME 1:30 ☒ AM ☐ PM

⑯ [signature] (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

**FACILITY** (OPERATOR MUST COMPLETE)

BKI
CAD066778767

⑰ QUANTITY (IF MEASURED) (10) See 1741

⑱ STATE FEE (IF ANY) $

⑲ HANDLING OR DISPOSAL METHOD: 9.88

☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

⑳ SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

㉑ X [signature]
SIGNATURE OF AUTHORIZED AGENT & TITLE

3-17-92
DATE ACCEPTED

1. Land disposal restrictions apply to the waste(s) listed above. If this is a final TSD facility, no further treatment, storage or disposal (except by an EPA or state permitted facility) may occur without a new manifest. If this is not a final TSD facility, storage is restricted to 90 days for waste(s) restricted under 40 CFR Part 268 Subpart C, and 1 year for waste(s) restricted under 40 CFR Part 268 Subpart D. Any exceptions to storage restrictions must be documented in the facility's files. Treatment must be performed in accordance with applicable regulations prior to disposal. The treatment and disposal facility must certify compliance with the applicable treatment standards and prohibitions set forth in 40 CFR Part 268 Subpart D for each waste listed above.

2. I certify that the materials described on this manifest are not subject to federal regulations for reporting proper disposal of hazardous waste.

3. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is accurate and complete. I certify that the facility has 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.

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.
PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 001729

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME A.R. TEKTRON
EPA NO. C A D 0 4 1 1 6 2 3 3 0
ADDRESS 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE Pacoima, Ca. 91331
PHONE NO. (805) 259-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE
P.O. CONTRACT NO.

③ DESIGNATED TSD FACILITY
NAME ENVIRONMENTAL PROTECTION CORP
EPA NO. C A T 0 8 0 0 1 0 2 8 3
ADDRESS 3040 19th Street
CITY, STATE, ZIP CODE Bakersfield Ca. 93301
PHONE NO. (805) 768-4806

④ ALTERNATE TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME B.K.K.
EPA NO. C A D 0 0 7 7 8 5 7 8 0
ADDRESS 2210 Azusa Ave.
CITY, STATE, ZIP CODE West Covina Ca.
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | Combustible Liquid | NA1993 | 2000 | Gals | X DRUMS, TANK TRUCK, BAGS, CARTONS, DUMP TRUCK, OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 43.63
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS Machine tool coolant

⑨ WASTE COMPONENTS:

| | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| A SOLUBLE CUTTING OIL | 10 | 5 | X % | E | | | % PPM |
| B WATER | 90 | 85 | X % | F | | | % PPM |
| C STODDARD SOLVENT | 1 | <1 | X % | G | | | % PPM |
| D | | | % PPM | NONHAZARDOUS MATERIAL | | | % |

⑩ PROPERTIES: TOXIC, X FLAMMABLE, CORROSIVE/IRRITANT, REACTIVE, X SENSITIZER, CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: SOLID, X LIQUID, SLUDGE, SLURRY, GAS, OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: X GLOVES, X GOGGLES, RESPIRATOR, OTHER

⑬ GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

Hazardous Waste Coordinator
⑬ Chuck Youngjohn
SIGNATURE OF AUTHORIZED AGENT & TITLE

3-15-82
DATE SHIPPED

**TRANSPORTER** (TRANSPORTER MUST COMPLETE)

⑭ Hazardous Material Pumping Service
EPA NO. C A D 0 8 6 3 6
⑮ JOB NO. 3678
UNIT NO. 1
⑯ PICK-UP DATE 3-15-82
TIME 9:00 X AM PM

⑰ [illegible] (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

**DISPOSAL** (DISPOSER MUST COMPLETE)

⑱ [illegible]
⑲ QUANTITY (if measured) 55 #93
⑳ STATE FEE AMT.
[illegible] BETWEEN MANIFEST AND SHIPMENT
[illegible] SPECIFY THE DESIGNATED TSD FACILITY
EPA NO.
㉑ HANDLING OR DISPOSAL METHOD:
SURFACE IMPOUNDMENT, X LANDFILL
INJECTION WELL, LAND TREATMENT
TREATMENT (SPECIFY)
RECOVERY OR REUSE, STORAGE/TRANSFER

[illegible]
SIGNATURE OF AUTHORIZED AGENT & TITLE

3/16/82
DATE ACCEPTED

[illegible] the [illegible] in Item 18 [illegible] ity. (Example, dd) [illegible] posal were in the trea [illegible] acility, and its EPA I.D. [illegible] aste in the shipment. [illegible] D facility that [illegible]

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY. PRESS HARD.

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - [illegible]738

GENERATOR'S (GENERATOR MUST COMPLETE)

[illegible]
[illegible] Blvd.
[illegible] 91731
[illegible] 1330
[illegible] John ORDER DATE 3/29/82

③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME ENVIRONMENTAL PROTECTION CORP
EPA NO. C A D 0 2 8 4 9 1 0 2 8 3
ADDRESS 3046 19th Street
CITY, STATE, ZIP CODE Bakersfield Ca. 93301
PHONE NO. (805) [illegible] 765-4806

④ ALTERNATE TSD FACILITY

NAME B.K.K.
EPA NO. C A D 0 5 7 7 8 1 7 1 8
ADDRESS 2210 Azusa Ave.
CITY, STATE, ZIP CODE West Covina Ca.
PHONE NO. 965-0916

| ⑤ PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | CHEMICAL ID NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| [illegible] LIQUID N.O.S. | Combustible | NA1993 | 3000 | Gals | DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK |
| | Liquid | | | | [X] TANK TRUCK [ ] OTHER |

⑥ [illegible] ⑦ EX. HAZ. WASTE PERMIT NO. NA ⑧ GENERATING PROCESS Machine tool coolant

| ⑨ COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | ⑩ COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| [illegible] CUTTING OIL | 10 | 5 | [X] % [ ] PPM | E | | | [ ] % [ ] PPM |
| [illegible] | 90 | 85 | [X] % [ ] PPM | F | | | [ ] % [ ] PPM |
| [illegible] SOLVENT | 1 | 1 | [X] % [ ] PPM | G | | | [ ] % [ ] PPM |
| | | | [ ] % [ ] PPM | NONHAZARDOUS MATERIAL | | | % |

⑪ HAZARDOUS CHARACTERISTICS: [illegible] [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN

⑫ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER

⑬ HANDLING INSTRUCTIONS: [X] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER

⑭ GENERATOR'S CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑮ Hazardous Waste Coordinator Chuck Youngjohn
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

TRANSPORTER'S (TRANSPORTER MUST COMPLETE)

[illegible] Industrial Pumping Service
[illegible] 3636
[illegible]
[illegible] disp.
[illegible]

JOB NO. 3912
UNIT NO. 1

⑯ PICK-UP DATE 4-1-82
TIME 2:30 [ ] AM [X] PM

⑰ [illegible]
SIGNATURE OF AUTHORIZED AGENT & TITLE

DESIGNATED FACILITY (TSD FACILITY MUST COMPLETE)

[illegible]

⑱ QUANTITY (IF REQUIRED)
⑲ STATE FEE (IF ANY) $

⑳ HANDLING OR DISPOSAL METHOD:
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMENT
[ ] TREATMENT (SPECIFY)
[ ] RECOVERY OR REUSE [ ] STORAGE/TRANSFER

[illegible] DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

[illegible] HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

[illegible]

㉑
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - [illegible]354

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME H R TEXTRON
EPA NO. CAD041162530
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA 91331
PHONE NO. (805) 251-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 4/2/86
P.O./CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME ENVIRONMENTAL PROTECTION CORP.
EPA NO. CAT080010233
ADDRESS 3040 19TH STREET
CITY, STATE, ZIP CODE BAKERSFIELD CA
PHONE NO. (805) 768-4806

## ④ ALTERNATE TSD FACILITY

NAME B.K.K.
EPA NO. CAD[illegible]
ADDRESS 2210 [illegible]
CITY, STATE, ZIP CODE WEST COVINA
PHONE NO. 965-0916

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE Combustible Liquid N.O.S. | Combustible Liquid | NA1993 | 2000 | GALS | DRUMS [ ] BAGS [ ] CARTONS [ ] DUMP TRUCK [X] TANK TRUCK [ ] OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY (43)63
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS MACHINE CUTTING

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|
| A | SOLUBLE CUTTING OIL | 10 | 5 | [X] % [ ] PPM |
| B | WATER | 90 | 85 | [X] % [ ] PPM |
| C | STODDARD SOLVENT | 1 | <1 | [X] % [ ] PPM |
| D | | | | [ ] % [ ] PPM |
| E | | | | [ ] % [ ] PPM |
| F | | | | [ ] % [ ] PPM |
| G | | | | [ ] % [ ] PPM |

NONHAZARDOUS MATERIAL _____ %

⑩ WASTE PROPERTIES: PH 7 [ ] TOXIC [X] FLAMMABLE [ ] CORROSIVE/IRRITANT [ ] REACTIVE [ ] SENSITIZER [ ] CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: [ ] SOLID [X] LIQUID [ ] SLUDGE [ ] SLURRY [ ] GAS [ ] OTHER _____
⑫ SPECIAL HANDLING INSTRUCTIONS: [ ] GLOVES [X] GOGGLES [ ] RESPIRATOR [ ] OTHER _____

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ CHUCK YOUNGJOHN HAZARDOUS WASTE COORD. Chuck Young — SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. _____
UNIT NO. _____

⑮ PICK-UP DATE 4-20-86
TIME 12:30 [ ] AM [X] PM

⑯ L Ramirez — SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME [illegible]
EPA NO. CAD[illegible]

⑱ QUANTITY (IF MEASURED) 177 5.25
⑲ STATE FEE (IF ANY) $ _____

⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT _____

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

㉑ HANDLING OR DISPOSAL METHOD:
[ ] SURFACE IMPOUNDMENT [ ] LANDFILL
[ ] INJECTION WELL [ ] LAND TREATMENT
[ ] TREATMENT (SPECIFY) _____
[ ] RECOVERY OR REUSE [ ] STORAGE/TRANSFER

㉒ _____ — SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 08[illegible]

## GENERATOR (GENERATOR MUST COMPLETE)

② NAME HR TEXTRON
EPA NO. CAD041116230
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 294-4030
ORDER PLACED BY CHUCK YOUNGJOHN ORDER DATE 6/25/82
P.O. / CONTRACT NO.

## ③ DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)

NAME B.K.K.
EPA NO. CAD067786749
ADDRESS 2210 AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA, CA
PHONE NO. 965-0916

## ④ ALTERNATE TSD FACILITY

NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS: NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | COMBUSTIBLE LIQUID | NA1993 | 2000 | GALS | X TANK TRUCK; DRUMS; BAGS; CARTONS; DUMP TRUCK; OTHER |
| WASTE | | | | | |

⑥ WASTE CATEGORY 43,63
⑦ EX. HAZ. WASTE PERMIT NO. N/A
⑧ GENERATING PROCESS Machine Tool Coolant

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|
| A | SOLUBLE CUTTING OIL | 10 | 5 | X % |
| B | WATER | 99 | 93 | X % |
| C | STODDARD SOLVENT DOOL | 1 | <1 | X % |
| D | | | | % PPM |
| E | | | | % PPM |
| F | | | | % PPM |
| G | | | | % PPM |

NONHAZARDOUS MATERIAL % 

⑩ WASTE PROPERTIES: PH 8 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☒ LIQUID ☐ SLUDGE ☐ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

⑬ HAZARDOUS WASTE COORDINATOR CHUCK YOUNGJOHN [signature] 6-28-82
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

## TRANSPORTER (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 4033
UNIT NO.
⑮ PICK-UP DATE 6-28-82
TIME 2:00 ☐ AM ☒ PM

⑯ [signature] Tom Martin Driver
SIGNATURE OF AUTHORIZED AGENT & TITLE

## TSD FACILITY (OPERATOR MUST COMPLETE)

⑰ NAME
EPA NO.
⑱ QUANTITY (IF MEASURED)
⑲ STATE FEE (IF ANY) $
⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT
㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☐ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER
㉒ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME
EPA NO.
㉓ SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

REVISED 11/80

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

25320

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - [illegible]

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME HR TEXTRON
EPA NO. CAD041162350
ADDRESS 10445 GLENOAKS BLVD.
CITY, STATE, ZIP CODE PACOIMA, CA. 91331
PHONE NO. (805) 251-4030
ORDER PLACED BY Chuck Youngjohn ORDER DATE 3/20/82
P.O./CONTRACT NO.

③ DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME B.K.K.
EPA NO. CAD067786749
ADDRESS 2210 AZUSA AVE.
CITY, STATE, ZIP CODE WEST COVINA, CA.
PHONE NO. 965-0916

④ ALTERNATE TSD FACILITY
NAME
EPA NO.
ADDRESS
CITY, STATE, ZIP CODE
PHONE NO.

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE COMBUSTIBLE LIQUID N.O.S. | COMBUSTIBLE | NA1993 | 2000 | GALS | DRUMS / BAGS / CARTONS / DUMP TRUCK |
| WASTE | LIQUID | | | | TANK TRUCK / OTHER |

⑥ WASTE CATEGORY 43,63
⑦ EX. HAZ. WASTE PERMIT NO. NA
⑧ GENERATING PROCESS [illegible]

⑨ LIST COMPONENTS:

| | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|
| A | SOLUBLE CUTTING OIL | 10 | 5 | X % PPM |
| B | WATER | 89 | 83 | X % PPM |
| C | STODDARD SOLVENT DOOL | 1 | < 1 | X % PPM |
| D | | | | % PPM |
| E | | | | % PPM |
| F | | | | % PPM |
| G | | | | % PPM |

NONHAZARDOUS MATERIAL %

⑩ WASTE PROPERTIES: PH 8 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN

⑪ PHYSICAL STATE: ☐ SOLID ☐ LIQUID ☐ SLUDGE ☒ SLURRY ☐ GAS ☐ OTHER

⑫ SPECIAL HANDLING INSTRUCTIONS: ☐ GLOVES ☐ GOGGLES ☐ RESPIRATOR ☐ OTHER

**GENERATOR CERTIFICATION:** THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ HAZARDOUS WASTE COORDINATOR CHUCK YOUNGJOHN Chuck Youngjohn
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME Martin Industrial Pumping Service
EPA NO. CAD000628636
ADDRESS P.O. Box 579
CITY, STATE, ZIP CODE Saugus, CA 91350
PHONE NO. (805) 251-3737

JOB NO. 4109
UNIT NO. 1

⑮ PICK-UP DATE 3-22-82
TIME 4:30 ☐ AM ☒ PM

⑯ Tom Martin (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

NAME BKK
NO. CAD067786749

⑱ QUANTITY (IF MEASURED) 8.22
⑲ STATE FEE (IF ANY) $ 32.88

INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

⑳ [illegible]
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE ACCEPTED

㉑ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE TRANSFER

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY. PRESS HARD.

# CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

① MANIFEST NUMBER 335 - 31765

**GENERATOR** (GENERATOR MUST COMPLETE)

② NAME: 4R Textron
EPA NO.: CAD041162330
ADDRESS: 10445 Glenoaks Blvd.
CITY, STATE, ZIP CODE: Pacoima, CA 91331
PHONE NO.: (805) 259-4030
ORDER PLACED BY: Chuck Youngjohn ORDER DATE: 9/27/82
P.O./CONTRACT NO.:

③ DESIGNATED TSD FACILITY
(AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM)
NAME: B.K.K. Landfill
EPA NO.: CAD067786749
ADDRESS: 2210 Azusa Ave.
CITY, STATE, ZIP CODE: West Covina, CA
PHONE NO.: 965-0916

④ ALTERNATE TSD FACILITY
NAME:
EPA NO.:
ADDRESS:
CITY, STATE, ZIP CODE:
PHONE NO.:

| ⑤ U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA I.D. NO. | WEIGHT OR VOLUME | UNITS | CONTAINERS NUMBER |
|---|---|---|---|---|---|
| WASTE Combustible Liquid N.O.S. | Combustible | NA1993 | 2000 | Gals | DRUMS / BAGS / CARTONS / DUMP TRUCK |
| WASTE | Liquid | | | | X TANK TRUCK / OTHER |

⑥ WASTE CATEGORY: 43, 63
⑦ EX. HAZ. WASTE PERMIT NO.: NA
⑧ GENERATING PROCESS: Machine Tool Coolant

⑨ LIST COMPONENTS:

| | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS | | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| A Soluble Cutting Oil | 9 | 4 | X % | E | | | % |
| B Water | 90 | 84 | X % | F | | | % |
| C Standard Solvent Dool | 1 | <1 | X % | G | | | % |
| D | | | % | NONHAZARDOUS MATERIAL | | | % |

⑩ WASTE PROPERTIES: PH 8 ☐ TOXIC ☒ FLAMMABLE ☐ CORROSIVE/IRRITANT ☐ REACTIVE ☐ SENSITIZER ☐ CARCINOGEN/MUTAGEN
⑪ PHYSICAL STATE: ☐ SOLID ☐ LIQUID ☐ SLUDGE ☒ SLURRY ☐ GAS ☐ OTHER
⑫ SPECIAL HANDLING INSTRUCTIONS: ☒ GLOVES ☒ GOGGLES ☐ RESPIRATOR ☐ OTHER

GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA.

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802.

⑬ HAZARDOUS WASTE COORDINATOR
CHUCK YOUNGJOHN Chuck Youngjohn
SIGNATURE OF AUTHORIZED AGENT & TITLE — DATE SHIPPED

**TRANSPORTER** (HAULER MUST COMPLETE)

⑭ NAME: Martin Industrial Pumping Service
EPA NO.: CAD000628636
ADDRESS: P.O. Box 579
Saugus, CA 91350
PHONE NO.: (805) 251-3737

JOB NO.: 4148
UNIT NO.: 1

⑮ PICK-UP DATE: 9-25-82
TIME: 2:00 ☐ AM ☒ PM

⑯ Tom Martin (DRIVER)
SIGNATURE OF AUTHORIZED AGENT & TITLE

**TSD FACILITY** (OPERATOR MUST COMPLETE)

⑰ NAME: [illegible]
EPA NO.: CAD[illegible]

⑱ QUANTITY (IF MEASURED): SEE 2045
⑲ STATE FEE (IF ANY): $

⑳ HANDLING OR DISPOSAL METHOD:
☐ SURFACE IMPOUNDMENT ☒ LANDFILL
☐ INJECTION WELL ☐ LAND TREATMENT
☐ TREATMENT (SPECIFY)
☐ RECOVERY OR REUSE ☐ STORAGE/TRANSFER

INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT

WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY

㉑ [illegible] (G)
SIGNATURE OF AUTHORIZED AGENT & TITLE

9/28/82
DATE ACCEPTED

# CALIFORNIA HAZARDOUS WASTE MANIFEST

*See reverse side for instructions.*
**Please type or print clearly. Press Hard.**

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number **147 001104**

**GENERATOR** (GENERATOR MUST COMPLETE)

2 Name **H R TEXTRON**
EPA # CAD041162330
Address **10445 Glenoaks** Phone **805-259-4030**
City, State, Zip **Pacoima, CA 91331**

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program.)
Name **CASMALIS DISPOSAL**
EPA # CAD020748125
Address **MTU Rd.** Phone **805-937-8449**
City, State, Zip **Casmalia, CA 93429**

4 Alternate TSD Facility
Name
EPA #
Address Phone
City, State, Zip

| 5 U.S. DOT PROPER SHIPPING NAME | U.S. DOT HAZARD CLASS | UN/NA ID NO. | WEIGHT OR VOLUME | UNITS | NUMBER OF CONTAINERS |
|---|---|---|---|---|---|
| WASTE **See attached list** | | | **55 gal.** | **2** | TYPE: XX DRUMS ☐ BAGS ☐ CARTONS ☐ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER |
| WASTE | | | | | |

6 Waste Category **2** 7 Ext. Haz. Waste Permit No. **NA** 8 Generating Process **Research**

| LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS | LIST COMPONENTS: | CONCENTRATION RANGE UPPER | LOWER | UNITS |
|---|---|---|---|---|---|---|---|
| 9 A. | | | ☐% ☐ppm. | E. | | | ☐% ☐ppm |
| B. | | | ☐% ☐ppm. | F. | | | ☐% ☐ppm |
| C. | | | ☐% ☐ppm. | G. | | | ☐% ☐ppm |
| D. | | | ☐% ☐ppm. | Non-Hazardous Material | | | % |

10 WASTE PROPERTIES: pH ____ ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

12 SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☐ Goggles ☐ Respirator ☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to th applicable regulations of the Department of Transportation and EPA.

**IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802**

13 [signature] HAZARDOUS WASTE COORD 10-11-82
Signature of Authorized Agent and Title — Date Shipped

**TRANSPORTER** (HAULER MUST COMPLETE)

15 PICK-UP DATE 10-11-82

14 TRANSPORTER NAME **Containerized Chemical Disposal Inc.**
ADDRESS **P. O. Box 1142** PHONE **(213) 445-5344**
CITY, STATE, ZIP **Monrovia, CA 91016**
EPA NO. CAT000611483 Time 141 ☒ AM ☐ PM

16 [signature] 10-11-82
Signature of Authorized Agent and Title — Date

**TSD FACILITY** (FACILITY-OPERATOR MUST COMPLETE) #73069

17 NAME **Casmalia Resources**
EPA NO. CAD020748125
PHONE NO.

18 QUANTITY (If Measured)
19 STATE FEE (If Any)

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

21 HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☒ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Re-use ☐ Storage/Transfer
☐ Recycle

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 Designated TSD Facility Name EPA NO.

23 [signature] Paulette Schabtach
Signature of Authorized Agent and Title

10-26-82
Date Accepted

Copy 1—WHITE: TSD Facility Keeps — Copy 2—YELLOW: To Transporter from TSDF — Copy 3—PINK: To Generator from TSDF — Copy 4—GOLDENROD: Generator Keeps
Copy 5—GREEN: TSD Facility Sends to DOHS — Copy 6—BLUE: Generator Sends to DOHS DOHS

2166-04749

Department of Health Services

...r BRANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

...type with ELITE type (12 characters per inch).

STATE ID NUMBER 8 3015577

| | |
|---|---|
| GENERATOR NAME AND MAILING ADDRESS<br>HR TEXTRON<br>10445 GLENOAKS Blvd.<br>PACOIMA, CA. 91331<br>AREA CODE/PHONE NUMBER (805) 259-4030 | MANIFEST DOCUMENT NUMBER<br>EPA ID NUMBER<br>CAD041162339 |
| TRANSPORTER NO. 1<br>RUTHERFORD/PACIFIC | VEH./CONTAINER NO.<br>0338 |
| | EPA ID NUMBER<br>CAD980731935 |
| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY<br>N/A | VEH./CONTAINER NO. |
| | EPA ID NUMBER |
| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY<br>FACET ENERGY<br>3020 ORANGE AVE., LONG BEACH CA. 90807<br>AREA CODE/PHONE NUMBER (213) 595-9461 | EPA ID NUMBER<br>CAD991946194 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| OIL N.O.S. COMBUSTIBLE LIQUID | NA1270 | 402 | G | 1 | CT | 231 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| CUTTING OIL | 65 | 60 | X | |
| HYDRAULIC OIL | 35 | 30 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

TO BE FILLED IN BY GENERATOR

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature: HAZARDOUS WASTE COORDINATOR CHUCK YOUNGJOHN — MO. 11 DAY 18 YR. 85

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. DAY YR.

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature — EPA ID NUMBER — DATE RECEIVED & ACCEPTED MO. DAY YR.

GENERATOR RETAINS

Department of Health Services

ANCH UNIFORM HAZARDOUS WASTE MANIFEST

68289

STATE ID NUMBER 83015587

ELITE type (12 characters per inch).

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER |
|---|---|
| MR TEKTRON<br>10445 GLENOAKS BLVD.<br>PACOIMA, CA. 91331<br>AREA CODE/PHONE NUMBER (805) 259-4630 | EPA ID NUMBER<br>CAD004111628131 |

| TRANSPORTER NO 1 | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| RHO-CHEM CORPORATION | | CAD006131614131 |

| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| BKK CORPORATION | | CAD006177816174 |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| RHO-CHEM, CORPORATION<br>425 ISIS AVENUE<br>INGLEWOOD, CA. 90301<br>AREA CODE/PHONE NUMBER (213) 776-6233 | CAD006836141312 |

TO BE FILLED IN BY GENERATOR

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| ORM-A<br>111 TRICHLOROETHANE MIXTURE | UN2831 | 250 | G | 5 | DM | 211 | H |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| 111 TRICHLOROETHANE | 85 | 80 | X | |
| OIL | 25 | 15 | X | |
| INHIBITOR | 3 | 1 | X | |

SPECIAL HANDLING INSTRUCTIONS

USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN, HAZARDOUS WASTE COORDINATOR — MO. 12 DAY 21 YR. 83

Printed or typed full name and signature

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES — DATE REC'D & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES — DATE REC'D & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

DISCREPANCY INDICATION SPACE

203 GAL. WASTE HAS BEEN DISTILLED AND REDUCED TO 67 GAL.

TO BE FILLED IN BY TSDF

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

DATE RECEIVED & ACCEPTED

| EPA ID NUMBER | MO. | DAY | YR. |
|---|---|---|---|
| CAD006836141312 | 12 | 21 | 83 |

MARK A. EFLER Mark A. Efler

Printed or typed full name and signature

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

Department of Health Services

...ANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

...ELITE type (12 characters per inch).

STATE ID NUMBER 83015583

| | |
|---|---|
| ...ATOR NAME AND MAILING ADDRESS<br>HR TEXTRON<br>10445 GLENOAKS Blvd.<br>PACOIMA, CA. 91331<br>AREA CODE/PHONE NUMBER (805) 259-4030 | MANIFEST DOCUMENT NUMBER<br>EPA ID NUMBER<br>CAD041162330 |
| TRANSPORTER NO. 1<br>RUTHERFORD/PACIFIC | VEH./CONTAINER NO. 43621 — EPA ID NUMBER CAD980737035 |
| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY<br>N/A | VEH./CONTAINER NO. — EPA ID NUMBER |
| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY<br>FACET ENERGY<br>3020 ORANGE AVE., LONG BEACH, CA. 90807<br>AREA CODE/PHONE NUMBER (215) 595-9461 | EPA ID NUMBER CAD990669400 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| OIL N.O.S. COMBUSTIBLE LIQUID | NA1270 | 520 | G | 1 | CT | 221 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| CUTTING OIL | 65 | 60 | X | |
| HYDRAULIC OIL | 35 | 30 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN HAZARDOUS WASTE COORDINATOR

Printed or typed full name and signature [signature] — MO. 2 DAY 10 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES — DATE REC'D & ACCEPTED — MO. — DAY — YR.

Printed or typed full name and signature [signature]

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES — DATE REC'D & ACCEPTED — MO. — DAY — YR.

Printed or typed full name and signature

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator. Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Michael Mosier [signature]

Printed or typed full name and signature

EPA ID NUMBER

DATE RECEIVED & ACCEPTED — MO. — DAY — YR.

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

Agency
ENT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83015594

LITE type (12 characters per inch).

GENERATOR NAME AND MAILING ADDRESS
TEXTRON
745 GLENOAKS Blvd.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041116233

TRANSPORTER NO. 1
RUTHERFORD / PACIFIC

VEH./CONTAINER NO.
DDH361

EPA ID NUMBER
CAD980173705

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE., LONG BEACH, CA. 90807
AREA CODE/PHONE NUMBER (213) 595-9461

EPA ID NUMBER
CAD071810616

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| OIL N.O.S. COMBUSTIBLE LIQUID | NA1270 | 1 | G | 1 | CT | 2211 | 011 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| CUTTING OIL | 65 | 60 | X | |
| HYDRAULIC OIL | 35 | 30 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES & GOGGLES WHEN HANDLING

HR TEXTRON
MAR 17 1983
PACOIMA PURCHASING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN, HAZARDOUS WASTE COORDINATOR
Printed or typed full name and signature

MO. 03 DAY 10 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
LEEROY R BLACK
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 03 DAY 10 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

RECEIVED
MAR 17 1983
PURCHASING

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Michael G. Hosier
Printed or typed full name and signature

EPA ID NUMBER
CAD981016914010

DATE RECEIVED & ACCEPTED MO. 03 DAY 10 YR. 83

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

TO BE FILLED IN BY GENERATOR

Department of Health Services

...ency
...NT BRANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

...n ELITE type (12 characters per inch).

STATE ID NUMBER 83015596

...ATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91355
AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
RUTHERFORD / PACIFIC

VEH./CONTAINER NO.
43613

EPA ID NUMBER
CAD980737035

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE.
LONG BEACH, CA 90807
AREA CODE/PHONE NUMBER (213) 595-9461

EPA ID NUMBER
CAD990669400

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| FLAMMABLE LIQUID NO.S./FLAMMABLE LIQUID | UN1993 | 818 | G | 1 | CT | 213 | 01 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| STODDARD SOLVENT DOOL | 90 | 85 | X | |
| OIL | 10 | 5 | X | |

SPECIAL HANDLING INSTRUCTIONS
GLOVES, GOGGLES, NO SMOKING WHEN HANDLING MATERIAL

HR TEXTRON
APR 15 1983
PACOIMA PURCHASING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN, HAZARDOUS WASTE COORDINATOR
Printed or typed full name and signature Chuck Youngjohn

MO. 03 DAY 15 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Lee Roy R Black
Printed or typed full name and signature [signature]

DATE REC'D & ACCEPTED MO. 3 DAY 15 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TRANSPORTER

DISCREPANCY INDICATION SPACE

TO BE FILLED IN BY TSDF

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Michael G Mosier Michael G Mosier
Printed or typed full name and signature

EPA ID NUMBER
CAD990669400

DATE RECEIVED & ACCEPTED
MO. 03 DAY 15 YR. 83

Welfare Agency

AGEMENT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 8 3015646

ELITE type (12 characters per inch).

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER |
|---|---|
| TEXTRON<br>5 GLENOAKS Blvd.<br>SYLMAR, CA. 91331 | EPA ID NUMBER<br>CAD041162339 |
| AREA CODE/PHONE NUMBER (818) 251-4130 | |

| TRANSPORTER NO. 1 | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| RHO-CHEM CORPORATION | 94390 | CAD098364432 |

| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY | V.EH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| BKK CORPORATION | | CAD067786743 |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| RHO-CHEM CORPORATION<br>425 ISIS AVENUE<br>INGLEWOOD, CA. 90301<br>AREA CODE/PHONE NUMBER (213) 776-6233 | CAD009364432 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| 111 TRICHLOROETHANE MIXTURE ORM-A | UN2831 | 00300 | G | 006 | DM | 211 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| 111 TRICHLOROETHANE MIXTURE | 85 | 80 | X | |
| OIL | 25 | 15 | X | |
| INHIBITOR | 3 | 1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHILE HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN, HAZARDOUS WASTE COORDINATOR — MO. 05 DAY 26 YR. 85

Printed or typed full name and signature

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES — 70733 — DATE REC'D & ACCEPTED MO. 05 DAY 26 YR. 85

Printed or typed full name and signature

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES — DATE REC'D & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER — DATE RECEIVED & ACCEPTED MO. DAY YR.

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
744 P Street
Sacramento, CA 95814

Department of Health Servic

# UNIFORM HAZARDOUS WASTE MANIFEST

Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 8 3015642

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS BLVD
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (805) 257-4020

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162339

TRANSPORTER NO. 1
RUTHERFORD / PACIFIC

VEH./CONTAINER NO.
09943621

EPA ID NUMBER
CAD980737022

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE.
LONG BEACH, CA. 90807
AREA CODE/PHONE NUMBER (213) 595-9461

EPA ID NUMBER
CAD099669941

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DI ME |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / COMBUSTIBLE LIQUID | NA 1993 | 750 | G | 1 | CT | 421 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| CUTTING OIL | 65 | 60 | X | |
| HYDRAULIC OIL | 35 | 20 | X | |
| STODDARD SOLVENT DOT | 10 | 5 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature [illegible] Chuck [illegible]

MO. 9 4 DAY 9 9 YR. 9 4

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
LEROY K - [illegible]
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 0 6 DAY 9 9 YR. 9 4

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

ite of California—Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ease print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 8 3015629

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR Textron
1944 Gl... Ei...
F... C... (...) ...
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD 981 164 231

TRANSPORTER NO. 1
Ret... Tr.../Pac...

VEH./CONTAINER NO. 143641

EPA ID NUMBER
CAD 981 737 431

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
Fa... En...
30... Cra... Av...
L... B... ... 907...
AREA CODE/PHONE NUMBER ( ) ...

EPA ID NUMBER
CAD 981 466 144

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| Oil NOS / Combustible Liquid | NA1270 | 960 | G | 1 | CT | 231 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| Cutting oil | 80 | 75 | X | |
| Hydraulic | 20 | 15 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
Use Gloves And Protect With Hand...

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature C... Young Jr. [signature]

MO. 12 DAY 14 YR. 87

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature [signature] BLAC...

DATE REC'D & ACCEPTED MO. 01 DAY 05 YR. 87

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

GENERATOR RETAINS

ate of California—Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 8 3015627

ase print or type with ELITE type (12 characters per inch).

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10442 [illegible] BLVD
[illegible], CA [illegible]
AREA CODE/PHONE NUMBER (8 5) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162334

TRANSPORTER NO. 1
RUTHERFORD / PACIFIC

VEH./CONTAINER NO.
73421

EPA ID NUMBER
CAD980737[illegible]

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
[illegible] CHEMICAL
2020 ORANGE AVE.
LONG BEACH CA. 90807
AREA CODE/PHONE NUMBER (213) 595-9461

EPA ID NUMBER
CAD990669[illegible]

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| FLAMMABLE LIQUID N.O.S./[illegible] | [illegible] | 540 | G | 1 | CT | 213 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| STODDARD SOLVENT DOOL | 90 | 85 | X | |
| OIL | 10 | 5 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
[illegible]

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

[illegible]
Printed or typed full name and signature [signature]

MO. [illegible] DAY 16 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
RUTHERFORD/PACIFIC
Printed or typed full name and signature [signature]

DATE REC'D & ACCEPTED MO. [illegible] DAY 16 YR. [illegible]

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

te of California—Health and Welfare Agency
ZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ase print or type with E ITE type (12 characters per inch).

STATE ID NUMBER 8 3015623

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER |
|---|---|
| HR T[illegible] | |
| 1044[illegible] | EPA ID NUMBER |
| [illegible] | |
| AREA CODE/PHONE NUMBER ( ) | CAD941164330 |

| TRANSPORTER NO. 1 | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| RHO-CHEM CORPORATION | [illegible] | 9[illegible]90831644[illegible] |

| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| BKK CORPORATION | | CAD096178[illegible] |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| RHO-CHEM CORPORATION<br>425 [illegible] Avenue<br>[illegible], CA 90[illegible]<br>AREA CODE/PHONE NUMBER (213) 776-[illegible] | CAD[illegible] |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| CAN - A<br>111 TRICHLOROETHANE MIXTURE | UN2831 | 1[illegible]94 | G | 005 | DM | 211 | 01 |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| 111 TRICHLOROETHANE | 85 | 50 | X | |
| OIL | 25 | 15 | X | |
| INHIBITOR | 3 | 1 | X | |

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature — MO. | DAY | YR.

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature — DATE REC'D & ACCEPTED — MO. 11 | DAY 15 | YR. 85

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature — DATE REC'D & ACCEPTED — MO. | DAY | YR.

TO BE FILLED IN BY TRANSPORTER

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED — MO. | DAY | YR.

Printed or typed full name and signature

TO BE FILLED IN BY TSDF

GENERATOR RETAINS

ate of California—Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
14 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ease print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83015620

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENDALE BLVD
PALOMA, CA 91[illegible]
AREA CODE/PHONE NUMBER (213) [illegible]-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CA0941162330

TRANSPORTER NO. 1
OIL AND SOLVENT PROCESS COMPANY
1704 WEST FIRST STREET
AZUSA, CA 91702 (213)334-5117

VEH./CONTAINER NO. 42580

EPA ID NUMBER CA0998392[illegible]

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OIL AND SOLVENT PROCESS COMPANY
1704 WEST FIRST STREET
AZUSA, CA 91703
AREA CODE/PHONE NUMBER (213) 334-5117

EPA ID NUMBER CA0998392[illegible]

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| FLAMMABLE LIQUID N O S / FLAMMABLE LIQ | UN1993 | 2946 | G | 1 | CT | 213 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| STODDARD SOLVENT | 98 | 96 | X | |
| WATER | 4 | 2 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
NO SMOKING WHEN HANDLING MATERIAL

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
CHUCK YOUNGJOHN
Printed or typed full name and signature [signature]

MO. 09 DAY 20 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
[illegible]
Printed or typed full name and signature [signature]

DATE REC'D & ACCEPTED MO. DAY YR.

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

ite of California—Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ase print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83015614**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAK Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER: CAD041162330

TRANSPORTER NO. 1
3020 ORANGE
LONG BEACH CA. 90807
RUTHERFORD/PACIFIC

VEH./CONTAINER NO.: 99043621

EPA ID NUMBER: CAD980737033

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.:

EPA ID NUMBER:

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE
LONG BEACH, CA. 90807
AREA CODE/PHONE NUMBER (213) 595-9461

EPA ID NUMBER: CAD990669400

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | * TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| OIL N.O.S. / COMBUSTIBLE LIQUID | NA1270 | 740 | G | 1 | CT | 241 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| CUTTING OIL | 75 | 70 | X | |
| HYDRAULIC OIL | 25 | 20 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN
Printed or typed full name and signature

MO. 10 DAY 5 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
RUTHERFORD/PACIFIC — LEEROY R
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. 10 DAY 03 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED: MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

State of ... Health and Welfare Agency
HAZA... WASTE MANAGEMENT BRANCH
714-7... ...reet
Sacra... CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

Plea... ...t or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83160633

GENERATOR NAME AND MAILING ADDRESS
[illegible]
[illegible]
[illegible]
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
[illegible]

TRANSPORTER NO. 1
R[illegible] PACIFIC
3020 [illegible] AVE.
L[illegible], CA 90807 (213) 595-9461

VEH./CONTAINER NO.: 43621
EPA ID NUMBER: CAD98[illegible]

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

V.EH./CONTAINER NO.:
EPA ID NUMBER:

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE.
LONG BEACH, CA.
AREA CODE/PHONE NUMBER 90807 (213) 595-9461

EPA ID NUMBER: CAD99066940

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | * TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DIS MET |
|---|---|---|---|---|---|---|---|
| OIL N.O.S. / COMBUSTIBLE LIQUID | NA1270 | 420 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | * CONC. RANGE UPPER | LOWER | UNITS % | PPM |
|---|---|---|---|---|
| HYDRAULIC oil | 85 | 80 | X | |
| CUTTING oil | 20 | 15 | X | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YUNGJOHN
Printed or typed full name and signature [signature]

MO. 11 DAY 23 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Mother Lord/Pacific Lee Roy R. BLACK
Printed or typed full name and signature [signature]

DATE REC'D & ACCEPTED MO. 11 DAY 23 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

TO BE FILLED IN BY GENERATOR

...LLED IN BY TRANSPORTER

IS-8022A 11/82

GENERATOR RETAINS

Department of Health Servic

HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

Please print or type with ELITE type (12 characters per inch).

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83320564

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (213) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
RUTHERFORD/PACIFIC INC.
3020 ORANGE AVE.
LONG BEACH, CA 90807 (213) 595-9461

VEH./CONTAINER NO.: 43621
EPA ID NUMBER: CAD980737010

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

V.EH./CONTAINER NO.:
EPA ID NUMBER:

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE.
LONG BEACH, CA. 90807
AREA CODE/PHONE NUMBER (213) 595-9461

EPA ID NUMBER: CAD990669400

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | D M |
|---|---|---|---|---|---|---|---|
| FLAMMABLE LIQUID N.O.S./FLAMMABLE LIQUID | UN1993 | 1450 | G | 1 | CT | 213 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PF |
|---|---|---|---|---|
| STODDARD SOLVENT (D001) | 90 | 85 | X | |
| OIL | 10 | 5 | X | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES, NO SMOKING WHEN HANDLING MATERIAL

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN
Printed or typed full name and signature [signature]

MO. 11 DAY 16 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Leeroy R [signature]
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 11 DAY 16 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO DAY YR

Printed or typed full name and signature

FORM NO DHS-8022A 11/82

GENERATOR RETAINS

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 8 3015575

Type with ELITE type (12 characters per inch).

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd
PACOIMA, CA. 91331

AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041116233 9

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING SERVICE

VEH./CONTAINER NO.
2 19134

EPA ID NUMBER
CAD0010628631

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K. LAND FILL
2210 So. AZUSA AVENUE
WEST COVINA, CA. 91790

AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER
CAD067786174

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 122100 | G | 11 | PT | 221 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 90 | 84 | X | |
| SOLUBLE CUTTING OIL | 9 | 4 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

TO BE FILLED IN BY GENERATOR

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

* S/O SGT. JERRY MCMILLEN

Printed or typed full name and signature

MO. 11 DAY 11 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MARTIN INDUSTRIAL PUMPING
MIKE REID

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 11 DAY 11 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

...e Agency
...MENT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 8 3015579

...ELITE type (12 characters per inch).

...OR NAME AND MAILING ADDRESS
TEX TRON
...445 GLENOAKS Blvd
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL Pumping Service

*VEH./CONTAINER NO.
2 1 1 1 1 3 4

EPA ID NUMBER
CAD000628631

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K. LANDFILL
2210 So AZUSA AVENUE
WEST COVINA, CA 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER
CAD067788474

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 90 | 84 | X | |
| SOLUBLE CUTTING OIL | 9 | 4 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

* E. W. Miller
Printed or typed full name and signature

MO. 1 DAY 27 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MARTIN INDUSTRIAL PUMPING
MIKE REINA
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 1 DAY 27 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

Welfare Agency

AGEMENT BRANCH

Department of Health Servic

# UNIFORM HAZARDOUS WASTE MANIFEST

with ELITE type (12 characters per inch).

STATE ID NUMBER 8 3015578

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER |
|---|---|
| HR TEXTRON<br>10445 GLENOAKS Blvd.<br>PACOIMA, CA. 9133[illegible]<br>AREA CODE/PHONE NUMBER (805) 259-4030 | EPA ID NUMBER<br>CAD041162330 |

| TRANSPORTER NO. 1 * | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| MARTIN INDUSTRIAL PUMPING SERVICE | 101 10 09 | CA9999628631 |
| **TRANSPORTER NO. 2/ALTERNATE TSD FACILITY** | **VEH./CONTAINER NO.** | **EPA ID NUMBER** |
| N/A | | |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| B.K.K. LANDFILL<br>2210 So. AZUSA Ave.<br>WEST COVINA, CA. 91790<br>AREA CODE/PHONE NUMBER (213) 965-0911 | CAD982778749 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | * TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 20000 | G | 1 | CT | 321 | |
| | | | | | | | |

| [redacted] COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| ~~SOLVENT~~ ~~COMPONENT~~ ~~OIL~~ H2O | 90 | 84 | X | |
| SOLUBLE CUTTING OIL | 9 | 4 | X | |
| STODDARD SOLVENT (0001) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA. *

* S/D SGT. T. [illegible] W/ sgt. of Martin's

Printed or typed full name and signature

MO. 11 DAY 24 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

(RD) MARTIN MARTIN INDUSTRIAL PUMPING

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 01 DAY 24 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

TO BE FILLED IN BY GENERATOR

Agency — Department of Health Services

...MENT BRANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

...th ELITE type (12 characters per inch).

STATE ID NUMBER **83007970**

GENERATOR NAME AND MAILING ADDRESS
TR TEXTRON
10445 GLENOAKS Blvd., PACOIMA CA. 91331
AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041623330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING SERVICE
VEH./CONTAINER NO. 91 1969
EPA ID NUMBER CAD000628634

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A
VEH./CONTAINER NO.
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K. LANDFILL
2210 So. AZUSA AVENUE, WEST COVINA, CA. 91790
AREA CODE/PHONE NUMBER (213) 965-0911
EPA ID NUMBER CAD067786749

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | PT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 90 | 84 | X | |
| SOLUBLE CUTTING OIL | 9 | 4 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
S/S SGT J. MCMILLEN A/S Sgt J. McMillen
Printed or typed full name and signature
MO. 9 1 DAY 2 1 YR. 8 3

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MARTIN INDUSTRIAL PUMPING Tom Martin
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. 1 DAY 2 1 YR. 8 3

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
EPA ID NUMBER
Printed or typed full name and signature
DATE RECEIVED & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY GENERATOR

GENERATOR RETAINS

...re Agency
...EMENT BRANCH

Department of Health Service

# UNIFORM HAZARDOUS WASTE MANIFEST

...with ELITE type (12 characters per inch).

STATE ID NUMBER 83015580

| | |
|---|---|
| GENERATOR NAME AND MAILING ADDRESS<br>[redacted]<br>HR TEXTRON<br>10445 GLENOAKS Blvd., PACOIMA CA. 91331<br>AREA CODE/PHONE NUMBER (805) 259-4030 | MANIFEST DOCUMENT NUMBER<br>EPA ID NUMBER<br>CA0941162330 |
| TRANSPORTER NO. 1<br>MARTIN INDUSTRIAL Pumping Service | VEH./CONTAINER NO.<br>01196 |
| | EPA ID NUMBER<br>CA0009963863 |
| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY<br>N/A | V.EH./CONTAINER NO.<br>EPA ID NUMBER |
| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY<br>BKK LANDFILL<br>2210 So. AZUSA Ave.<br>WEST COVINA, CA. 91790<br>AREA CODE/PHONE NUMBER (213) 965-0911 | EPA ID NUMBER<br>CAD006778674 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 91 | 84 | X | |
| SOLUBLE CUTTING OIL | 8 | 4 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature [illegible]

MO. DAY YR.

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MARTIN INDUSTRIAL PUMPING
Printed or typed full name and signature TOM MARTIN
DATE REC'D & ACCEPTED MO. 04 DAY 07 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR.

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

Welfare Agency
AGEMENT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

with ELITE type (12 characters per inch).

STATE ID NUMBER 83015584

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER |
|---|---|
| HR TEXTRON<br>10445 GLENOAKS Blvd., PACOIMA CA. 91331 | EPA ID NUMBER |
| AREA CODE/PHONE NUMBER (805) 259-4030 | CAD041162330 |

| TRANSPORTER NO. 1 | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| MARTIN INDUSTRIAL PUMPING SERVICE | 1131 | CAD099062836 |

| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| N/A | | |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| BKK LANDFILL<br>2210 So. AZUSA Ave.<br>WEST COVINA, CA. 91790<br>AREA CODE/PHONE NUMBER (213) 965-0911 | CAD067786749 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 3300 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 91 | 84 | X | |
| SOLUBLE CUTTING OIL | 8 | 4 | X | |
| STODDARD SOLVENT (Dool) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES & GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature

MO. 12 DAY 15 YR. 87

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MARTIN INDUSTRIAL PUMPING
MIKE KEINA
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 12 DAY 22 YR. 87

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See Instructions.

Printed or typed full name and signature

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

State of California—Health and Welfare Agency

HAZARDOUS WASTE MANAGEMENT BRANCH
744 P Street
Sacramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83015590

Please print or type with ELITE type (12 characters per inch).

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, CA. 91331
AREA CODE/PHONE NUMBER (805) XX 259-4030

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAD041162330

TRANSPORTER NO. 1
Martin Industrial Pumping Service
XXXXXX XXXXXXXXXXXXXXXXXXXXXXXX

VEH./CONTAINER NO. 7 1934
EPA ID NUMBER CAD000628663

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.
EPA ID NUMBER [illegible]

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK Landfill
2210 So. Azusa Ave.
West Covina, Ca. 91790
AREA CODE/PHONE NUMBER (213) 965-6911

EPA ID NUMBER CAD067786744

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DIS ME |
|---|---|---|---|---|---|---|---|
| Combustible Liquid N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 91 | 84 | X | |
| xXxx Soluble Cutting oil | 8 | 4 | X | |
| Stoddard Solvent (D001) | 1 | 1 | X | |

SPECIAL HANDLING INSTRUCTIONS
Use gloves and goggles when handling

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA. S/O SGT J. MCMILLEN
Printed or typed full name and signature

MO. 2 DAY 28 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MARTIN INDUSTRIAL PUMPING
MIKE REINA
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 2 DAY 28 YR. 7

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

...fare Agency
...GEMENT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

...ch ELITE type (12 characters per inch).

STATE ID NUMBER 83015592

...ATOR NAME AND MAILING ADDRESS
R T CATRON
0445 GLENOAKS Blvd ARCADIA CA 91031

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

AREA CODE/PHONE NUMBER (805) 257-4030

CA 0 0 4 1 1 6 2 3 3 0

TRANSPORTER NO. 1

MART J INDUSTRIAL PUMP SERVICE

VEH./CONTAINER NO. 01 1969

EPA ID NUMBER CA D 0 0 0 9 6 2 8 6 3 0

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 So. AZUSA Ave.
WEST COVINA, CA 91790 (213) 965-0911
AREA CODE/PHONE NUMBER

EPA ID NUMBER CA D 0 6 7 7 8 6 7 4

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA 1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 91 | 84 | X | |
| SOLUBLE CUTTING OIL | 8 | 4 | X | |
| STODDARD SOLVENT | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature SGT. J McMILLEN

MO. 03 DAY 11 YR. 89

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Tom Martin

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 03 DAY 11 YR. 89

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

TO BE FILLED IN BY GENERATOR

GENERATOR RETAINS

...ith and Welfare Agency
...STE MANAGEMENT BRANCH
...CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83015598

...print or type with ELITE type (12 characters per inch).

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER: CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING SERVICE

VEH./CONTAINER NO.: 02 1934

EPA ID NUMBER: CAD000628636

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.:

EPA ID NUMBER:

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 So. AZUSA AVE.
WEST COVINA, CA. 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER: CAD067786744

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 91 | 84 | X | |
| SOLUBLE CUTTING OIL | 8 | 4 | X | |
| STODDARD SOLVENT DOOL | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature [illegible]

MO. 03 DAY 29 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MARTIN INDUSTRIAL PUMPING MIKE REINA
Printed or typed full name and signature Mike Reina

DATE REC'D & ACCEPTED MO. 03 DAY 29 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

...ency
...NT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

...ELITE type (12 characters per inch).

STATE ID NUMBER 8 3015599

| ...ATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER |
|---|---|
| ...R TEXTRON<br>10445 GLENOAKS Blvd<br>PACOIMA, CA. 91331<br>AREA CODE/PHONE NUMBER (805) 259-4030 | EPA ID NUMBER<br>CAD041162330 |

| TRANSPORTER NO. 1 | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| MARTIN INDUSTRAIL PUMPING SERVICE | 1969 | CAD000628636 |

| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| N/A | | |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| B.K.K. LANDFILL<br>2210 So. AZUSA AVE.<br>WEST COVINA, CA. 91790<br>AREA CODE/PHONE NUMBER (213) 965-0911 | CAD067786749 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | - |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 91 | 84 | X | |
| SOLUBLE CUTTING OIL | 8 | 4 | X | |
| STODDARD SOLVENT DOOL | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HA

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

| | MO. | DAY | YR. |
|---|---|---|---|
| Printed or typed full name and signature [signature] | 94 | 91 | 93 |

☐ Check if continuation sheet is used. Number of continuation sheets

| TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES | DATE REC'D & ACCEPTED | MO. | DAY | YR. |
|---|---|---|---|---|
| TOM MARTIN<br>Printed or typed full name and signature [signature] | | 64 | 21 | 83 |

| TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES | DATE REC'D & ACCEPTED | MO. | DAY | YR. |
|---|---|---|---|---|
| Printed or typed full name and signature | | | | |

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

| EPA ID NUMBER | DATE RECEIVED & ACCEPTED MO. | DAY | YR. |
|---|---|---|---|
| | | | |

...alth and Welfare Agency
...STE MANAGEMENT BRANCH
...A 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

...nt or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83027589

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
RUTHERFORD / PACIFIC

VEH./CONTAINER NO.
43623

EPA ID NUMBER
CAD980737033

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE.
LONG BEACH, CA. 90807
AREA CODE/PHONE NUMBER (213) 595-9461

EPA ID NUMBER
CAD990669400

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 841 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| Oil | 75 | 70 | X | |
| STODDARD SOLVENT | 25 | 20 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
GLOVES, GOGGLES, NO SMOKING WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
CHUCK YOUNGJOHN
Printed or typed full name and signature Chuck Youngjohn

MO. 04 DAY 19 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 4 DAY 19 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

RM NO. DHS 8022A 11/82

...ency
...NT BRANCH

Department of Health

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 8 3015607

...ELITE type (12 characters per inch).

...TOR NAME AND MAILING ADDRESS
...Textron
40445 Glenoaks Blvd.
Pacoima, CA. 91331
AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER: CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL Pumping Service

VEH./CONTAINER NO.: 1969

EPA ID NUMBER: CAD000062886

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.:

EPA ID NUMBER:

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK Landfill
2210 So. Azusa Ave.
West Covina, CA. 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER: CAD067786 7

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. |
|---|---|---|---|---|---|---|
| Combustible Liquid N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PP |
|---|---|---|---|---|
| $H_2O$ | 91 | 84 | X | |
| Soluble Cutting Oil | 8 | 4 | X | |
| Stoddard Solvent | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
Use Gloves and Goggles when handling

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA. S/O Sgt. J McMillen
S/O Sgt. J McMillen
Printed or typed full name and signature

MO. 05 DAY 23 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Tom Martin
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. 05 DAY 23 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. DAY YR.

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED: MO. DAY YR.

Printed or typed full name and signature

TO BE FILLED IN BY GENERATOR

TO BE FILLED IN BY TRANSPORTER

TO BE FILLED IN BY TSDF

GENERATOR RETAINS

Agency
ENT BRANCH

Department of Health Servic

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83015606

ELITE type (12 characters per inch).

TOR NAME AND MAILING ADDRESS
TEXTRON
0445 GLENOAKS Blvd., PALOIMA CA. 91331

AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER: CAD041162330

TRANSPORTER NO. 1: MARTIN INDUSTRIAL PUMPING SERVICE

VEH./CONTAINER NO.: 1969

EPA ID NUMBER: CAD000628631

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY: N/A

VEH./CONTAINER NO.:

EPA ID NUMBER:

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 So. AZUSA AVE.
WEST COVINA, CA. 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER: CAD067786741

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 91 | 84 | X | |
| SOLUBLE CUTTING OIL | 8 | 4 | X | |
| STODDARD SOLVENT | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA. S/O SGT. J. MCMILLEN.
S/O Sgt. J. McMillen

Printed or typed full name and signature

MO. 05 DAY 03 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
Tom Martin

Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. 05 DAY 03 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. DAY YR.

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED: MO. DAY YR.

Printed or typed full name and signature

TO BE FILLED IN BY GENERATOR

BY TRANSPORTER

IN BY TSDF

...nd Welfare Agency
...MANAGEMENT BRANCH
...814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83015644

...type with ELITE type (12 characters per inch).

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (805) 259-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER: CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING SERVICE

VEH./CONTAINER NO.: 1969

EPA ID NUMBER: CAD000628636

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.:

EPA ID NUMBER:

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 So. AZUSA AVE.
WEST COVINA, CA 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER: CAD067786749

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 91 | 84 | X | |
| SOLUBLE CUTTING OIL | 8 | 4 | X | |
| STODDARD SOLVENT | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

* S/O SET. J McMILLEN, J. McMillen

Printed or typed full name and signature

MO. 06 DAY 28 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN Tom Martin
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 06 DAY 28 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

Health and Welfare Agency
WASTE MANAGEMENT BRANCH
A 95814

# UNIFORM HAZARDOUS WASTE MANIFEST 23056

Department of Health Services

or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83015636

GENERATOB NAME AND MAILING ADDRESS
HR TEXT
1445 GOODYEARS BLVD
CA 91311
AREA CODE/PHONE NUMBER (818) 882-4030

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD981162330

TRANSPORTER NO. 1
MAT. INDUSTRIAL

VEH./CONTAINER NO. 4006A1

EPA ID NUMBER CAD000622555

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
3116 17TH ST
CA 92501
( ) 781-4626

VEH./CONTAINER NO.

EPA ID NUMBER CATO80010255

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKR CAUSTIP
2210 S. AZUSA
WEST CA 91790
AREA CODE/PHONE NUMBER (213) 965-0711

EPA ID NUMBER CAD067786744

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | D |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 91 | 83 | X | |
| SOLUBLE CUTTING OIL | 8 | 4 | X | |
| STODDARD | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature

MO. DAY YR.

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA
Printed or typed full name and signature
Mike Reina
DATE REC'D & ACCEPTED MO. 07 DAY 27 YR. 87

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Printed or typed full name and signature

DATE RECEIVED & ACCEPTED
EPA ID NUMBER CAD067786744 MO. 07 DAY 27 YR. 87

TSDF RETAINS

ite of California—Health and Welfare Agency
ZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
ramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ase print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83015630

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (805) 259-4630

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER: CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING SERVICE

VEH./CONTAINER NO.: 42263

EPA ID NUMBER: CAD000628636

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD CA 93301
(805) 768-4806

VEH./CONTAINER NO.:

EPA ID NUMBER: CAT080010028

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 SO. AZUSA
WEST COVINA, CA, 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER: CAD067786740

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 90 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 3 | X | |
| STODDARD SOLVENT (DOL) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

August T. Christensen [signature]
Printed or typed full name and signature

MO. 08 DAY 18 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN [signature]
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. 08 DAY 18 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED: MO. DAY YR.

Printed or typed full name and signature

ate of California - Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
cramento, CA 1581

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ease print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 8 3015621

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (805) 259-4636

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD 049116233 4

TRANSPORTER NO. 1
MARTIN INDUSTRIAL

VEH./CONTAINER NO.
42264

EPA ID NUMBER
CAD 099624613

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA 93301 (805) 768-4806

VEH./CONTAINER NO.

EPA ID NUMBER
CAT 080011938

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K. LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA. 91790 (213) 965-0911
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAD 049717861 4

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 12000 | G | 11 | CT | 331 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 90 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 3 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature

MO. 9 DAY 16 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 09 DAY 06 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

'e of California—Health and Welfare Agency
ZARDOUS WASTE MANAGEMENT BRANCH
. P Street
ramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ise print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **8 3015619**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAK. Blvd
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (213) [redacted] 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD941162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL Pumping

VEH./CONTAINER NO.
42263

EPA ID NUMBER
CAD000628636

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
EPC, ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA. 93301

VEH./CONTAINER NO.

EPA ID NUMBER
CAT080019283

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K. LANDFILL
2210 SOUTH AZUSA
WEST COVINA
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAD067786749

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 4200 | G | | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 85 | 80 | X | |
| SOLUBLE CUTTING OIL | 7 | 5 | X | |
| STODDARD SOLVENT (DOOL) | 10 | 5 | X | |

SPECIAL HANDLING INSTRUCTIONS
Gloves & Goggles

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
CHUCK YOUNGJOHN
Printed or typed full name and signature [signature]

MO. 09 DAY 21 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
Printed or typed full name and signature [signature]

DATE REC'D & ACCEPTED MO. 09 DAY 21 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

ite of California—Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
ramento, CA 95814

Department of Health Ser

# UNIFORM HAZARDOUS WASTE MANIFEST

ase print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83015608**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CA D004111612131261

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING

VEH./CONTAINER NO. 42266 | EPA ID NUMBER CAD010DERR8613161

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD CA. 93301 (805) 765-4201

VEH./CONTAINER NO. | EPA ID NUMBER CATO8D01DR8B13

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAD066177861416

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. (COMBUSTIBLE) | NA1993 | 4200 | G | 11 | CT | 21 | D14 |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 90 | 80 | X | |
| STODDARD SOLVENT (D001) | 10 | 5 | X | |
| MUD | <1 | <1 | X | |

HR TEXTRON

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES

NOV 9 1983

PACOIMA PURCHASING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
CHUCK YOUNGJOHN Chuck Youngjohn
Printed or typed full name and signature

MO. 10 DAY 17 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN Tom Martin
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 10 DAY 17 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
EVELYN STAGGS 4200 GAL
Printed or typed full name and signature Ph 9.0 WE-2

EPA ID NUMBER CAD018100102883

DATE RECEIVED & ACCEPTED MO. 10 DAY 17 YR. 83

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

54097 H

e of California—Health and Welfare Agency
ZARDOUS WASTE MANAGEMENT BRANCH
P Street
amento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 8 3015615

se print or type with ELITE type (12 characters per inch).

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING

VEH./CONTAINER NO.
42263

EPA ID NUMBER
CAD006286316

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA. 93301
(805) 765-4806

VEH./CONTAINER NO.

EPA ID NUMBER
CAT080011028

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K. LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA. 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER
CAD006178741

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | * TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 11 | CT | 331 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 90 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 3 | X | |
| STODDARD SOLVENT | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature JOHN M. SPEAKER — MO. 1 | DAY 05 | YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. 1 | DAY 05 | YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. | DAY | YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. | DAY | YR.

Printed or typed full name and signature

GENERATOR RETAINS

ıte of California—Health and Welfare Agency

ZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ase print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 8 3015609

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTILE
10445 GLENOAKS BLVD
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (213) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162339

TRANSPORTER NO. 1
MARTIN INDUSTRIAL

VEH./CONTAINER NO.
*

EPA ID NUMBER
CAD099061861

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA 93301

VEH./CONTAINER NO.

EPA ID NUMBER
CAT080119491

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K. LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA. 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER
CAD009678674

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. (CUTTING OIL) | NA1993 | 24000 | G | | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 89 | 82 | X | |
| SOLUBLE CUTTING OIL | 9 | 3 | X | |
| STODDARD SOLVENT (201) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVE AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature

MO. | DAY | YR.

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. 1 | DAY 10 | YR. 92

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. | DAY | YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED: MO. | DAY | YR.

Printed or typed full name and signature

of California - Health and Welfare Agency
RDOUS WASTE MANAGEMENT BRANCH
Street
nento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83015612

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (213) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162339

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING

VEH./CONTAINER NO.
42264

EPA ID NUMBER
CAD006286336

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA. 93301 (805) 768-4806

VEH./CONTAINER NO.

EPA ID NUMBER
CAT080010281

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K. LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA 91790
AREA CODE/PHONE NUMBER (213) 965-0911

EPA ID NUMBER
CAD006778674

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP. METH. |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 90 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 3 | X | |
| STODDARD SOLVENT (DOT) | 1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature: CHUCK YOUNG JOHN — MO. 11 DAY 14 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature: MIKE REINA
DATE REC'D & ACCEPTED — MO. 11 DAY 14 YR. 85

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature:
DATE REC'D & ACCEPTED — MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED — MO. DAY YR.

Printed or typed full name and signature

GENERATOR RETAINS

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

# UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83160629**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (213) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD 941162330

TRANSPORTER NO. 1
[redacted]

MARTIN INDUSTRAIL PUMPING

VEH./CONTAINER NO. H2263

EPA ID NUMBER CAD009063863

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA. 93301 (805) 768-4806

V.EH./CONTAINER NO.

EPA ID NUMBER CAT080019288

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA
AREA CODE/PHONE NUMBER

EPA ID NUMBER CAD067786744

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| HAZARDOUS WASTE LIQUID N.O.S./ | NA 9189 | 4200 | G | 1 | CT | 135 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O (RAIN WATER) | 99 | 98 | X | |
| STODDARD SOLVENT (DOOL) | <1 | <1 | X | |
| MUD | 1 | 1 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature CHUCK YOUNGJOHN [signature]

MO. 11 DAY 16 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature TOM MARTIN [signature]

DATE REC'D & ACCEPTED MO. 11 DAY 16 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

FORM NO. DHS-8022A 11/82

GENERATOR RETAINS

tate of California—Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
14-744 P Street
acramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

lease print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83160644**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (213) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041116233

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
[redacted]
VEH./CONTAINER NO. H22164
EPA ID NUMBER CAD010162863

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA. 93301 (805) 768-4806
VEH./CONTAINER NO.
EPA ID NUMBER CAT080101028

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA. 91790 (213) 965-
AREA CODE/PHONE NUMBER
EPA ID NUMBER CAD096717861

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / COMBUSTIBLE LIQUID | NA1993 | 12000 | G | 11 | CT | 2121 | 1 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 88 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 2 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

JOHN M SPEAKER
Printed or typed full name and signature

MO. 12 DAY 21 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 12 DAY 21 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D. & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

FORM NO. DHS-8022A 11/82

GENERATOR RETAINS

...lth and Welfare Agency
...STE MANAGEMENT BRANCH
...95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

...or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83374863**

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER / EPA ID NUMBER |
|---|---|
| HYDRAULIC RESEARCH TEXTRON<br>12137 Montague<br>Pacoima, CA<br>AREA CODE/PHONE NUMBER (213)896-2411 | CAD 041162330 |

| TRANSPORTER NO. 1 | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| CONTAINERIZED CHEMICAL DISPOSAL, INC. | | CAT 000611483 |

| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| | | |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| CASMALIA RESOURCES*<br>Ntu. Rd.<br>Casmalia, CA 93429<br>AREA CODE/PHONE NUMBER (805)937-8449 | CAD 020748125 |

TO BE FILLED IN BY GENERATOR

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| 1. Waste Pyridine, Flammable Liquid (Lab Pack) | UN 1282 | 000002 | G | 001 | D M | 135 | |
| 2. Waste Nitric acid, 40% or less, Spent Corrosive material (Lab Pack) | NA 1760 | 00001 | G | 001 | D M | 561 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| 1.1 Pyridine | | | | |
| 2.1 Nitric acid, spent | | | | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS

*This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.*

Printed or typed full name and signature Chad Young — MO. 12 DAY 12 YR. 81

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature Mark Cody Mark Crooks — DATE REC'D & ACCEPTED MO. 12 DAY 12 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature — EPA ID NUMBER — DATE RECEIVED & ACCEPTED MO. DAY YR.

FORM NO. DHS-8022A 11/82

GENERATOR RETAINS

...nd Welfare Agency
...E MANAGEMENT BRANCH
...95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

Print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83320658**

| | |
|---|---|
| GENERATOR NAME AND MAILING ADDRESS<br>HR TEXTRON<br>10445 GLENOAKS Blvd<br>PACOIMA, CA 91331<br>AREA CODE/PHONE NUMBER (213) 875-2411 | MANIFEST DOCUMENT NUMBER<br>EPA ID NUMBER<br>CAD041116233 |
| TRANSPORTER NO. 1<br>MARTIN INDUSTRIAL | VEH./CONTAINER NO.<br>45084 |
| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY<br>ENVIRONMENTAL PROTECTION CORP.<br>3040 19TH STREET<br>BAKERSFIELD, CA 93301 (805) 324-4806 | V.EH./CONTAINER NO. |
| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY<br>B.K.K. LANDFILL<br>2210 SOUTH AZUSA<br>WEST COVINA, CA 91790<br>AREA CODE/PHONE NUMBER (213) 965-0911 | EPA ID NUMBER<br>CAD067786714 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 24000 | G | 11 | CT | 241 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 89 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 3 | X | |
| STODDARD SOLVENT | <1 | <1 | X | |
| [illegible] | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS

[illegible]

*This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.*

Printed or typed full name and signature Chuck [illegible] — MO. 12 DAY 14 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature TOM MARTIN Tom Martin — DATE REC'D & ACCEPTED MO. 12 DAY 14 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR

TO BE FILLED IN BY GENERATOR

...th and Welfare Agency
...TE MANAGEMENT BRANCH
...5814
...type with ELITE type (12 characters per inch).

Department of Health Services

# UNIFORM HAZARDOUS-WASTE MANIFEST

STATE ID NUMBER **83320602**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (213) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL pumping
VEH./CONTAINER NO. 47264
EPA ID NUMBER CAD000628633

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA. 93301 (805) 768-4806
V.EH./CONTAINER NO.
EPA ID NUMBER CAT080010281

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
B.K.K LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA. 91790
AREA CODE/PHONE NUMBER (213) 965-0911
EPA ID NUMBER CAD067786744

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. | NA1993 | 2000 | G | 1 | CT | 221 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 89 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 3 | X | |
| STODDARD SOLVENT (DOOL) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (DOOL) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVE AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
C/O SGT. J McMILLEN
Printed or typed full name and signature Sgt. J McMillen
MO. 12 DAY 01 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA
Printed or typed full name and signature Mike Reina
DATE REC'D & ACCEPTED MO. 12 DAY 01 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
EPA ID NUMBER
DATE RECEIVED & ACCEPTED MO. DAY YR.
Printed or typed full name and signature

NO. DHS-8022A 11/82

GENERATOR RETAINS

ite of California—Health and Welfare Agency
ZARDOUS WASTE MANAGEMENT BRANCH
4-[illegible] P Street
cramento, CA 95814

# UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

2166-04749

ase print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83320606**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd
PA[illegible]MA, CA 91331
AREA CODE/PHONE NUMBER (818) 596-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
R. [illegible] / PA[illegible]
3020 ORANGE AVE
LONG BEACH, CA 90807 (2[illegible]) 595-9461

VEH./CONTAINER NO.: 43[illegible]21
EPA ID NUMBER: CAD980727[illegible]

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

V.EH./CONTAINER NO.:
EPA ID NUMBER:

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE
LONG BEACH, CA.
AREA CODE/PHONE NUMBER 90807 595-9461

EPA ID NUMBER: CAD990669401

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DIS MET |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / COMBUSTIBLE LIQ | NA1993 | 1640 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| HYDRAULIC OIL | 15 | 10 | X | |
| CUTTING OIL | 40 | 35 | X | |
| STODDARD SOLVENT (DEL) | 15 | 10 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
US [illegible] G [illegible] Handl[illegible]

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature [signature] MO. 02 DAY 06 YR. 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature [signature] LeeRoy R. TOLACK
DATE REC'D & ACCEPTED MO. 02 DAY 06 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER
DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

RM NO. DHS-8022A 11/82

GENERATOR RETAINS

ate of California—Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4-744 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ease print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83562101**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, CA 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
RHO-CHEM
425 1515 Avenue
Inglewood, CA 90301

VEH./CONTAINER NO.
00042436

EPA ID NUMBER
CAD008364431

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
INDUSTRIAL WASTE UTILIZATION
[redacted]

VEH./CONTAINER NO.

EPA ID NUMBER
CAD980585277
[redacted]

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
RHO-CHEM
425 1515 Avenue
Inglewood, CA
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAD008364431

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO | DIS MET |
|---|---|---|---|---|---|---|---|
| 111 TRICHLOEROETHANE mixture / ORM-A | UN2831 | 432 | G | 8 | DM | 211 | 0 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| 111 TRICHLOEROETHANE | 85 | 80 | X | |
| OIL | 25 | 15 | X | |
| INHIBITOR | 3 | 1 | X | |

SPECIAL HANDLING INSTRUCTIONS
Gloves and Goggles

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

CHUCK YOUNGJOHN
Printed or typed full name and signature [signature]

8

| MO | DAY | YR |
|---|---|---|
| 03 | 01 | 84 |

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
ALFRED MAY #80064 [signature]
Printed or typed full name and signature

DATE REC'D & ACCEPTED

| MO. | DAY | YR |
|---|---|---|
| 03 | 01 | 84 |

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED

| MO. | DAY | YR |
|---|---|---|
| | | |

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Chet Earley [signature]
Printed or typed full name and signature

EPA ID NUMBER
CAD008364432

DATE RECEIVED & ACCEPTED

| MO. | DAY | YR |
|---|---|---|
| 03 | 01 | 84 |

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

83-87967

ate of California – Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
14-744 P Street
icramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ease print or type with ELITE type (12 characters per inch)

STATE ID NUMBER **83562088**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CA0041162330

TRANSPORTER NO. 1
RUTHERFORD/PACIFIC
3020 ORANGE AVE.
LONG BEACH, CA. 90807 (213) 595-9461

VEH./CONTAINER NO.: 53659
EPA ID NUMBER: CAD980737037

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
FACET ENERGY
3020 ORANGE AVE.
LONG BEACH, CA
AREA CODE/PHONE NUMBER 90807 595-9461

EPA ID NUMBER: CAD990669400

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQUID | NA1993 | 1220 | G | 1 | CT | 331 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| HYDRAULIC OIL | 30 | 25 | X | |
| CUTTING OIL | 40 | 30 | X | |
| STODDARD SOLVENT | 30 | 25 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

CHUCK YOUNG JOHN
Printed or typed full name and signature

MO. 04 DAY 13 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
LEROY R BLACK LEROY R. BLACK
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. 04 DAY 13 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE
No Solvent found in Product
Flash Point = 178° IBP = 392 API @ 60° = 27.2

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Michael Mosier Michael Mosier
Printed or typed full name and signature

EPA ID NUMBER: CAD990669400

DATE RECEIVED & ACCEPTED: MO. 04 DAY 13 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

83-87967

UNIFORM HAZARDOUS WASTE MANIFEST

Type with ELITE type (12 characters per inch).

STATE ID NUMBER **83562082**

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041116233 0

TRANSPORTER NO. 1
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301 (213) 776-6233

VEH./CONTAINER NO. 42437

EPA ID NUMBER
CAD009836432

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
INDUSTRIAL WASTE UTILIZATION

VEH./CONTAINER NO.

EPA ID NUMBER
CAD980585293

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
RHO-CHEM
425 ISIS AVENUE
INGLEWOOD, CA. 90301
AREA CODE/PHONE NUMBER (213) 776-6233

EPA ID NUMBER
CAD009836432

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| 111 TRICHLOROETHANE MIXTURE FORM-A | UN2831 | 300 | G | 6 | DM | 211 | 01 |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| 111 TRICHLOROETHANE | 85 | 80 | X | |
| OIL | 25 | 15 | X | |
| INHIBITOR | 3 | 1 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES & GOGGLES WHEN HANDLING

(6)

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature: CHUCK YOUNGJOHN — MO. 05 DAY 18 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature: ALFRED MAY #83260 — DATE REC'D & ACCEPTED MO. 05 DAY 18 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. DAY YR

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature: KEVIN RYAN

EPA ID NUMBER: CAD009836432 — DATE RECEIVED & ACCEPTED MO. 05 DAY 17 YR 84

DHS-A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

83-87987

Agency

ENT BRANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83562067

LITE type (12 characters per inch).

GENERATOR NAME AND MAILING ADDRESS
AR Testing
10445 Glenoaks Blvd.
Pacoima, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CA0014116233 10

TRANSPORTER NO. 1
RHO-CHEM CORP.
425 1515 AVE.
INGLEWOOD, CA. 90301 (213) 776-6233

VEH./CONTAINER NO. 412436

EPA ID NUMBER
CA0008361413

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
INDUSTRIAL WASTE UTILIZATION

V.EH./CONTAINER NO.

EPA ID NUMBER
CAD980555219

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
RHO-CHEM CORP
425 1515 AVE.
INGLEWOOD, CA. 90301 (213) 776-6233
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CA0009836143

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO | DI ME |
|---|---|---|---|---|---|---|---|
| [redacted] | UN1831 | 0040 | G | 018 | DM | 211 | C |
| Waste Liquid ORM-A NOS | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PP |
|---|---|---|---|---|
| 111 TRICHLOROETHANE | 85 | 80 | X | |
| OIL | 25 | 15 | X | |
| INHIBITOR | 3 | 1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN
Printed or typed full name and signature

MO. 08 DAY 16 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Robt Cuddy 96231
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 08 DAY 16 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Rudy Rivera
Printed or typed full name and signature

EPA ID NUMBER CAD008364433

DATE RECEIVED & ACCEPTED MO. 08 DAY 16 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

83-8796

ite of California – Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4-744 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ase print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83562069**

**GENERATOR NAME AND MAILING ADDRESS**
HR. TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041116333

**TRANSPORTER NO. 1**
ASBURY OIL CO.
2100 ALAMADA
COMPTON, CA 90222

VEH./CONTAINER NO. 52660
EPA ID NUMBER CADE28277

**TRANSPORTER NO. 2/ALTERNATE TSD FACILITY**
N/A

V.EH./CONTAINER NO
EPA ID NUMBER

**TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY**
DEMENNO / KERDON
2000 ALAMADA
COMPTON CA. 90222
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAT080013352

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO | DISP METH |
|---|---|---|---|---|---|---|---|
| WASTE OIL N.O.S., COMBUSTIBLE LIQUID | NA1270 | 1450 | G | 11 | CT | 221 | O |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| HYDRAULIC OIL | 40 | 35 | X | |
| CUTTING OIL | 60 | 50 | X | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

CHUCK YOUNGJOHN Chuck Youngjohn
Printed or typed full name and signature

MO. 08 DAY 13 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature Stan Hartwell STAN HARTWELL
DATE REC'D & ACCEPTED MO. 08 DAY 13 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator. Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

MILA FAANOI
Printed or typed full name and signature

EPA ID NUMBER CAT080013352

DATE RECEIVED & ACCEPTED MO. 08 DAY 2 YR 84

FORM NO DHS-8022A 11/82 (7/11)

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

83-87967

se print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83562051

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO 1
ASBURY OIL CO.
2100 ALAMADA
COMPTON, CA. 90222

VEH./CONTAINER NO 52660
EPA ID NUMBER CAD028277703

TRANSPORTER NO 2/ALTERNATE TSD FACILITY
N/A

VEH./CONTAINER NO.
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
~~[illegible]~~ DEMENNO / KERDON
2000 ALAMADA
COMPTON, CA 90222
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAT080013355

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT NO. | DI ME |
|---|---|---|---|---|---|---|---|
| WASTE OIL N.O.S., COMBUSTIBLE LIQUID | NA1270 | 400 | G | 1 | CT | 221 | C |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| HYDRAULIC OIL | 40 | 35 | X | |
| CUTTING OIL | 60 | 50 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA
CHUCK YOUNGJOHN
Printed or typed full name and signature Chuck Youngjohn

MO 10 DAY 04 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Stanley Louis Hartwell
Printed or typed full name and signature Stan Hartwell

DATE REC'D & ACCEPTED MO 10 DAY 04 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
J Pearman
Printed or typed full name and signature J Pearman

EPA ID NUMBER CAT080013352

DATE RECEIVED & ACCEPTED MO 10 DAY 04 YR 84

M NO DHS-8022A 11/82 69039 (W.O) 1/2 TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS 83-8796

ate of California – Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4-744 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ease print or type with ELITE type (12 characters per inch)

STATE ID NUMBER 83567895

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041116233

TRANSPORTER NO 1
RHO-CHEM
425 ISIS AVE.
INGLEWOOD, CA. 90301 (213) 776-6233
VEH./CONTAINER NO 010141316
EPA ID NUMBER CAD068364143

TRANSPORTER NO 2/ALTERNATE TSD FACILITY
INDUSTRIAL WASTE UTILIZATION
VEH./CONTAINER NO.
EPA ID NUMBER CAD980158521

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
RHO-CHEM
425 ISIS AVE
INGLEWOOD, CA.
AREA CODE/PHONE NUMBER (213) 776-6233
EPA ID NUMBER CAD068364143

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO | DISP METH |
|---|---|---|---|---|---|---|---|
| WASTE ORM-A LIQUID, N.O.S. | UN1693 | 1350 | G | 001 | DM | 211 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| 111 TRICHLOROETHANE | 85 | 80 | X | |
| OIL | 25 | 15 | X | |
| INHIBITOR | 3 | 1 | X | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES & GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA
Printed or typed full name and signature CHUCK YOUNGJOHN

MO. 11 DAY 14 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature ACEO #89605
DATE REC'D & ACCEPTED MO. 11 DAY 14 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE
NONE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Printed or typed full name and signature KEVIN RYAN
EPA ID NUMBER CAD019816432
DATE RECEIVED & ACCEPTED MO. 11 DAY 14 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

83-87967

of California – Health a . Welfare Agency

ARDOUS WASTE MANAGEMENT BRANCH
744 P Stre
amento, CA 95814

# UNIFORM HAZARDOUS WASTE MANIFEST

RECEIVED
DEC 18 1984
PURCHASING

se print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83567839

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER / EPA ID NUMBER |
|---|---|
| HR TEXTRON<br>10445 GLENOAK BLVD.<br>PACOIMA, CA. 91331<br>AREA CODE/PHONE NUMBER (818) 896-2411 | CA1014116123310 |

| TRANSPORTER NO. 1 | VEH./CONTAINER NO | EPA ID NUMBER |
|---|---|---|
| ASBURY OIL COMPANY<br>2100 ALAMADA<br>COMPTON, CA. 90222 321-1592 | 512660 | CA1062812717013 |

| TRANSPORTER NO 2/ALTERNATE TSD FACILITY | VEH./CONTAINER NO | EPA ID NUMBER |
|---|---|---|
| N/A | | |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| DEMENNO/KERDON<br>2000 ALAMADA<br>COMPTON, CA 90222<br>AREA CODE/PHONE NUMBER | CAT080013515 |

TO BE FILLED IN BY GENERATOR

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| WASTE OIL N.O.S., COMBUSTIBLE LIQUID | NA1270 | 110 | G | 11 | CT | 2311 | 01 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| HYDRAULIC OIL | 35 | 30 | X | |
| CUTTING OIL | 70 | 65 | X | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND SOCIAL HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

CHUCK YOUNGJOHN
Printed or typed full name and signature Chuck Youngjohn

MO. 12 DAY 11 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
ERIC CUDEBACK Eric Cudeback
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. 12 DAY 11 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

HENDON RANDLE Hendon Randle
Printed or typed full name and signature

EPA ID NUMBER CAT080013515 DATE RECEIVED & ACCEPTED MO. 12 DAY 11 YR 84

DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

83-87967

HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

# UNIFORM HAZARDOUS WASTE MANIFEST

Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83320608**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING

VEH./CONTAINER NO. * 42264
EPA ID NUMBER CAD000628613

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA. 93301
(805) 768-4806

V.EH./CONTAINER NO.
EPA ID NUMBER CAT080010 28

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA 91790
AREA CODE/PHONE NUMBER

EPA ID NUMBER CAD067786 74

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DI ME |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQUID | NA1993 | 2000 | G | 1 | CT | 221 | C |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 88 | 82 | X | |
| SOLUBLE CUTTING oil | 8 | 2 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN 2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA. *

Printed or typed full name and signature CHARLES PRICE Charles Price

MO. 01 DAY 16 YR. 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA
Printed or typed full name and signature Mike Reina

DATE REC'D & ACCEPTED MO. 01 DAY 16 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
EVELYN SKAGGS 2000 GAL
Evelyn Skaggs Ph 10.0 F# WW-4

EPA ID NUMBER CAT080010 2813

DATE RECEIVED & ACCEPTED MO. 01 DAY 19 YR. 84

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

FSC#36794 H

UNIFORM HAZARDOUS WASTE MANIFEST

95814

Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83562099**

| | |
|---|---|
| GENERATOR NAME AND MAILING ADDRESS<br>HR TEXTRON<br>10445 GLENOAKS Blvd<br>PACOIMA, CA. 91331<br>AREA CODE/PHONE NUMBER (818) 896-2411 | MANIFEST DOCUMENT NUMBER<br>EPA ID NUMBER<br>CA0 0 9 4 1 1 1 6 2 3 3 0 |
| TRANSPORTER NO 1<br>MARTIN INDUSTRIAL PUMPING | VEH /CONTAINER NO<br>45084<br>EPA ID NUMBER<br>CA D 0 0 0 6 2 8 6 2 6 |
| TRANSPORTER NO 2/ALTERNATE TSD FACILITY<br>ENVIRONMENTAL PROTECTION CORP.<br>3040 19TH STREET<br>BAKERSFIELD, CA. 93301 (805) 768-4806 | V.EH /CONTAINER NO<br>EPA ID NUMBER<br>CA T 0 8 0 1 0 1 0 2 8 5 |
| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY<br>BKK LANDFILL<br>2210 SOUTH AZUSA<br>WEST COVINA, CA. 91790<br>AREA CODE/PHONE NUMBER | EPA ID NUMBER<br>CA D 0 6 7 7 8 6 7 4 5 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| Combustible Liquid N.O.S. / Combustible Liquid | NA 1 9 9 3 | 1 2 0 0 0 | G | 1 1 | C T | 2 2 4 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 88 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 2 | X | |
| STODDARD SOLVENT (Dwell) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (1831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature [signature] MO 02 DAY 17 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature TOM MARTIN [signature] DATE REC'D & ACCEPTED MO 02 DAY 17 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature DATE REC'D & ACCEPTED MO DAY YR

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature EPA ID NUMBER DATE RECEIVED & ACCEPTED MO DAY YR

TO BE FILLED IN BY GENERATOR

10 DHS-8022A 11/82

GENERATOR RETAINS

83-87967

Welfare Agency
MANAGEMENT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

Type with ELITE type (12 characters per inch).

STATE ID NUMBER 83562038

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162336

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
VEH./CONTAINER NO 45804
EPA ID NUMBER CAD000628630

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA 93301 (805) 768-4806
V.EH./CONTAINER NO.
EPA ID NUMBER CAT080010283

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 SOUTH AZUSA
WEST CIVINA, CA
AREA CODE/PHONE NUMBER
EPA ID NUMBER CAD067786740

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| HAZARDOUS WASTE LIQUID N.O.S. / CRM-E | NA9189 | 4200 | G | 1 | CT | 135 | 04 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 99 | 98 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| MUD | 1 | 1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN
Printed or typed full name and signature Chuck Youngjohn
MO. 02 DAY 17 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
Printed or typed full name and signature Tom Martin
DATE REC'D & ACCEPTED MO. 02 DAY 17 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TRANSPORTER

DISCREPANCY INDICATION SPACE

IN BE FILLED IN BY TSDF

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number.
See instructions.
EVELYN SKAGGS 4200 -GOL
Evelyn Skaggs Ph8° WW-5
Printed or typed full name and signature
EPA ID NUMBER CAT080010283
DATE RECEIVED & ACCEPTED MO. 02 DAY 17 YR 84

NO DI DHS-8022A 11/82 TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

Welfare Agency
MANAGEMENT BRANCH
5814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83320607**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTON
10445 GLENOAKS BLVD.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
MART I [illegible]

VEH/CONTAINER NO
45084

EPA ID NUMBER
CAD000628613

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA 93301
(805) 768-4800

V.EH/CONTAINER NO.

EPA ID NUMBER
CAT080001028

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BIK LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA 91790
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAD006778674

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DIS ME |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQUID | NA1993 | 2000 | G | 1 | CT | 221 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 88 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 2 | X | |
| STODDARD SOLVENT (DOOL) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
[illegible]

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN
Printed or typed full name and signature [signature]

MO. 02 DAY 02 YR. 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
Printed or typed full name and signature [signature]

DATE REC'D & ACCEPTED MO. 02 DAY 02 YR. 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

AZARDOUS WASTE MANAGEMENT BRANCH
14-744 P Street
acramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

ease print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83374947**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HYDRAULIC RESEARCH TEXTRON
12137 Montague
Pacoima, CA
AREA CODE/PHONE NUMBER (213)896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
CONTAINERIZED CHEMICAL DISPOSAL INC

VEH./CONTAINER NO.

EPA ID NUMBER
CAT000611433

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

V.EH./CONTAINER NO

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
CASMALIA RESOURCES
Ntu Rd.
Casmalia, CA 93429
AREA CODE/PHONE NUMBER (805)937-8449

EPA ID NUMBER
CAD020748125

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| 1. Waste Sodium Hydroxide, Dry Solid, Corrosive material | UN1823 | 00430 | P | 001 | DM | 181 | |
| 2. Waste Acetic Acid Corrosive material | UN2790 | 00005 | G | 001 | DF | 135 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| 1.1 Sodium Hydroxide solid (Powder) | 100 | | X | |
| 2.1 Acetic Acid | 100 | | X | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Chuck Yoelsohn
Printed or typed full name and signature Chuck [signature]

MO. 02 DAY 27 YR. 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Mark Creddy Mark Creddy
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 02 DAY 27 YR. 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR.

Printed or typed full name and signature

RM NO. DHS-8022A 11/82

GENERATOR RETAINS

...STE MANAGEMENT BRANCH

95814

...r type with ELITE type (12 characters per inch).

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83562035

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER / EPA ID NUMBER |
|---|---|
| HR TEXTRON<br>10445 GLENOAKS Blvd.<br>PACOIMA, CA. 91331<br>AREA CODE/PHONE NUMBER (818) 896-2411 | CAD041162330 |

| TRANSPORTER NO. 1 | VEH/CONTAINER NO | EPA ID NUMBER |
|---|---|---|
| ~~[illegible]~~<br>MARTIN INDUSTRIAL PUMPING | 47764 | CAD000628636 |

| TRANSPORTER NO 2/ALTERNATE TSD FACILITY | VEH/CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| ENVIRONMENTAL PROTECTION CORP.<br>3040 19TH STREET<br>BAKERSFIELD, CA. 933 | | CAT080010283 |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| BKK LANDFILL<br>2210 SOUTH AZUSA<br>WEST COVINA, CA. 91790<br>AREA CODE/PHONE NUMBER | CAD067786742 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID NOS/COMBUSTIBLE LIQUID | NA1993 | 2000 | G | 1 | CT | 221 | 01 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 88 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 7 | X | |
| STODDARD SOLVENT (DOOL) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UNKEST) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA *

* S.C. J.L. MCMILLEN

Printed or typed full name and signature [signature] MO. 03 DAY 06 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

MIKE REINA

Printed or typed full name and signature [signature] DATE REC'D & ACCEPTED MO. 03 DAY 06 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TRANSPORTER

DISCREPANCY INDICATION SPACE

TO BE FILLED IN BY TSDF

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EVELYN SKAGGS 2000-GAL

Printed or typed full name and signature [signature] Ph10.0 F# WW-3

EPA ID NUMBER CAD080010283

DATE RECEIVED & ACCEPTED MO. 03 DAY 12 YR 84

NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

EAC# 62270

GENERATOR RETAINS

Welfare Agency
ANAGEMENT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

with ELITE type (12 characters per inch).

STATE ID NUMBER 83562032

GENERATOR NAME AND MAILING ADDRESS
IR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (818)

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162323

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING

VEH./CONTAINER NO. 42264

EPA ID NUMBER
CA0000626363

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA.
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAT080010288

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DIS MET |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. (COMBUSTIBLE OIL) | NA1993 | 3000 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 88 | 82 | X | |
| SOLUBLE CUTTING OIL | 8 | 7 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature CHUCK YOUNGBLOOD Chuck Youngblood

MO. 03 DAY 19 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA Mike Reina
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 05 DAY 17 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR

FORM NO DHS-8022A 11/82

GENERATOR RETAINS

83-87967

Department of Health Services

...EMENT BRANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

...ELITE type (12 characters per inch).

STATE ID NUMBER **83562087**

...RATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO 1
MARTIN INDUSTRIAL PUMPING

VEH./CONTAINER NO. 45084
EPA ID NUMBER CAD000628636

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

V.EH./CONTAINER NO
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA 93301
AREA CODE/PHONE NUMBER (805) 327-9681

EPA ID NUMBER
CAT080011028

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQUID | NA1993 | 2000 | G | 1 | CT | 221 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA
* S/O J. L. McMILLEN
Printed or typed full name and signature S/O J. L. McMillen

MO. 04 DAY 27 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
Printed or typed full name and signature Tom Martin

DATE REC'D & ACCEPTED MO. 04 DAY 27 YR. 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR

Printed or typed full name and signature

NO DHS-8022A 11/82

GENERATOR RETAINS

83-87987

type (12 characters per inch)

STATE ID NUMBER 83562089

OR NAME AND MAILING ADDRESS
AR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
REA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

RANSPORTER NO 1
MARTIN INDUSTRIAL PUMPING

VEH /CONTAINER NO. 45084
EPA ID NUMBER CAD000628636

RANSPORTER NO 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA.

VEH /CONTAINER NO
EPA ID NUMBER CAT080010283

REATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
BKK LANDFILL
2210 SOUTH AZUSA
WEST COVINA, CA 91790
REA CODE/PHONE NUMBER

EPA ID NUMBER CAD067786740

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO | DISP. METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQUID | NA1993 | 2000 | G | 1 | CT | 221 | 04 |

| COMPONENTS | CONC RANGE UPPER | CONC RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (DOOL) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

PECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

his is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in oper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
AUGUST T. CHRISTENSEN
inted or typed full name and signature August T. Christensen

MO. 04 DAY 06 YR. 84

] Check if continuation sheet is used. Number of continuation sheets

RANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
inted or typed full name and signature Tom Martin

DATE REC'D & ACCEPTED MO 04 DAY 06 YR. 84

RANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
inted or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

SCREPANCY INDICATION SPACE

icility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the screpancy indication space above. Note: TSDF must complete waste number. ee instructions.
EVELYN STAGGS 2000-GAL
inted or typed full name and signature Ph8.° WE-3

EPA ID NUMBER CAD080010283

DATE RECEIVED & ACCEPTED MO. 04 DAY 06 YR. 84

022A 11/82 TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS #61585 83-87

GENERATOR RETAINS

UNIFORM HAZARDOUS WASTE MANIFEST

Type with ELITE type (12 characters per inch)

STATE ID NUMBER 83562081

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd
PACOIMA, CA
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041116233

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
VEH./CONTAINER NO. 45084
EPA ID NUMBER CAD006062863

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION
3040 19TH STREET
BAKERSFIELD, CA.
V.EH./CONTAINER NO.
EPA ID NUMBER CATT080010283

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA
AREA CODE/PHONE NUMBER 93429
EPA ID NUMBER CAD039074815

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQ. | NA1993 | 1500 | G | 1 | CT | 2121 | D14 |

| COMPONENTS | CONC RANGE UPPER | CONC RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (DOOL) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVE AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
* S/O JERRY LEE McMILLEN
Printed or typed full name and signature S/O Jerry Lee McMillen
MO. 05 DAY 25 YR 84
☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
JOHN MARTIN
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. 05 DAY 25 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator. Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number.
See instructions
EVELYN STAGGS 1500-GAL
Evelyn Staggs Ph.10.F* WC-2
EPA ID NUMBER CAD080010283
DATE RECEIVED & ACCEPTED MO. 05 DAY 29 YR 84

FORM NO DHS-8022A 11/82 TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS #48547 83-87961

...GEMENT BRANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

type with ELITE type (12 characters per inch)

STATE ID NUMBER **83562083**

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER / EPA ID NUMBER |
|---|---|
| HR TEXTRON<br>10445 GLENOAKS Blvd.<br>PACOIMA, CA.<br>AREA CODE/PHONE NUMBER (818) 896-2411 | CA0041162330 |

| TRANSPORTER NO. 1 | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| MARTIN ~~[illegible]~~ INDUSTRIAL PUMPING | 45083 | CAD000628636 |

| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| ENVIRONMENTAL PROTECTION CORP.<br>3040 19TH STREET<br>BAKERSFIELD | | CAT080010283 |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| BKK LANDFILL<br>2210 SOUTH AZUSA<br>WEST COVINA, CA. 91790<br>AREA CODE/PHONE NUMBER | CAD067786740 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQ | NA1993 | 2000 | G | 1 | CT | 221 | 04 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (DOOL) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN 2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

* CHUCK YOUNGJOHN
Printed or typed full name and signature [signature]

| MO. | DAY | YR |
|---|---|---|
| 05 | 16 | 84 |

☐ Check if continuation sheet is used. Number of continuation sheets

| TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES | DATE REC'D & ACCEPTED | MO. | DAY | YR |
|---|---|---|---|---|
| DM MARTIN [signature]<br>Printed or typed full name and signature | | 05 | 16 | 84 |

| TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES | DATE REC'D & ACCEPTED | MO. | DAY | YR |
|---|---|---|---|---|
| Printed or typed full name and signature | | | | |

DISCREPANCY INDICATION SPACE

operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the ...cation space above. Note: TSDF must complete waste number.

| | EPA ID NUMBER | DATE RECEIVED & ACCEPTED MO. | DAY | YR |
|---|---|---|---|---|
| HANKINS [signature]<br>Printed full name and signature | CAT080010283 | 05 | 16 | 84 |

Field WC3 TSDF SENDS ~~[illegible]~~ COPY TO GENERATOR WITHIN 15 DAYS Dr # 301C 8 H

DHS-8022A 11/...

and Welfare Agency
MANAGEMENT BRANCH
5814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83562080**

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. (818) 896-2411
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD014116233 10

TRANSPORTER NO 1
MARTIN PUMPING INC
PO BOX 1128 Cyn Country
(805) 251-3737

VEH./CONTAINER NO.
45084

EPA ID NUMBER
CAD000628636

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA. 93301

VEH./CONTAINER NO.

EPA ID NUMBER
CAT080019283

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA. 93429
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAD020748125

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / COMBUSTIBLE LIQ. | NA1993 | 2000 | G | 1 | CT | 224 | P04 |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature: S/O JERRY McMILLEN — Jerry McMillen

MO. 06 DAY 08 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature: TOM MARTIN — Tom Martin
DATE REC'D & ACCEPTED: MO. 06 DAY 08 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature:
DATE REC'D & ACCEPTED: MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED: MO. DAY YR

...nd Welfare Agency
...MANAGEMENT BRANCH

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

...type with ELITE type (12 characters per inch).

STATE ID NUMBER 83562079

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER / EPA ID NUMBER |
|---|---|
| HR TEXTRON<br>10445 GLENOAKS Blvd.<br>PACOIMA, CA.<br>AREA CODE/PHONE NUMBER (818) 896-2411 | CAD041116233 10 |

| TRANSPORTER NO. 1 | VEH./CONTAINER NO. | EPA ID NUMBER |
|---|---|---|
| MARTIN PUMPING INC<br>PO BOX 1128 CANYON COUNTRY<br>(805) 251-3737 | * H2264 | CAD006126165 |

| TRANSPORTER NO. 2/ALTERNATE TSD FACILITY | VEH./CONTAINER NO | EPA ID NUMBER |
|---|---|---|
| CASMALIA DISPOSAL<br>NTU Rd.<br>CASMALIA, CA. 93429 | | CAD020748121 |

| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY | EPA ID NUMBER |
|---|---|
| ENVIRONMENTAL PROTECTION CORP.<br>3040 19TH STREET<br>BAKERSFIELD CA. 93301<br>AREA CODE/PHONE NUMBER | CAT080010128 |

TO BE FILLED IN BY GENERATOR

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / COMBUSTIBLE LIQ. | NA1993 | 1000 | G | 11 | CT | 221 | 04 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (UN1) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature: CHARLES PRICE — Charles Price — MO. — DAY — YR

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES #1
Printed or typed full name and signature: MIKE REINA — Mike Reina
DATE REC'D & ACCEPTED: MO. 06 — DAY 15 — YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED: MO. — DAY — YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator. Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
1000 - G
Evelyn Staggs — Evelyn Staggs PL 80 F* 1.1.1-1
EPA ID NUMBER: CAD981991283
DATE RECEIVED & ACCEPTED: MO. 06 — DAY 15 — YR 84

Department of Health Services

...TE MANAGEMENT BRANCH

...95814

...nt or type with ELITE type (12 characters per inch).

# UNIFORM HAZARDOUS WASTE MANIFEST

STATE ID NUMBER **83562077**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd
PACOIMA, CA. (818) 896-2411
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD04 1162330

TRANSPORTER NO 1
MARTIN PUMPING INC
PO BOX 1128 CYN COUNTRY
(805) 251-3737

VEH/CONTAINER NO: 45084
EPA ID NUMBER: CAD000628656

TRANSPORTER NO 2/ALTERNATE TSD FACILITY
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA. 93301

VEH/CONTAINER NO
EPA ID NUMBER: CAT080010283

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
CASMALIA DISPOSAL
NTU Rd
CASMALIA
AREA CODE/PHONE NUMBER

EPA ID NUMBER: CAD020748125

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQ. | NA1993 | 1500 | G | 1 | CT | 221 | 04 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

CHUCK YOUNGJOHN [signature]
Printed or typed full name and signature

MO. 06 DAY 29 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
DM MARTIN [signature]
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. 06 DAY 29 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. DAY YR

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EVELYN SKAGGS 1500-GAL
[signature] Ph 9.5 F# WC-1
Printed or typed full name and signature

EPA ID NUMBER: CAT080010283

DATE RECEIVED & ACCEPTED: MO. 06 DAY 29 YR 84

NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

EPA# 49508

83-87...

[redacted] MANAGEMENT BRANCH

[redacted] CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

Use print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83562073**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR Textron
10445 Glendale Blvd
Pacoima, CA 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
Martin Pumping Inc
PO Box 1128 [illegible]
CA
(805) 251-3727

VEH./CONTAINER NO: 42-04
EPA ID NUMBER: CAD006286636

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
Environmental Protection Corp
3040 19th Street
Bakersfield, CA 93301

V.EH./CONTAINER NO:
EPA ID NUMBER: CAT080010282

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
Casmalia Disposal
NFD Rd.
Casmalia CA
AREA CODE/PHONE NUMBER

EPA ID NUMBER: CAD020748122

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| Combustible Liquid NOS / [illegible] | NA1993 | 1900 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| Soluble cutting oil | 10 | 7 | X | |
| Standard solvent | <1 | <1 | X | |
| [illegible] | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
Use [illegible] when handling

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

* Chuck Young John
Printed or typed full name and signature — Chuck Young John

MO. 07 DAY 16 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA
Printed or typed full name and signature — Mike Reina

DATE REC'D & ACCEPTED: MO. 07 DAY 16 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. DAY YR

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED: MO. DAY YR

Printed or typed full name and signature

NO DHS-8022A 11/82

GENERATOR RETAINS

83-87967

...o CA 93614

...se print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83562071**

| GENERATOR NAME AND MAILING ADDRESS | MANIFEST DOCUMENT NUMBER / EPA ID NUMBER |
|---|---|
| HR TEXTRON<br>10445 GLENOAKS Blvd.<br>PACOIMA, CA.<br>AREA CODE/PHONE NUMBER (818) 896-2411 | CAD 041116233 0 |
| TRANSPORTER NO. 1<br>MARTIN PUMPING INC.<br>PO BOX 1118 CANYON COUNTRY<br>(805) 251-3737 | VEH./CONTAINER NO. 53906 / EPA ID NUMBER CAD006162836 |
| TRANSPORTER NO 2/ALTERNATE TSD FACILITY<br>CASMALIA DISPOSAL<br>NTU Rd.<br>CASMALIA, CA 93429 | V.EH./CONTAINER NO / EPA ID NUMBER CADD207148125 |
| TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY<br>ENVIRONMENTAL PROTECTION CORP<br>3040 19TH STREET<br>BAKERSFIELD, CA. 93301<br>AREA CODE/PHONE NUMBER | EPA ID NUMBER CAT080090223 |

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO | DISP METH |
|---|---|---|---|---|---|---|---|
| Combustible liquid N.O.S./Combustible liquid | NA1993 | 2000 | G | 1 | CT | 231 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 86 | 82 | X | |
| Soluble cutting oil | 10 | 7 | X | |
| Stoddard solvent (D001) | <1 | <1 | X | |
| 111 Trichloroethane (U226) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature: CHUCK YOUNGJOHN — MO. 08 DAY 01 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature: TOM MARTIN — DATE REC'D & ACCEPTED MO. 08 DAY 01 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. DAY YR

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER — DATE RECEIVED & ACCEPTED MO. DAY YR

Printed or typed full name and signature

TO BE FILLED IN BY GENERATOR

...O DHS-8022A 11/82

GENERATOR RETAINS

83-87967

TSDF RETAINS — MO. — DATE RECEIVED & ACCEPTED

ite of California – Health and Welfare Agency
ZARDOUS WASTE MANAGEMENT BRANCH
4-744 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ase print or type with ELITE type (12 characters per inch).

STATE ID NUMBER **83562066**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA.
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
PO BOX 1128 CANYON COUNTRY
(805) 251-3737

VEH./CONTAINER NO. 53006

EPA ID NUMBER
CAD006286316

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA. 93429

V.EH./CONTAINER NO.

EPA ID NUMBER
CAD029748122

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA.
AREA CODE/PHONE NUMBER 93301

EPA ID NUMBER
CAT080010288

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQUID | NA1993 | 1000 | G | 1 | CT | 221 | 04 |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| 1,1,1 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHILE HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

* CHUCK YOUNGJOHN
Printed or typed full name and signature

MO. 08 DAY 15 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 08 DAY 15 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

ROLAND GATEWOOD
Printed or typed full name and signature

EPA ID NUMBER CAT080010283

DATE RECEIVED & ACCEPTED MO. 08 DAY 15 YR 84

1000 Gal

Fallon NWQ Dw.8

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

PA/HQ EPA# 51111

RM NO DHS-8022A (1-82)

83-87967-H

ZARDOUS WASTE MANAGEMENT BRANCH
4-744 P Street
ramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

# GENERATOR COPY

Return to Generator

ase print or type with ELITE type (12 characters per inch)

STATE ID NUMBER 83556368

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HYDRAULIC RESEARCH TEXTRON
10445 Glenoaks Blvd.
Pacoima, CA 91331
AREA CODE/PHONE NUMBER (818)896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
CONTAINERIZED CHEMICAL DISPOSAL, INC.

VEH./CONTAINER NO.
0005C839

EPA ID NUMBER
CAT000611483

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
CASMALIA RESOURCES
Ntu Rd.
Casmalia, CA 93429
AREA CODE/PHONE NUMBER (805)937-8449

EPA ID NUMBER
CAD020748125

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO | DISP METH |
|---|---|---|---|---|---|---|---|
| See Attached List | | 00171 | G | 005 | DM | 551 | 0 |
| | | 00039 | P | 002 | DM | 551 | 0 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

CHUCK YOUNGSWAN
Printed or typed full name and signature Chuck Youngswan

MO. 08 DAY 24 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets 1

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Mark Crockly Mark Crockly
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO 08 DAY 24 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

CASMALIA RESOURCES 28601
Nancy M. Parson
Printed or typed full name and signature Nancy M Parson

EPA ID NUMBER CAD020748125

DATE RECEIVED & ACCEPTED MO. 09 DAY 20 YR 84

RM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

83-87967

Print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83556368

CONTINUATION SHEET

HR TEXTRON / PACOIMA

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

THIS IS CONTINUATION SHEET 1 OF 1

CAD041119623310

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. TYPE | WASTE CAT. NO. |
|---|---|---|---|---|---|
| (LAB PACK) | | | | | |
| WASTE NITRIC ACID, 40% OR LESS | NA1760 | 00005 | G | 001DM | 551 |
| CORROSIVE MATERIAL | | | | | |
| 5gal NITRIC ACID | | | | | |
| (LAB PACK) | | | | | |
| WASTE FLAMMABLE SOLID NOS, | UN1325 | 00037 | P | 001DM | 557 |
| FLAMMABLE SOLID | | | | | |
| RANEY NICKEL 37 lbs. | | | | | |
| (LAB PACK) | | | | | |
| WASTE PHENOL POISON B | NA2821 | 00001 | G | 001DM | 551 |
| (SOLIDIFIED) | | | | | |
| WASTE CHROMIC ACID MIXTURE, SOLID | NA1463 | 00165 | G | 003DM | 551 |
| OXIDIZER | | | | | |
| (LAB PACK) | | | | | |
| WASTE CHROMIC ACID MIXTURE DRY | NA1463 | 00012 | P | 001DM | 551 |
| OXIDIZER | | | | | |
| 12 lbs. | | | | | |

DHS 8022 (12/82) (b)

ate of California—Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4-744 P Street
icramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ease print or type with ELITE type (12 characters per inch)

STATE ID NUMBER **83562061**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
PO Box 1128 CANYON COUNTRY
(805) 251-3737

VEH./CONTAINER NO. 53006
EPA ID NUMBER CAD000628613

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA. 93429

VEH./CONTAINER NO.
EPA ID NUMBER CAD020748112

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA.
AREA CODE/PHONE NUMBER 93301

EPA ID NUMBER CAT080010282

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO | DISP. MET |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQUID | NA1993 | 1900 | G | 1 | CT | 221 | |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD [illegible] (Dual) | <1 | <1 | X | |
| [illegible] (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
S/O SGT. JERRY MCMILLEN
Printed or typed full name and signature S/O Sgt Jerry McMillen

MO 08 DAY 23 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
TOM MARTIN
Printed or typed full name and signature Tom Martin

DATE REC'D & ACCEPTED MO. 08 DAY 23 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note. TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR

Printed or typed full name and signature

Department of Health Services

# HAZARDOUS WASTE MANIFEST

STATE ID NUMBER 83562050

1. GENERATOR'S NAME AND MAILING ADDRESS
TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

2. TRANSPORTER NO 1
MARTIN INDUSTRIAL PUMPING
PO BOX 1128 CANYON COUNTRY
(805) 251-3737
VEH./CONTAINER NO. 5304
EPA ID NUMBER CAD000628636

3. TRANSPORTER NO 2/ALTERNATE TSD FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA. 93429
V.EH./CONTAINER NO.
EPA ID NUMBER CAD020748125

4. TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA 93301
AREA CODE/PHONE NUMBER
EPA ID NUMBER CAT080019285

| 5. PROPER U.S. D.O.T SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / COMBUSTIBLE LIQ. | NA1993 | 2200 | G | 1 | CT | 221 | 04 |
| | | | | | | | |

| 6. COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (D001) | <1 | <1 | X | |
| 111TRICHLOROETHANE (UN1593) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA
CHUCK YOUNGJOHN
Printed or typed full name and signature
MO 09 DAY 28 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES #1
MIKE REINA
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO 09 DAY 28 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste numbers See instructions 2200-G
EVELYN STAGGS
Printed or typed full name and signature Ph 9° F#WE-3
EPA ID NUMBER CAT080010283
DATE RECEIVED & ACCEPTED MO 09 DAY 28 YR 84

NO DHS-8022A 11/82 TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

...AGEMENT BRANCH

UNIFORM HAZARDOUS WASTE MANIFEST 1-1-77

...type with ELITE type (12 characters per inch).

STATE ID NUMBER 83562059

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLEN OAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
OIL AND SOLVENT PROCESS COMPANY
1704 WEST FIRST STREET
AZUSA, CA. 91702 (818) 334-5117

VEH./CONTAINER NO.: E7476 00093147
EPA ID NUMBER: CAD008302903

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
VEH./CONTAINER NO.
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OIL AND SOLVENT PROCESS COMPANY
1704 WEST FIRST STREET
AZUSA, CA.
AREA CODE/PHONE NUMBER 818-334-5117
EPA ID NUMBER: CAD008302903

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO | DISP METH |
|---|---|---|---|---|---|---|---|
| WASTE FLAMMABLE LIQUID N.O.S. / FLAMMABLE LIQ. | UN1993 | 01000 | G | 1 | CT | 2113 | 01 |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| STODDARD SOLVENT (D001) | 80 | 75 | X | |
| oil | 20 | 10 | X | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVE AND GOGGLES WHEN HANDLING MATERIAL

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

CHUCK YOUNGJOHN
Printed or typed full name and signature Chuck Youngjohn

MO. 09 DAY 10 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
ED DUCKETT
Printed or typed full name and signature Ed Duckett
DATE REC'D & ACCEPTED MO 09 DAY 10 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

DISCREPANCY INDICATION SPACE
N/A

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
Betty Peckham/Peckham
Printed or typed full name and signature
EPA ID NUMBER CAD008302903
DATE RECEIVED & ACCEPTED MO. 9 DAY 10 YR 84

TO BE FILLED IN BY GENERATOR

BY TRANSPORTER

IN BY TSDF

GENERATOR RETAINS

FORM NO DHS-8022A 11/82

...AGEMENT BRANCH

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

Type with ELITE type (12 characters per inch)

STATE ID NUMBER 83562058

GENERATOR NAME AND MAILING ADDRESS
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA 91331 (818) 896-2411
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO 1
MARTIN INDUSTRIAL PUMPING
PO BOX 1128 CANYON COUNTRY
(805) 251-3737

VEH/CONTAINER NO: 00053995
EPA ID NUMBER: CAD000062863

TRANSPORTER NO 2/ALTERNATE TSD FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA 93429

V.EH./CONTAINER NO.
EPA ID NUMBER: CAD020748122

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA 93301
AREA CODE/PHONE NUMBER

EPA ID NUMBER: CAT080010928

| PROPER U.S. D.O.T SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DIS-MET |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S./COMBUSTIBLE LIQUID | UN1993 | 1900 | G | 1 | CT | 221 | 01 |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT (DOOL) | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN2831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

CHUCK YOUNGJOHN
Printed or typed full name and signature [signature]

MO. 09 DAY 11 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
GEORGE JIRKA [signature]
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO 09 DAY 11 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO. DAY YR.

TO BE FILLED IN BY TRANSPORTER

DISCREPANCY INDICATION SPACE

TO BE FILLED IN BY TSDF

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

ROLAND GATEWOOD
[signature] 1900 Gal Site ad
Printed or typed full name and signature

EPA ID NUMBER: CAT080010283

DATE RECEIVED & ACCEPTED: MO. 09 DAY 13 YR 84

FORM NO DHS-8022A 11/82 TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS FAX# 52290 83-87967

BRANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

Print or type (12 characters per inch)

STATE ID NUMBER 83567890

GENERATOR NAME AND MAILING ADDRESS
R TEXTRON
10445 GLENOAK Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CA D 0 4 1 1 1 6 2 3 3 K

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
PO BOX 1128 CANYON COUNTRY
CANYON COUNTRY, CA. (805) 251-3757

VEH./CONTAINER NO. 0 0 5 3 0 9 6

EPA ID NUMBER
CA D 0 0 0 0 6 2 5 6 2

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA. 93429

V.EH./CONTAINER NO.

EPA ID NUMBER
CA D 0 2 0 7 4 8 1 1 2

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA.
AREA CODE/PHONE NUMBER 93301

EPA ID NUMBER
CA T 0 8 0 0 1 0 2 8 4

TO BE FILLED IN BY GENERATOR

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / COMBUSTIBLE LIQ. | NAW 1993 | 2000 | G | 001 | CT | 221 | 04 |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| H2O | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 07 | X | |
| 111TRICHLOROETHANE (UN2831) | <1 | <1 | X | |
| STODDARD SOLVENT (0001) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
CHUCK YOUNGBLOOD
Printed or typed full name and signature

MO. 10 DAY 25 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 10 DAY 25 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
CHOLANDA TEWOOD
Printed or typed full name and signature

EPA ID NUMBER CAT080010283

DATE RECEIVED & ACCEPTED MO. 10 DAY 25 YR 84

FORM NO. DHS-8022A (1/82) Field WE2 TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS OF RECEIPT 83-87967H

TYPE OR PRINT (12 characters per inch)

STATE ID NUMBER 83567888

GENERATOR NAME AND MAILING ADDRESS
AR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041116233

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
PO BOX 1128 CANYON COUNTRY
CANYON COUNTRY, CA.
(805) 251-3737

VEH./CONTAINER NO
530014

EPA ID NUMBER
CAD000628636

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA. 93429

VEH./CONTAINER NO

EPA ID NUMBER
CAD029748122

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA.
AREA CODE/PHONE NUMBER 93301

EPA ID NUMBER
CAT080010283

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / COMBUSTIBLE LIQ. | NA1993 | 2000 | G | 001 | CT | 221 | 04 |
| | | | | | | | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT | <1 | <1 | X | |
| 111 TRICHLOROETHANE (UN1831) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.
CHUCK HONGJOHN Chuck Hongjohn
Printed or typed full name and signature
MO. 10 DAY 15 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE RENA Mike Rena
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO 10 DAY 15 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
ROBERT L. EWELL 2000 Gal
Robert L. Ewell Site Agent
Printed or typed full name and signature
EPA ID NUMBER CAT080010283
DATE RECEIVED & ACCEPTED MO 10 DAY 16 YR 84

8022A 11/82 Field WE 2 TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS 8/80.0 EDF 540 5827 H

...ENT BRANCH

# UNIFORM HAZARDOUS WASTE MANIFEST

...TE type (12 characters per inch)

STATE ID NUMBER **83567893**

...R NAME AND MAILING ADDRESS
TEXTRON
0445 GLENOAKS Blvd.
PACOIMA, CA. 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD041162830

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
PO BOX 1128, CANYON COUNTRY CA
(805) 251-3737

VEH./CONTAINER NO.: 5300

EPA ID NUMBER: CAD006286536

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA. 93429

V.EH./CONTAINER NO.:

EPA ID NUMBER: CAD020748122

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA.
AREA CODE/PHONE NUMBER 93301

EPA ID NUMBER: CAT080010200

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID N.O.S. / [illegible] | NA1993 | 0000 | G | 001 | CT | 221 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT | <1 | <1 | X | |
| 111 TRICHLOROETHANE (CONTAINER) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

CHUCK YOUNGJOHN
Printed or typed full name and signature [signature]

MO. 11 DAY 08 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY GENERATOR

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINA
Printed or typed full name and signature [signature]

DATE REC'D & ACCEPTED: MO 11 DAY 08 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED: MO DAY YR

TO BE FILLED IN BY TRANSPORTER

DISCREPANCY INDICATION SPACE

TO BE FILLED IN BY TSDF

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED: MO. DAY YR

Printed or typed full name and signature

NO DHS-8022A 11/82

GENERATOR RETAINS

83-87967

...TE type (12 characters per inch) WO197 STATE ID NUMBER 83567897

...OR NAME AND MAILING ADDRESS
...L TEXTRON
10445 GLENDALE Blvd.
PACOIMA, CA 91331
AREA CODE/PHONE NUMBER (818) 896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041162330

TRANSPORTER NO. 1
MARTIN INDUSTRIAL PUMPING
PO Box 11 LK
CANYON COUNTRY CA.
(805) 251-3737

VEH/CONTAINER NO. 53094
EPA ID NUMBER CAD000628655

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
CASMALIA DISPOSAL
NTU Rd.
CASMALIA, CA. 93429

VEH/CONTAINER NO
EPA ID NUMBER CAD020748125

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA.
AREA CODE/PHONE NUMBER 93301

EPA ID NUMBER CAT080010285

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. | CONTAINER TYPE | WASTE CAT NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| COMBUSTIBLE LIQUID NO.S./COMBUSTIBLE LIQ | NA1993 | 1500 | G | 001 | CT | 221 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| $H_2O$ | 86 | 82 | X | |
| SOLUBLE CUTTING OIL | 10 | 7 | X | |
| STODDARD SOLVENT OIL | <1 | <1 | X | |
| 1,1 TRICHLOROETHANE (CA 2271) | <1 | <1 | X | |

SPECIAL HANDLING INSTRUCTIONS
USE GLOVES AND GOGGLES WHEN HANDLING

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA
CHUCK YOUNGSTAN
Printed or typed full name and signature [signature]
MO. 11 DAY 21 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
MIKE REINP
Printed or typed full name and signature [signature]
DATE REC'D & ACCEPTED MO 11 DAY 21 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.
EPA ID NUMBER
DATE RECEIVED & ACCEPTED MO. DAY YR
Printed or typed full name and signature

TO BE FILLED IN BY GENERATOR
BY TRANSPORTER
IN BY TSDF

NO DHS-8022A 11/82 GENERATOR RETAINS 83-87967

GENERATOR ... 83-87967 4

A. of California – Health and Welfare Agency
AZARDOUS WASTE MANAGEMENT BRANCH
4-744 P Street
cramento, CA 95814

Department of Health Services

# UNIFORM HAZARDOUS WASTE MANIFEST

ase print or type with ELITE type (12 characters per inch)

STATE ID NUMBER **83556577**

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
HYDRAULIC RESEARCH TEXTRON
12137 Montague
Pacoima, CA
AREA CODE/PHONE NUMBER (213)896-2411

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD041152330

TRANSPORTER NO 1
CONTAINERIZED CHEMICAL DISPOSAL, Inc.
VEH./CONTAINER NO. 52839
EPA ID NUMBER CAT000611[illegible]

TRANSPORTER NO 2/ALTERNATE TSD FACILITY
VEH./CONTAINER NO
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
CASMALIA RESOURCES
Ntu Rd.
Casmalia, CA 93429
AREA CODE/PHONE NUMBER (805)937-8449
EPA ID NUMBER CAD020748[illegible]

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO | CONTAINER TYPE | WASTE CAT. NO. | DISP METH |
|---|---|---|---|---|---|---|---|
| See Attached List | | | G | | DM | 551 | |
| | | | G | | DF | 112 | |

| COMPONENTS | CONC. RANGE UPPER | CONC. RANGE LOWER | UNITS % | UNITS PPM |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

[illegible] Yamojima [signature]
Printed or typed full name and signature

MO. 12 DAY 17 YR 84

☒ Check if continuation sheet is used Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Mark Croddy Mark Croddy
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. 12 DAY 17 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

EPA ID NUMBER

DATE RECEIVED & ACCEPTED MO. DAY YR

Printed or typed full name and signature

M NO DHS-8022A 11/82

GENERATOR RETAINS

83-87967

Print or type with ELITE type (12 characters per inch).

STATE ID NUMBER [illegible]

CONTINUATION SHEET

HR TEXTRON - PACOIMA

THIS IS CONTINUATION SHEET 1 OF 1

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CAN[illegible]

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. TYPE | WASTE CAT. NO. |
|---|---|---|---|---|---|
| (LAB PACK) | | | | | |
| WASTE FLAMMABLE LIQUID NOS | UN1993 | 00002 | G | 001DM | 135 |
| FLAMMABLE LIQUID | | | | | |
| 2x1gal ETHYLENE GLYCOL | | | | | |
| (HEXANE 8% | | | | | |
| ~~[illegible]~~ | | | | | |
| (LAB PACK) | | | | | |
| WASTE PAINT NOS, COMBUSTIBLE LIQUID | UN1263 | 00002 | G | 001DM | 461 |
| 2 gal ZINC CHROMATE PRIMER | | | | | |
| (LAB PACK) | | | | | |
| WASTE CEMENT, LIQUID, NOS | NA1133 | 00003 | G | 001DM | 121 |
| COMBUSTIBLE LIQUID | | | | | |
| (SOLIDIFIED) | | | | | |
| WASTE CHROMIC ACID SOLUTION | UN1755 | 00220 | G | 004DF | 112 |
| CORROSIVE MATERIAL | | | | | |
| CHROMIC ACID | | | | | |
| WATER | | | | | |
| VERMICULITE | | | | | |
| (LAB PACK) | | | | | |
| WASTE PERCHLORIC ACID, OXIDIZER | UN1873 | 00001 | G | 001DM | 551 |
| (LAB PACK) | | | | | |
| WASTE HYDROCHLORIC ACID | UN1789 | [illegible] | G | 001DM | 551 |
| CORROSIVE MATERIAL | | | | | |
| MURIATIC ACID | | | | | |

DHS 8022 (12/82) (b)

SUMMARY BY WASTE CATOGORY/QUANTITY

STATE ID NUMBER [illegible]

Generator

HC TACOMA

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

[illegible]

| TOTAL QUANTITY | UNIT WT/VOL | WASTE CAT. NO. |
|---|---|---|
| 00003 | G | 181 |
| | | |
| 00002 | G | 161 |
| | | |
| 00002 | G | 135 |

...lth and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

W0196

...type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD041162330 | 00301 | | |

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366200
B. State Generator's ID:

5. Transporter 1 Company Name: MAIL-I INDUSTRIAL PUMPING
6. US EPA ID Number: CAD006286536
C. State Transporter's ID: 53004
D. Transporter's Phone: (805) 251-7225

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
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA 93301
10. US EPA ID Number: KAT080010283
G. State Facility's ID: CAT080010283
H. Facility's Phone: (805) 768-4816

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. COMBUSTIBLE LIQUID N.O.S. COMBUSTIBLE LIQUID, NA1993 | 001 | TT | 1600 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

[redacted] 15. Handling Codes for Wastes Listed Above: 04

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGMAN | | 11 21 84 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| TOM MARTIN | Tom Martin | 11 21 84 |

18. Transporter 2 Acknowledgement or 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 | Signature | Date (Month Day Year) |
|---|---|---|
| SUSAN E POTTER | Susan E Potter | 11 21 84 |

H

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 80541

2166-04749

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. CAD041116330 — 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
[illegible]

4. Generator's Phone (415) 596-2411

A. State Manifest Document Number: 84446488

B. State Generator's ID: CAD041116330

5. Transporter 1 Company Name: [illegible]

6. US EPA ID Number: [illegible]

C. State Transporter's ID: 50333

D. Transporter's Phone: 714-[illegible]

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: Environmental Waste Management Corp. 2540 North Tenth Street, Perris, CA. 92370

10. US EPA ID Number: CAD030542677

G. State Facility's ID: CAD030542677

H. Facility's Phone: 606-3998644

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. NA 1993 Hazardous waste, solid, n.o.s. - Acetone | 1 | DT | 12 | Y | 611 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
1. Acetone 98 %
2. Soluble oil (Cutting) 1 %
3. Stoddard Solvent <1 %

K. Handling Codes for Wastes Listed Above

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 | Signature | Date (Month Day Year) |
|---|---|---|
| [illegible] | [illegible] | 02 1 [illegible] |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Michael W Twaddle | Michael W Twaddle | 02 01 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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

DHS 8022 A (7/84)

...n and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...pe. (Form designed for use on elite (12-pitch) typewriter.) Profile # 50867

# ...NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 Manifest Document No. 96707
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
H K Textron
10445 Glenoaks Blvd.
Pacoima, CA 91331
010-896-2411

4. Generator's Phone ( )

A. State Manifest Document Number: 84446409

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: American Environmental
6. US EPA ID Number: CA[illegible]
C. State Transporter's ID: 50333
D. Transporter's Phone: 916-785666[illegible]

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
Environmental Protection Corp.
3040 11th Street
Bakersfield, CA 93301
10. US EPA ID Number: CAD030384267 ~~[illegible]~~
G. State Facility's ID: CAD030384267
H. Facility's Phone: (805) 399-8644 ~~[illegible]~~

| 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. NA 9189 Hazardous waste Solid NOS - orm - E | 1 | DT | 18 | Y | 611 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
A,1 Soil 98 %
A,2 Soluble cutting oil 1 %
A,3 Stoddard Solvent <1 %

K. Handling Codes for Wastes Listed Above: 03

15. Special Handling Instructions and Additional Information
Gloves, boots

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: Chuck [illegible]
Signature: Chuck [illegible]
Date: Month Day Year: 01 30 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Michael W Tweddle
Signature: Michael W Tweddle
Date: Month Day Year: 01 30 84

18. Transporter 2 Acknowledgement or 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: DAVID HANKINS
Signature: David Hankins
Date: Month Day Year: 01 30 85

GENERATOR

TRANSPORTER

FACILITY

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.) Print 1 # 00176

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 | 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: HR Textron, 10445 Glenoaks Blvd, Pacoima, CA 91331
4. Generator's Phone ( ) 916-2411

A. State Manifest Document Number: 84366190
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: American Environmental
6. US EPA ID Number: CAD067825264
C. State Transporter's ID: 50160
D. Transporter's Phone: 916-985-6666

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: Environmental Protection Corp., 3040 19th Street, Bakersfield, CA 93301
10. US EPA ID Number: CAT080010283
G. State Facility's ID: CAT080010283
H. Facility's Phone: (805) 768-4806

| 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. NA 9189 Orange | 1 | TT | 02300 | G | 241 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
A.1 Water - 90%
A.2 Soil - 8%
A.3 Soluble oil - 2%

K. Handling Codes for Wastes Listed Above: 04

15. Special Handling Instructions and Additional Information
Gl[illegible]

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: [illegible] | Signature: [signature] | Date: Month 01 Day 2 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: TOM MAGNESS | Signature: Tom Magness | Date: Month 1 Day 30 Year 85

18. Transporter 2 Acknowledgement or 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: [illegible] Skaggs | Signature: [signature] | Date: Month 01 Day 30 Year 85

GENERATOR

TRANSPORTER

FACILITY

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. [illegible] | 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 [illegible]

4. Generator's Phone ( [illegible] )

A. State Manifest Document Number: 84446411

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name [illegible]

6. US EPA ID Number [illegible]

C. State Transporter's ID: 50333

D. Transporter's Phone: [illegible]

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 [illegible]

10. US EPA ID Number [illegible]

G. State Facility's ID: CAD030364267

H. Facility's Phone: 606 399-8644

| 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. [illegible] | 1 | DT | 12 | Y | 611 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above

A1 Soil 98 %
A2 Soluble cutting oil 1 %
A3 Studdard solvent <1 %

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

[illegible]

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 [illegible] | Signature [illegible] | Date Month Day Year [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [illegible] | Signature [illegible] | Date Month Day Year [illegible]

18. Transporter 2 Acknowledgement or 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 | Signature | Date Month Day Year

GENERATOR

TRANSPORTER

FACILITY

ornia—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. | 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
HR TEXTRON
10445 [illegible] Blvd.
[illegible] CA 91331
4. Generator's Phone ( ) 896-3411

A. State Manifest Document Number: 84366192
B. State Generator's ID:
C. State Transporter's ID: 53006
D. Transporter's Phone: (805) 251-1727
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAT080010283
H. Facility's Phone: (805) 768-4806

5. Transporter 1 Company Name: M & T INDUSTRIAL [illegible] | 6. US EPA ID Number: CAD [illegible]
7. Transporter 2 Company Name: | 8. US EPA ID Number:
9. Designated Facility Name and Site Address: ENVIRONMENTAL [illegible] CORP
3040 19TH STREET
BAKERSFIELD, CA 93301
10. US EPA ID Number: CAT080010283

| 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. COMBUSTIBLE LIQUID N.O.S. COMBUSTIBLE LIQUID, NA 1993 | 001 | TT | 1700 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
H2O - 86% - 82%
SUDSEN CUTTING OIL - 10% - 7%
STODDARD SOLVENT - <1% - <1%

K. Handling Codes for Wastes Listed Above
04

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNG-JOHN | | 01 28 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MIKE KINA | | 1 28 85 |

18. Transporter 2 Acknowledgement or 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 | Signature | Date (Month Day Year) |
|---|---|---|
| [illegible] | | 2/1/85 |

01 1700-G

DHS 8022 A (7/84)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

W0110

Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Use print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C.A.D.0.4.1.1.6.2.3.3.9 — 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: AR TEX [illegible] 1445 GL[illegible] [illegible] PA[illegible], CA [illegible]

4. Generator's Phone ( [illegible] ) [illegible]

A. State Manifest Document Number: 84366195

B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: C.A.D.0.0.0.6.2.8.6.3.6

C. State Transporter's ID: 56006

D. Transporter's Phone: (805) 251-[illegible]

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: ENVIRONMENTAL PROTECTION CORP. 3040 19TH STREET BAKERSFIELD, CA 93301

10. US EPA ID Number: C.A.T.0.8.0.0.1.0.2.8.3

G. State Facility's ID: CAT080010283

H. Facility's Phone: (805) 768-4806

| 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. COMBUSTIBLE LIQUID N.O.S. COMBUSTIBLE LIQUID, NA 1993 | 001 | TT | 2000 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: $H_2O$ - 86% - 82%; SOLUBLE CUTTING OIL - 10% - 7%; STODDARD SOLVENT - <1% - <1%

K. Handling Codes for Wastes Listed Above: 04

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNG JOHN | Chuck [illegible] | 01 15 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| TOM MARTIN | Tom Martin | 01 15 85 |

18. Transporter 2 Acknowledgement or 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 | Signature | Date (Month Day Year) |
|---|---|---|
| K E Haines | K E Haines | 1 16 85 |

GENERATOR — TRANSPORTER — FACILITY

YH. 9.3

04 A

DHS 8022 A (7/84)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

64 89541

W0196

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.: CAD041160326 — Manifest Document No.: [illegible]

2. Page 1 of 1

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

3. Generator's Name and Mailing Address: HK Textron, 1445 Glenn [illegible], [illegible]

4. Generator's Phone ( [illegible] ) [illegible]

A. State Manifest Document Number: 84366198

B. State Generator's ID:

5. Transporter 1 Company Name: Martin Industrial [illegible]

6. US EPA ID Number: CAD000628626

C. State Transporter's ID: 53004

D. Transporter's Phone: (805) 251-3727

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: Environmental [illegible], 2340 [illegible], [illegible]

10. US EPA ID Number: CAT [illegible]

G. State Facility's ID: CAD000102283

H. Facility's Phone: (805) 768-4006

| 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. Combustible Liquid N.O.S. [illegible] | [illegible] | TT | [illegible] | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: $H_2O$ - 86% - 82%; Soluble cutting oil - 10% - 7%; Stoddard solvent - 4% - 4%

K. Handling Codes for Wastes Listed Above: 04

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: Chuck Youngjohn — Signature: [signature] — Date (Month Day Year): 01 04 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] — Signature: [signature] — Date (Month Day Year): [illegible]

18. Transporter 2 Acknowledgement or 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: [illegible] Hames — Signature: [signature] — Date (Month Day Year): [illegible] 25

GENERATOR

TRANSPORTER

FACILITY

...ornia—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. | 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

4. Generator's Phone ( )

A. State Manifest Document Number: 84366180

B. State Generator's ID

5. Transporter 1 Company Name | 6. US EPA ID Number | C. State Transporter's ID | D. Transporter's Phone

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 | 10. US EPA ID Number | G. State Facility's ID | H. Facility's Phone

| 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. | | | | | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

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 | Signature | Date (Month Day Year)

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

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 | Signature | Date (Month Day Year)

California—Health and Welfare Agency

2135

Department of Health Services
Toxic Substances Control Division
Sacramento, California

WJ 1 15

Print or type. (Form designed for use on elite (12-pitch) ... ter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C.A.D.0.4.1.1.6.2.3.3.0
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
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366167
B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: C.A.D.0.0.0.6.2.8.6.3.6
C. State Transporter's ID: 5300
D. Transporter's Phone: 905 251-2737

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
ENVIRONMENTAL PROTECTION CORP.
3040 19TH STREET
BAKERSFIELD, CA. 93301

10. US EPA ID Number: C.A.T.0.8.0.0.1.0.2.8.3
G. State Facility's ID: CAT080010283
H. Facility's Phone: (805) 768-4806

| 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. COMBUSTIBLE LIQUID N.O.S. COMBUSTIBLE LIQUID, NA1993 | 0.01 | T.T | <1.00 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
$H_2O$ - 86% - 82%
SOLUBLE CUTTING oil - 10% - 7%
STODDARD SOLVENT - <1% - <1%

K. Handling Codes for Wastes Listed Above: 04

15. Special Handling Instructions and Additional Information
USE GLOVES AND [illegible]

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 | Signature | Date Month Day Year |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

18. Transporter 2 Acknowledgement or 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 | Signature | Date Month Day Year |
|---|---|---|
| Susan E Porter | Susan E Porter | 04 05 85 |

GENERATOR

TRANSPORTER

FACILITY

8022-A (7/84)
A 8700-22)

H76 1116

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

W0196

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...use on elite (12-pitch) typewriter.)

# ...ZARDOUS ...STE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
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
HR TEXTRON
10445 GLENOAKS Blvd
PACOIMA, CA 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366178
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL [illegible]
6. US EPA ID Number: CAD[illegible]6236
C. State Transporter's ID: 53004
D. Transporter's Phone: [illegible]737

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
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
BAKERSFIELD, CA 93301

10. US EPA ID Number: CAT[illegible]
G. State Facility's ID: CAT080010283
H. Facility's Phone: (805) 768-4806

| 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 NOS. [illegible] | 1 | TT | 4500 | G | 135 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
H2O - 99% - 98%
STODDARD SOLVENT - <1% - <1%

K. Handling Codes for Wastes Listed Above
04

15. Special Handling Instructions and Additional Information
[illegible]

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: CHUCK [illegible]
Signature: [illegible]
Date: Month 03 Day 01 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [illegible]
Date: Month 03 Day 01 Year 85

18. Transporter 2 Acknowledgement or 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: [illegible]
Signature: [illegible]
Date: Month 03 Day 01 Year 85

GENERATOR

TRANSPORTER

FACILITY

WO197

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

2232

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] | 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
HR TEXTRON
1944 [illegible] BLVD
[illegible] CA 91331

4. Generator's Phone ( [illegible] ) [illegible]

A. State Manifest Document Number: 84366174

B. State Generator's ID

5. Transporter 1 Company Name: [illegible] INDUSTRIAL [illegible]

6. US EPA ID Number: [illegible]

C. State Transporter's ID: 53005

D. Transporter's Phone: [illegible]

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
ENVIRONMENTAL PROTECTION CORP
3040 19TH STREET
[illegible], CA 92[illegible]

10. US EPA ID Number: CAT080010283

G. State Facility's ID: CAT080010283

H. Facility's Phone: (805) 768-4406

| 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. COMBUSTIBLE LIQUID N.O.S. COMBUSTIBLE LIQUID, NA1993 | 001 | TT | [illegible] | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
$H_2O$ - 86% - 82%
SOLUBLE CUTTING OIL - 10% - 7%
STODDARD SOLVENT - <1% - <1%

K. Handling Codes for Wastes Listed Above
OU

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 | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [illegible] | 03 | 12 | [illegible] |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| TOM EATON | [illegible] | 03 | 12 | 85 |

18. Transporter 2 Acknowledgement or 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 | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Susan E Patzer | Susan E Patzer | 03 | 12 | 85 |

GENERATOR

TRANSPORTER

FACILITY

...h and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...type. (Form designed for use on elite (12-pitch) typewriter)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | 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
H.E. TEXTRON
1944 ELISE AVE
FULLERTON, CA

4. Generator's Phone ( 818 ) 891-2411

A. State Manifest Document Number: 84366165
B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL
6. US EPA ID Number: CAD006206216
C. State Transporter's ID: 55782
D. Transporter's Phone: (562) 921-3737

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
[illegible]
3040 11TH STREET
BALDWIN PARK, CA 91706
10. US EPA ID Number: CAT080010283
G. State Facility's ID: CAT080010283
H. Facility's Phone: (213) 768-4805

| 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. [illegible] COMBUSTIBLE LIQUID, N.O.S. | 001 | TT | 2000 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
H2O - 86% - 82%
SOLUBLE CUTTING OIL - 10% - 7%
STODDARD SOLVENT - 2% - <1%

K. Handling Codes for Wastes Listed Above
04

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 | Signature | Date (Month Day Year) |
|---|---|---|
| FRED A. PAINTER | | 04 11 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| TOM MARTIN | Tom Martin | 04 19 85 |

18. Transporter 2 Acknowledgement or 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 | Signature | Date (Month Day Year) |
|---|---|---|
| EVELYN KRAUS | Evelyn Kraus | 04 19 85 |

GENERATOR
TRANSPORTER
FACILITY

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041623330 — 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
HYDRAULIC RESEARCH TEXTRON
12137 Montague Pacoima, CA 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84492538
B. State Generator's ID: CAD041162330
C. State Transporter's ID: [redacted]52968
D. Transporter's Phone: (818)969-7851
E. State Transporter's ID:
F. Transporter's Phone: (818)344-4484
G. State Facility's ID: CAD030384267
H. Facility's Phone: (805)399-8644

5. Transporter 1 Company Name: Containerized Chemical Disposal Inc
6. US EPA ID Number: CAT000611483
7. Transporter 2 Company Name: Inglett Equipment
8. US EPA ID Number: CAD051469484
9. Designated Facility Name and Site Address
EPC-EASTSIDE
Round Mountain Rd.
Bakersfield, CA 93301
10. US EPA ID Number: CAD030384267

| 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 Hazardous waste solid nos, ORM-E NA9189 | 001 | DT | 00120 | Y | 611 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[redacted] Solvent cutting oil 1%

K. Handling Codes for Wastes Listed Above
03

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.

GENERATOR

Printed/Typed Name: CHUCK YOUNGJOHN — Signature: [signature] — Date: Month Day Year 10 5 18 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Harold Hinson — Signature: [signature] — Date: Month Day Year 10 5 18 85

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Mark Crosby — Signature: [signature] — Date: Month Day Year 10 5 18 85

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: [illegible] — Signature: [signature] — Date: Month Day Year 10 5 18 85

Department of Health Services
Toxic Substances Control Division
Sacramento, California

print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
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
HYDRAULIC RESEARCH TEXTRON
12137 Montague Pacoima, CA 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84492536
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: Containerized Chemical Disposal Inc
6. US EPA ID Number: CAT000611483
C. State Transporter's ID: 52963
D. Transporter's Phone: (818)969-7851

7. Transporter 2 Company Name: Inglett Equipment
8. US EPA ID Number: CAD051469484
E. State Transporter's ID:
F. Transporter's Phone: (818)344-4484

9. Designated Facility Name and Site Address
EPC-EASTSIDE
Round mountain Rd.
Bakersfield, CA 93301
10. US EPA ID Number: CAD030384267
G. State Facility's ID: CAD030384267
H. Facility's Phone: (805)399-8644

| 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 Hazardous Waste solid nos, ORM-E NA9189 | 001 | DT | 00020 | Y | 611 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible] Kell 99%, Soluble cutting oil 1%

K. Handling Codes for Wastes Listed Above
03

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: CHUCK [illegible]
Signature: [signature]
Date: Month Day Year: 05 07 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Mark Croddy
Signature: Mark Croddy
Date: Month Day Year: 05 07 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [illegible]
Date: Month Day Year: 5 2 85

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: VAL Fitzsimmons
Signature: [signature]
Date: Month Day Year: 05 07 85

GENERATOR
TRANSPORTER
FACILITY

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.: C A D 0 4 1 1 6 2 3 3 0 | 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
HYDRAULIC RESEARCH TEXTRON
12137 Montague Pacoima, CA 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84492535
B. State Generator's ID: C A D 0 4 1 1 6 2 3 3 0 (5296)

5. Transporter 1 Company Name: Containerized Chemical Disposal Inc
6. US EPA ID Number: C A T 0 0 0 6 1 1 4 8 3
C. State Transporter's ID: [illegible]
D. Transporter's Phone: (818)969-7851

7. Transporter 2 Company Name: Inglett Equipment
8. US EPA ID Number: C A D 0 5 1 4 6 9 4 8 4
E. State Transporter's ID:
F. Transporter's Phone: (818)344-4484

9. Designated Facility Name and Site Address
EPE-EASTSIDE
Round Mountain Rd.
Bakersfield, CA 93301
10. US EPA ID Number: C A D 0 3 0 3 8 4 2 6 7
G. State Facility's ID: C A D 0 3 0 3 8 4 2 6 7
H. Facility's Phone: (805)399-8644

| 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 Hazardous waste solid nos, ORM-E NA9189 | 0 0 1 | D.T | 20 YDS. | Y | 6 1 1 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible], Soluble cutting oil 1%

K. Handling Codes for Wastes Listed Above
03

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGJOHN | Chuck Youngjohn | 05 07 85 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MARK Croddy | Mark Croddy | 05 07 85 |

18. Transporter 2 Acknowledgement or Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| JACK D. M. CONNELL | J. D. McConnell | 05 07 85 |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| VAL FITZSIMMONS | Val Fitzsimmons | 05 16 85 |

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.: CAD041162330 | 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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. (91331)

4. Generator's Phone ( 818 ) 896-9411

A. State Manifest Document Number: 8436156
B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 53004
D. Transporter's Phone: (805) 251-3737

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
CASMALIA RESOURCES
Ntu. Rd.
Casmalia, Ca 93429

10. US EPA ID Number: CAD020748125
G. State Facility's ID:
H. Facility's Phone: (805) 937-8449

| 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. COMBUSTIBLE LIQUID N.O.S. Combustible liquid, NA1993 | 001 | TT | 2100 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
SOLUBLE CUTTING -10%-7%
STODDARD SOLVENT- 2%- 1%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGJOHN | | 05 15 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

18. Transporter 2 Acknowledgement or 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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

GENERATOR
TRANSPORTER
FACILITY

Department of Health Services
Toxic Substances Control Division
Sacramento, California

(Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 | 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
HYDRAULIC RESEARCH TEXTRON
12137 Montague Pacoima, CA Dept 771

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84492622
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: Containerized Chemical Disposal Inc
6. US EPA ID Number: CAT000611483
C. State Transporter's ID:
D. Transporter's Phone: (818)969-7851

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
CASMALIA RESROUCES
Ntu Rd.
Casmalia, CA 93429

10. US EPA ID Number: CAD020748125
G. State Facility's ID: CAD020748125
H. Facility's Phone: (805)937-8449

| 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 Hazardous waste solid nos, ORM-E NA9189 | 002 | DM | 00100 | P | 551 |
| b. Waste Chromic acid solution, Corrosive liquid UN1755 (Absorbed in vermiculite) | 005 | DM | 00125 | G | 112 |
| c. Waste Flammable liquid nos, Flammable liquid UN1993 (Packed in Vermiculite) | 001 | DM | 00051 | G | 551 |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible] contaminates with chromic acid
[illegible]
[illegible]ethylene(2 pints, 8 oz.)

K. Handling Codes for Wastes Listed Above: 03

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: Chuck Young JOHN | Signature: Chuck Young | Date: Month Day Year: 06 26 8[illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Mark Croddy | Signature: Mark Croddy | Date: Month Day Year: 06 26 8[illegible]

18. Transporter 2 Acknowledgement or 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. #51673[illegible]
Printed/Typed Name: Casmalia Resources | Signature: [illegible] | Date: Month Day Year: 06 D[illegible]

GENERATOR

TRANSPORTER

FACILITY

DHS 8022 A (7/84)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency

Master

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.: CAD041162330
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
HYDRAULIC RESEARCH TEXTRON
12137 Montague Pacoima, CA

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84492638
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: Containerized Chemical Disposal Inc
6. US EPA ID Number: CAT000611483
C. State Transporter's ID:
D. Transporter's Phone: (818)969-7851

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
CASMALIA RESOURCES
Ntu Rd.
Casmalia
10. US EPA ID Number:
G. State Facility's ID: CAD020748125
H. Facility's Phone:

| 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 Hazardous waste liquid nos, ORM-E NA9189 (Packed in Vermiculite) | 001 | DM | 00006 | G | 551 |
| b. Waste Acid liquid nos, Corrosive material NA1760 (Packed in Vermiculite) | 001 | DM | 00015 | G | 551 |
| c. Waste Flammable liquid nos, Flammable liquid UN1993 (Packed in Vermiculite) | 001 | DM | 00015 | G | 551 |
| d. Waste Corrosive liquid nos, Corrosive material UN1760 (Packed in Vermiculite) | 001 | DM | 00002 | G | 551 |

J. Additional Descriptions for Materials Listed Above
a. Methylene chloride(1 gal)Dimethyl sulphoxide(2½ gal) Chloroform(½ gal)Sodium silicate(2 gal)b.Nitric acid, water(11 gal) c.Ethylene glycol(5 gal)Triethylene glycol(10 gal)d.Caustic soda (2 gal)

K. Handling Codes for Wastes Listed Above: 03

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 | Signature | Date Month Day Year |
|---|---|---|
| CHUCK YOUNGJOHN | Chuck Youngjohn | 06 26 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| MARK Croddy | Mark Croddy | 06 26 85 |

18. Transporter 2 Acknowledgement or 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. #51673 - 18,880 lbs

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Casmalia Resources Max Cooley | Max Cooley | 06 26 85 |

GENERATOR

TRANSPORTER

FACILITY

Please print or type

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 836-2411

A. State Manifest Document Number: 84366118
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000528636
C. State Transporter's ID: 63541
D. Transporter's Phone: (805)251-3737

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
CHEMICAL WASTE MANAGEMENT
35251 Old Skyline Road
KETTLEMAN CITY, CA. 92329

10. US EPA ID Number: CAT000646117
G. State Facility's ID:
H. Facility's Phone: (209) 386-9712

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | [illegible] | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
[illegible] OIL----10%-7%
HALOGENATED ORGANICS--------In excess 1000ppm
STODDARD SOLVENT----------1%-1%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible]
Signature: [signature]
Date: Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS G. EATON
Signature: [signature]
Date: Month Day Year: [illegible]

18. Transporter 2 Acknowledgement or 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:
Signature:
Date: Month Day Year:

GENERATOR
TRANSPORTER
FACILITY

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. C A D 0 4 1 1 6 2 3 3 0 — 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
H.R. TEXTRON
12137 Montague Pacoima, CA
4. Generator's Phone ( 805 ) 896-2411

A. State Manifest Document Number: 84493134
B. State Generator's ID:

5. Transporter 1 Company Name: Containerized Chemical Disposal Inc
6. US EPA ID Number: C A T 0 0 0 6 1 1 4 8 3
C. State Transporter's ID:
D. Transporter's Phone: (818)337-4381

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
CASMALIA RESOURCES
Ntu Rd.
Casmalia, CA 93429
10. US EPA ID Number: C A D 0 2 0 7 4 8 1 2 5
G. State Facility's ID: C A D 0 2 0 7 4 8 1 2 5
H. Facility's Phone: (805)937-8449

| 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 solid nos, Corrosive material UN1759 | 001 | D M | 00050 | P | 181 |
| b. Waste Flammable liquid nos, Flammable liquid UN1993 (Packed in Vermiculite) | 001 | D M | 00007 | G | 551 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
Debris (Contaminated wipes and pulps contaminated with chromic acid) (Spent Toluene (1 gallon)) (Solvent Contaminated miscellaneous debris (5 gallons))

K. Handling Codes for Wastes Listed Above

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 | Signature | Date (Month Day Year) |
|---|---|---|
| Chuck Goodrich | | 1 2 1 [illegible] |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MARK Goddy | Mark Goddy | 1 2 1985 |

18. Transporter 2 Acknowledgement of 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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

DHS 8022 A (7/84)

...ith and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...se print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) 386-2411

A. State Manifest Document Number: 84366123
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000620636
C. State Transporter's ID: 63543
D. Transporter's Phone: (805)251-3737

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
CHEMICAL WASTE MANAGEMENT
ZX 35251 Old Skyline Road
KETTLEMAN CITY, CA. 92329
10. US EPA ID Number: CAT000646117
G. State Facility's ID:
H. Facility's Phone: (209) 386-9712

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TL | [illegible] | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
A. WATER----------86%-82%
B. [illegible] SOLUBLE CUTTING OIL--10%-7%
C. STODDARD SOLVENT----------1%-1%
D. HALOGENATED ORGANICS-In excess of 1,000ppm

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] | Signature: [illegible] | Date: Month 1 Day 04 Year [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature: [illegible] | Date: Month [illegible] Day [illegible] Year [illegible]

18. Transporter 2 Acknowledgement or 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: | Signature: | Date: Month Day Year

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. CAD041162330 | 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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366122

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: ASBURY OIL COMPANY

6. US EPA ID Number: CAD.282770386

C. State Transporter's ID: 62696

D. Transporter's Phone: 321-1392

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
DEMENNO/KERDOON
2000 Alameda Ave.
Compton, Ca. 90222

10. US EPA ID Number: CAT080013352

G. State Facility's ID: CAT080013352

H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S. Combustible liquid NA1270 | 001 | TT | 100 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL - 35%-30%
CUTTING OIL---- 70%-65%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGJOHN | | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| BILL MASLOW | | 10 22 87 |

Department of Health Services
Toxic Substances Control Division
Sacramento, California

(Designed for use on elite (12-pitch) typewriter.)

# ORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 | Manifest Document No.:
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA CA. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366139
B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 53005
D. Transporter's Phone: (805) 251-3737

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
CASMALIA RESOURCES
Ntu. Rd.
Casmalia, Ca. 93429
10. US EPA ID Number: CAD020748125
G. State Facility's ID:
H. Facility's Phone: (805) 937-8449

| 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. COMBUSTIBLE LIQUID N.O.S. Combustible liquid, NA1993 | 001 | TT | 2000 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
A. WATER - 86%-82%
B. SOLUBLE CUTTING OIL -10%-7%
C. STODDARD SOLVENT 4%-1%
D. HALOGENATED ORGANICS- Less than 1,000ppm

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN | Signature: Chuck Youngjohn | Date: Month 07 Day 10 Year 85

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TOM EATON | Signature: Tom Eaton | Date: Month 07 Day 10 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: | Signature: | Date: Month Day Year

**FACILITY**

19. Discrepancy Indication Space
CASMALIA RESOURCES REFUSED, CONTAINS HALOGENATED SOLVENT ABOVE 1,000 PPM, NOT SUITABLE FOR SURFACE IMPOUNDMENT

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: | Signature: | Date: Month Day Year

Department of Health
Toxic Substances Contr
Sacramento, C

(Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 | 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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA.
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366144
B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000623636
C. State Transporter's ID: 530005
D. Transporter's Phone: (805) 251-3

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
CASMALIA RESOURCES
Ntu. Rd.
Casmalia, Ca 93429
10. US EPA ID Number: CAD020748125
G. State Facility's ID:
H. Facility's Phone: (805) 937-8449

| 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. COMBUSTIBLE LIQUID N.O.S, Combustible liquid, NA1993 | 001 | TT | 1850 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible]-86%-82%
SOLUBLE CUTTING OIL-10%-7%
STODDARD SOLVENT-2%-1%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES ~~XXX~~ AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Ye) |
|---|---|---|
| CHUCK YOUNGJOHN | Chuck Youngjohn | 06 06 8 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Ye) |
|---|---|---|
| TOM EATON | Tom Eaton | 06 06 8 |

18. Transporter 2 Acknowledgement or Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Ye) |
|---|---|---|
| | | |

19. Discrepancy Indication Space
Lab returned - >1,000 ppm halogenated organics.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Date (Month Day Ye) |
|---|---|---|
| | | |

GENERATOR
TRANSPORTER
FACILITY

85 [illegible]

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.: CAD041162330 — Manifest Document No.: 00000
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address:
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366131
B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 63542
D. Transporter's Phone: (805)251-3787

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:
CHEMICAL WASTE MANAGEMENT
PO BOX 157
KETTLEMAN Hill 92229
10. US EPA ID Number: CAT000646117
G. State Facility's ID: CAT000646117
H. Facility's Phone: (209) 386-9712

| 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. COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 4200 | - | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
A. WATER-88%-82%
B. SOLUBLE CUTTING OIL -10%-7%
C. STODDARD SOLVENT 1%-1%
D. HALOGENATED ORGANICS- In excess of 1 000

K. Handling Codes for Wastes Listed Above: 99

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature: Chuck Youngjohn — Date: Month 08 Day 23 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS G. EATON — Signature: Thomas G. Eaton — Date: Month 08 Day 23 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space
11. Improper DOT Description — 9 PO BOX 471

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Barry A Banks — Signature: Barry A Banks — Date: Month 8 Day 24 Year 85

GENERATOR — TRANSPORTER — FACILITY

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.: CAD041162330
Manifest Document No.: 13
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84386130
B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 63572
D. Transporter's Phone: (805) 251-3737

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
CHEMICAL WASTE MANAGEMENT
XXX XXX XXX 2525 [illegible]
KETTLEMAN HILLS, CA. 92329

10. US EPA ID Number: CAT000646117
G. State Facility's ID:
H. Facility's Phone: (209) 386-9712

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | [illegible] | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
A. WATER-[illegible]
B. SOLUBLE CUTTING OIL-10%-7%
C. STODDARD SOLVENT 1%-1%
D. HALOGINATED ORGANICS-In excess of 1,000ppm

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USED GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN
Signature:
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature:
Date: Month Day Year

18. Transporter 2 Acknowledgement or 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:
Signature:
Date: Month Day Year

GENERATOR
TRANSPORTER
FACILITY

...ornia—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.: C.A.D.0.4.1.1.6.2.3.3.0
Manifest Document No.: [illegible]
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS Blvd
PACOIMA,
4. Generator's Phone (818) 890-2411

A. State Manifest Document Number: 84366193
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: Oil and Solvent Process Company
6. US EPA ID Number: C.A.D.0.0.8.3.0.2.9.0.3
C. State Transporter's ID: 53154
D. Transporter's Phone: (818) 334-5117

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
Oil and Solvent Process Company
1704 West [illegible] Street
[illegible], CA 917[illegible]
10. US EPA ID Number: C.A.D.0.0.8.3.0.2.9.0.3
G. State Facility's ID: CAD008302903
H. Facility's Phone: (818) 776-6233

| 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 [illegible] Liquid [illegible] / [illegible] | 20 | DM | [illegible] | G | 213 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
Name of Solvent: STODDARD SOLVENT - 80% - 75%
Name of Contaminant: OIL - 20% - 10%

K. Handling Codes for Wastes Listed Above
a-01

15. Special Handling Instructions and Additional Information
[illegible] goggles [illegible]

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 | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [illegible] | [illegible] | [illegible] | [illegible] |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [illegible] | [illegible] | [illegible] | [illegible] |

18. Transporter 2 Acknowledgement or Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| | | | | |

19. Discrepancy Indication Space
[illegible]

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [illegible] | | | |

GENERATOR

TRANSPORTER

FACILITY

...ency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...m designed for use on elite (12-pitch) typewriter.)

# ...RM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 00005
2. Page 1 of 1

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

3. Generator's Name and Mailing Address: AR Textron, 10445 Glenoak Blvd, Pacoima, CA. 91331
4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366197
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: RHO-CHEM CORPORATION
6. US EPA ID Number: CAD008364432
C. State Transporter's ID: 5 7 ...
D. Transporter's Phone: (213) 776-62...

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: RHO-CHEM CORPORATION, 425 ISIS AVE., INGLEWOOD, CA. 90301
10. US EPA ID Number: CAD008364432
G. State Facility's ID: CAD008364432
H. Facility's Phone: (213) 776-6233

| 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 ORM-A LIQUID, NOS NA-1693 | [illegible] | DM | 300 | G | 211 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above:
1,1,1, TRICHLOROETHANE - 85% - 80%
OIL - 25% - 15%
FRIGIDITON - 3% - 1%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information: (6)

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: Chet Earley — Signature: [signature] — Date: Month 01 Day 14 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [signature] — Date: Month Day Year

18. Transporter 2 Acknowledgement or 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: Chet Earley — Signature: Chet Earley — Date: Month 01 Day 14 Year 85

GENERATOR — TRANSPORTER — FACILITY

DHS 8022 A (7/84)

...SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Print or Type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C.A.D.0.4.1.1.6.2.3.0 — 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
H.L. TEXTRON
[illegible] CANOAS PLANT
[illegible], CA. [illegible]

4. Generator's Phone ( ) [illegible]-2411

A. State Manifest Document Number: 84366183

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: [illegible] Oil Company

6. US EPA ID Number: C.A.U.2.8.2.7.7.0.2.0

C. State Transporter's ID: [illegible]

D. Transporter's Phone: 321-1272

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
DAMES & MERDON
2000 ALAMEDA AVE
[illegible], CA [illegible]

10. US EPA ID Number: C.A.T.0.8.0.0.1.3.3.5.2

G. State Facility's ID: CAT080013352

H. Facility's Phone: (213) 227-7100

| 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. NA 1760 WASTE OIL MIXTURE (CONTAINS [illegible]) | 1 | TT | 650 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL - 35% - 30%
CUTTING OIL - 70% - 65%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
[illegible] HANDLING

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: [illegible] — Signature: [signature] — Date: Month [illegible] Day [illegible] Year [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ERIC CUDEBACK — Signature: Eric Cudeback — Date: Month 02 Day 08 Year 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: ROBERTO M. TODORO — Signature: Roberto M. Todoro — Date: Month 02 Day 10 Year 85

| UNIFORM HAZARDOUS WASTE MANIFEST | 1. Generator's US EPA ID No. CAD041162330 | 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
HR TEXTRON
10445 GLENOAK BLVD
PACOIMA CA 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366166

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: OIL [illegible]

6. US EPA ID Number: CAD008302903

C. State Transporter's ID: 53152

D. Transporter's Phone: (818) 334-5117

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
OIL [illegible]
1704 [illegible]
[illegible]

10. US EPA ID Number: [illegible]

G. State Facility's ID: CAD008302903

H. Facility's Phone: 8183345117

| 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. [illegible] | 17 | [illegible] | [illegible] | G | 213 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

RECEIVED BY
APR 1 [illegible] 1985
KOOLTRONIC OF CALIF.
VENTURA, CA

J. Additional Descriptions for Materials Listed Above
Name of Solvent: STODDARD SOLVENT - 80% - 75%
Name of Contaminant: OIL - 20% - 10%

K. Handling Codes for Wastes Listed Above: a - 01

15. Special Handling Instructions and Additional Information

BL 20073

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 | Signature | Date Month Day Year |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Michael [illegible] | [illegible] | 4 [illegible] |

18. Transporter 2 Acknowledgement or 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 | Signature | Date Month Day Year |
|---|---|---|
| | | [illegible] |

GENERATOR

TRANSPORTER

FACILITY

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. CAD041182330 | 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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366150
B. State Generator's ID:

5. Transporter 1 Company Name: RHO-CHEM CORPORATION
6. US EPA ID Number: CAD008364432
C. State Transporter's ID: 5X3E
D. Transporter's Phone: (213)776-6233

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
RHO-CHEM CORPORATION
425 Isis Ave.
Inglewood, Ca 90301
10. US EPA ID Number: CAD008364432
G. State Facility's ID:
H. Facility's Phone: (213) 776-6233

| 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 ORM-A NE LIQUID N.O.S., NA1693 "RQ" | 008 | DM | 400 | G | 211 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
111 TRICHLOROETHANE -85%-80%
OIL-----25%-15%
INHIBITOR-----3%-1%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGJOHN | | 5 12 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| [illegible] | [illegible] | 5 20 85 |

18. Transporter 2 Acknowledgement or 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 | Signature | Date (Month Day Year) |
|---|---|---|
| Chet Fawley | | 5 20 85 |

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89641

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.: CAD041162330 | Manifest Document No.:
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366151
B. State Generator's ID:

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD028277036
C. State Transporter's ID: 62701
D. Transporter's Phone: 321-1392

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
DEMENNO/KERDON
2000 Alameda Ave.
Compton, Ca 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID: CAT080013352
H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S. , Combustible Liquid NA1270 | 001 | TT | 650 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL-35%-30%
CUTTING OIL-70%-65%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN | Signature: [signature] | Date: Month 05 Day 11 Year 85

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ERIC CUDEBACK | Signature: [signature] | Date: Month 05 Day 17 Year 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: TIA GATOSA | Signature: [signature] | Date: Month 05 Day 17 Year 85

# HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CADOOI162330 | | | |

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone (818) 896-2411

A. State Manifest Document Number 4386140
B. State Generator's ID

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD028277036
C. State Transporter's ID 62696
D. Transporter's Phone
7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID 321-1382
F. Transporter's Phone

9. Designated Facility Name and Site Address
DEMENNO / KERDON
2000 Alameda Ave.
Compton, Ca 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID
H. Facility's Phone (213) 537-7100

| 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 OIL N O.S. , Combustible Liquid NA1270 | 001 | TT | 700 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[redacted]

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

18. 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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGJOHN | | 6 27 85 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| ERIC CUDEBACK | | 6 27 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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

State of California—Health and Welfare Agency

Department of Health
Toxic Substances Control
Sacramento, Calif.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 | Manifest Document No.:
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366138
B. State Generator's ID: CALD041162330
C. State Transporter's ID: 53154
D. Transporter's Phone: (818)334-5117

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.
6. US EPA ID Number: CAD008302903
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
OIL AND SOLVENT PROCESS CO.
1704 WEST FIRST STREET
AZUSA CA. 91702
10. US EPA ID Number: CAD008302903
G. State Facility's ID:
H. Facility's Phone: (818) 334-5117

| 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 FLAMMABLE LIQUID N.O.S. / UN1993 | 14 | DM | 700 | G | 213 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible] SOLVENT - 30%-75%
[illegible] - 20%-10%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES

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 | Signature | Date (Month Day Year)

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date (Month Day Year)

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 | Signature | Date (Month Day Year)

DHS 8022 A (7/84)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366126
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD028277036
C. State Transporter's ID: 62646
D. Transporter's Phone: 321-1392

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
DEMMENO/KERDON
2000 Alameda Ave.
Compton, Ca. 90222

10. US EPA ID Number: CAT080013352
G. State Facility's ID:
H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S. Combustible Liquid NA1270 | 001 | TT | | G | XX 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL-35%-30%
CUTTING OIL---70%-65%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN
Signature:
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ERIC CUDEBACK
Signature: Eric Cudeback
Date: Month Day Year: 9 03 85

18. Transporter 2 Acknowledgement or 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:
Signature:
Date: Month Day Year

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 899-2411

A. State Manifest Document Number 84366128

B. State Generator's ID CAD041162330

5. Transporter 1 Company Name: RHO-CHEM CORPORATION

6. US EPA ID Number: CAD008264432

C. State Transporter's ID 52536

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID (213)776-6233

F. Transporter's Phone

9. Designated Facility Name and Site Address
RHO-CHEM CORPORATION
425 Isis Ave.
Inglewood,Ca 90301

10. US EPA ID Number: CAD008264432

G. State Facility's ID

H. Facility's Phone (213) 776-6233

| 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 ORM-A LIQUID N.O.S. NA1593 | 7 | DM | | G | 211 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
1,1,1 TRICHLOROETHANE-85%-80%
[illegible]-25%-15%
[illegible]-3%-1%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year)

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

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 | Signature | Date (Month Day Year)

DHS 8022 A (7/84)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 | Manifest Document No.:
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
ER TEXTRON
10445 GLENOAKS BLVD.
PACOIMA CA. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366119
B. State Generator's ID: CAD041162330
C. State Transporter's ID: 63587
D. Transporter's Phone: (818)334-5117
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (818) 334-5117

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.
6. US EPA ID Number: CAD008302963
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: OIL AND SOLVENT PROCESS CO.
1704 WEST FIRST STREET
AZUSA, CA. 91702
10. US EPA ID Number: CAD008302963

| 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 FLAMMABLE LIQUID N.O.S. / UN1993 | 012 | DM | 00600 | G | 214 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
STODDARD SOLVENT- 80%-75%
OIL 20%-10%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES

SC-C2173

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: [illegible] | Signature: [signature] | Date: Month 1 1 Day 1 8 Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DONALD EDWARDS | Signature: [signature] | Date: Month 1 1 Day 1 8 Year

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: | Signature: | Date: Month Day Year

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 89541

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.: CAD041162330
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
HR TEXTRON
10445 GLENOAKS BLVD.
LACOIMA, CA. X 91331
4. Generator's Phone 818 899-2411

A. State Manifest Document Number: 84366116
B. State Generator's ID:
C. State Transporter's ID: CAD041162330
D. Transporter's Phone: 321-1892

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD028277038
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
DEMMENO/KERDOC
2000 Alameda Ave.
Compton, Ca. 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID: CAT080013352
H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S Combustible Liquid NA1270 | 001 | TT | | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible]

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN
Signature:
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

18. Transporter 2 Acknowledgement or 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: Eva Gatolini
Signature: [signature]
Date: Month Day Year: 11 22 85

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.: CAD041162330
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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA CA. 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366108
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628536
C. State Transporter's ID: 63541
D. Transporter's Phone: (895)251-3737

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
CHEMICAL WASTE MANAGEMENT
35251 Old Skyline Road
KETTLEMAN CITY, CA. 92329

10. US EPA ID Number: CAT000646117
G. State Facility's ID:
H. Facility's Phone: (209) 386-9712

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 2000 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible]----------85%-82%
[illegible] CUTTING OIL----------10%-7%
HALOGENATED ORGANICS----------In excess 1000ppm
STODDARD SOLVENT----------1%- 1%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

DOT-E-7476

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: CHUCK YOUNGJOHN
Signature:
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [signature]
Signature: [signature]
Date: Month Day Year: 12 17 85

18. Transporter 2 Acknowledgement or 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:
Signature:
Date: Month Day Year

GENERATOR
TRANSPORTER
FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 89541

2166-04749

and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...ype. (Form designed for use on elite (12-pitch) typewriter.)

**...IFORM HAZARDOUS WASTE MANIFEST**

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD0[illegible]116[illegible]330 | | | |

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA [illegible]1331

4. Generator's Phone ( [illegible] ) 899-[illegible]411

A. State Manifest Document Number: 84366100

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD0[illegible]863[illegible]

C. State Transporter's ID:

D. Transporter's Phone: (805)[illegible]

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
PACIFIC TREATMENT CORP
2195 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD09[illegible]894556

G. State Facility's ID:

H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | T | [illegible] | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible]----------86%-82%
[illegible]----------10%-7%
[illegible]----------4%--1%
[illegible] ORGANICS ----------Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

[illegible] 1470

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 | Signature | Date Month Day Year |
|---|---|---|
| [illegible] | [signature] | [illegible] |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| [illegible] | [signature] | [illegible] |

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 | Signature | Date Month Day Year |
|---|---|---|
| | | |

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.: CAD041162330
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA CA. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366096
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 63541
D. Transporter's Phone: (805) 251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD095894553-B
H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S Combustible Liquid, NA1993 | 001 | TT | 02000 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------88%-82%
SOLUBLE CUTTING OIL----------10%--7%
STODDARD SOLVENT----------1%--1%
HALOGENATED ORGANICS----------Trace amount

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGJOHN | | 02 24 96 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Larry Pearce | | 02 24 96 |

18. Transporter 2 Acknowledgement or Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

**FACILITY**

19. Discrepancy Indication Space
PH 7.0

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| BOB MILLER | | 02 24 96 |

DHS 8022 A (7/84)
(EPA 8700-22)

**Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS**

84 80541

Sta.

Sacramento, California

Please P

# UNIFORM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| C A D 0 4 1 1 6 2 3 3 0 | | | |

3. Generator's Name and Mailing Address
HYDRAULIC RESEARCH TEXTRON
10445 Glenoaks Blvd. Pacoima, CA
4. Generator's Phone ( 818 ) 896-2411

A State Manifest Document Number: 8475337 0
B State Generator's ID:

5. Transporter 1 Company Name: Containerized Chemical Disposal Inc
6. US EPA ID Number: C A T 0 0 0 6 1 1 4 8 3
C State Transporter's ID:
D Transporter's Phone: (818)837-4391

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
CASMALIA RESOURCES
Ntu Rd.
Casmalia, CA 93429
10. US EPA ID Number: C A D 0 2 0 7 4 8 1 2 5
G State Facility's ID: C A D 0 2 0 7 4 8 1 2 5
H Facility's Phone: (805)937-8449

| 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 nos, Corrosive liquid UN1760 | | DM | | G | 551 |
| b. Hazardous waste liquid nos, ORM-E NA9189 | | DM | 00010 | G | 551 |
| c. Hazardous waste liquid nos, ORM-E NA9189 | | DM | | G | 551 |
| d. | | DM | | G | 867 |

J Additional Descriptions for Materials Listed Above
[illegible]

K Handling Codes for Wastes Listed Above

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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

GENERATOR

TRANSPORTER

FACILITY

8475337 0

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

YELLOW: GENERATOR RETAINS

84 8964

...LITE type (12 characters per inch).

STATE ID NUMBER 84753370

...ON SHEET

...AULIC RESEARCH TEXTRON

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

...IS IS CONTINUATION SHEET 1 OF 2

CAD 04V 162330

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. TYPE | WASTE CAT. NO. |
|---|---|---|---|---|---|
| 11.A Waste Corrosive Liquid NOS | UN1760 | | | | |
| Corrosive liquid | | | | | |
| 7 5gal Ammonium Hydroxide | | | | | |
| 1/3 gal Aluminum Hydroxide | | | | | |
| 4% Aluminum Hydroxide | | | | | |
| 4% Aluminum Chloride | | | | | |
| 1 1/2% Ferrous Chloride | | | | | |
| 16 oz Potassium Hydroxide | | | | | |
| 40 oz Caustic Soda | | | | | |
| 11.B Waste Hazardous Waste liquid NOS | NA9189 | | | | |
| ORME | | | | | |
| 5gal Sodium Borate | | | | | |
| 1gal Chloroform | | | | | |
| 8oz Ammonium Chloride | | | | | |
| 16oz Ammonium Sulfate | | | | | |
| 16oz Cupric Acetate | | | | | |
| 4oz Barium Hydroxide | | | | | |
| 1gal Copper Oxide | | | | | |
| 3/3gal Ferrous Sulphate | | | | | |
| 2oz Lithium Carbonate | | | | | |
| 4oz Magnesium Hydroxide | | | | | |
| 4oz Nickel Chloride | | | | | |
| 1oz Potassium Ferricyanide | | | | | |
| 16oz Sodium Carbonate | | | | | |
| 8oz Strontium Carbonate | | | | | |
| 4oz Cupric Sulphate | | | | | |
| 8oz Calcium Chloride | | | | | |
| 4oz Calcium Oxide | | | | | |
| 1pt Carbon Tetrachloride | | | | | |
| 2gal Barium Chloride | | | | | |

...LITE type (12 characters per inch).

STATE ID NUMBER 84753370

...N SHEET

...AUNIC RESEARCH TEXTRON

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

...IS CONTINUATION SHEET 2 OF 2

CAD 041162330

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. TYPE | WASTE CAT. NO. |
|---|---|---|---|---|---|
| 11.C. Waste Corrosive Liquid NOS | UN1760 | | | | |
| Corrosive Liquid | | | | | |
| 1/2 gal Phosphoric Acid | | | | | |
| 1/5 gal Acetic Acid | | | | | |
| 1/4 gal Sulphuric Acid | | | | | |
| 20 oz Nitric Acid Spent | | | | | |
| 11.D. Waste Flammable Liquid NOS | | | | | |
| 28.A. Flammable Liquid | UN1993 | | | | |
| 1/2 gal Acetone | | | | | |
| 1/2 PT Ethylene Dichloride | | | | | |
| 28F Waste Poison B Liquid NOS | UN2810 | | | | |
| Poison B | | | | | |
| 2/3 gal Phenol 1,1,2-2 Tetra-Chloroethane | | | | | |

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.: CAD041162330
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
HR TEXTRON
10445 GLENOAKS BLVD
PACOIMA CA. 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366090

B. State Generator's ID: ~~XXXXXXXXXX~~ CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD008628630

C. State Transporter's ID: 62543

D. Transporter's Phone: (805)251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID: CAD095894556

H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid NA1993 | 001 | TT | 3300 | [illegible] | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL------10%-7%
STODDARD SOLVENT---------1%--1%
HALOGENATED ORGANICS-----Trace amount

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: FRED PAINTER
Signature: [signature]
Date: Month 3 Day 24 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [signature]
Date: Month 3 Day 24 Year 86

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space
3500 gal
6.0

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Nick Vert
Signature: [signature]
Date: Month 3 Day 24 Year 86

GENERATOR / TRANSPORTER / FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

...nd Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366079
B. State Generator's ID: CAD041162380

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD...628636
C. State Transporter's ID: 63540
D. Transporter's Phone: (805)251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD095894556
H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 2300 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------85%-82%
SOLUBLE CUTTING OIL----------10%-7%
STODDARD SOLVENT----------1%-1%
HALOGENATED ORGANICS-------Trace amount

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

DOT E 8822

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: FRED A. PAINTER — Signature — Date: Month 04 Day 23 Year 86

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: HENRY KHMIKE — Signature — Date: Month 04 Day 23 Year 86

**FACILITY**

19. Discrepancy Indication Space
load = 2,640 gls RCRA NO
waste No = 222
ph-8.0
1800

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: JUAN J. DUARTE — Signature — Date: Month 04 Day 23 Year 86

DHS 8022 A (7/84)
(EPA 8700-22)

**Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS**

84 89541

...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. CAD041162330 | 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
HR TEXTRON
10445 Glencaks Blvd.
Pacoima, Ca

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number 84366072
B. State Generator's ID CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD980628636
C. State Transporter's ID 63543
D. Transporter's Phone (805)251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID
H. Facility's Phone (619) 233-0424

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. WASTE COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 3000 | G | D001 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL----------10%-7%
STODDARD SOLVENT----------1%--1%
HALOGENATED ORGANICS----Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING DOTE 7476

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: CHUCK YOUNGJOHN | Signature | Date: Month Day Year 06 04 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE REINA | Signature | Date: Month Day Year 06 04 86

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space
Load un Treatable and Does Not match Profile Returned to Generator
MANIFEST Replaced BY 84366071

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Date: Month Day Year

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

S 8022 A (7/84)
(A 8700-22)

84 89541

...rnia—Health and Welfare Agency

...nt 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. CAD041162330 — 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
HYDRAULIC RESEARCH TEXTRON
12137 Montague Pacoima, CA
4. Generator's Phone ( 818 ) 896-2411 x356

A. State Manifest Document Number: 86543778
B. State Generator's ID:

5. Transporter 1 Company Name: Containerized Chemical Disposal
6. US EPA ID Number: CAT000611483
C. State Transporter's ID:
D. Transporter's Phone: (818)337-4381

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
CASMALIA RESOURCES
Ntu Rd.
Casmalia, CA 93429
10. US EPA ID Number: CAD020748125
G. State Facility's ID: CAD020748125
H. Facility's Phone: (805)937-8449

| 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 Flammable liquid nos, Flammable liquid UN1993 | | D M | 2 0 0 0 | G | 551 (D001) |
| b. Waste Acid liquid nos, Corrosive material NA1760 | | D M | | G | 551 (D002) |
| c. Waste Chromic acid solution, Corrosive material UN1755 | 0 1 6 | D P | 0 0 3 2 0 | G | 112 (D001) |
| d. Waste Battery, wet with containers of Electrolyte(Acid) Corrosive material NA2794 | 0 0 1 | D M | 0 0 0 8 0 | P | 551 D002 |

J. Additional Descriptions for Materials Listed Above
11.a) Lab Pack containing:3 gal. Carbon ester, 1 gal. Ethylene glycol, 1 gal. Hexane, 1 qt. adhesive. 11.b) 1 gal. Phosphoric acid, 1 pint Naphthenic acid 11.c) Chromic acid and water absorbed in Vermiculite 11.d) Wet cell batteries(lab packed)containing sulfuric acid (8-8"x5")

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Gloves and Goggles

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 | Signature | Month Day Year |
|---|---|---|
| | | |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| | | |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month Day Year |
|---|---|---|
| | | |

86543779

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW GENERATOR RETAINS

...and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366059
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000028636
C. State Transporter's ID: 706530
D. Transporter's Phone: (805)251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD095894556
H. Facility's Phone: (619) 233-0424

| 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. ATTE COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 2 3 0 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL--------10%-7%
STODDARD SOLVENT----------1%--1%
HALOGENATED ORGANICS-------Trace amount

K. Handling Codes for Wastes Listed Above
15

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

DOT E 7476

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: CHUCK PANOJOHN
Signature: [signature]
Date: Month 07 Day 09 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE REINA
Signature: [signature]
Date: Month 07 Day 09 Year 86

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space
[illegible] 383

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: JUAN J NAVARRETE
Signature: [signature]
Date: Month 07 Day 09 Year 86

GENERATOR / TRANSPORTER / FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

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. CAD0[illegible]6233 — 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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 896-1411

A. State Manifest Document Number 84366056

B. State Generator's ID CAD0[illegible]6233

5. Transporter 1 Company Name — 6. US EPA ID Number
MARTIN INDUSTRIAL PUMPING — CAD[illegible]

C. State Transporter's ID 208541

D. Transporter's Phone (805)251-3737

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 — 10. US EPA ID Number
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113 — CAD095894556

G. State Facility's ID

H. Facility's Phone (619) 233-0424

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. WASTE COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 55 | G | 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible]----86%-82%
[illegible] CUTTING OIL----10%-7%
[illegible] SOLVENT----1%-1%
[illegible] WATER ORGANICS----Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| DAVID SIMMONS | | |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 69541

...alth and Welfare Agency

...e. (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.: CAD041162330 | 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
HR TEXTRON
10445 Glenoaks Blvd. , Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 86208395

B. State Generator's ID: CAD041162330 708529

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628626

C. State Transporter's ID: [illegible]

D. Transporter's Phone: (805)251-8737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID: CAD095894556 (04)

H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 0050 | G | D001 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL-------10%--7%
STODDARD SOLVENT----------1%--1%
HALOGENATED ORGANICS-------Trace amount

K. Handling Codes for Wastes Listed Above: 15

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN | Signature: [signature] | Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature: [signature] | Month Day Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Month Day Year:

19. Discrepancy Indication Space
NO MANIFEST DOCUMENT NO.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 18.
Printed/Typed Name: Charles R Alexander Jr | Signature: [signature] | Month Day Year: 09 29 80

86208395

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

...ia—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( [illegible] )

A. State Manifest Document Number: 84366052
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 7D8530
D. Transporter's Phone: (805)251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD095894556
H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S. XX Combustible Liquid, NA1993 | 001 | TT | 265 | G | D001 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL---------10%--7%
STODDARD SOLVENT----------1%--1%
HALOGENATED ORGANICS---------Trace amount

K. Handling Codes for Wastes Listed Above: 15

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
LOT [illegible]76

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: [illegible]
Signature: [illegible]
Date: Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE [illegible]
Signature: [illegible]
Date: Month Day Year: [illegible]

18. Transporter 2 Acknowledgement or 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: Bob Miller
Signature: Bob Miller
Date: Month Day Year: 09 05 86

GENERATOR / TRANSPORTER / FACILITY

22 A (7/84)
/00-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 00001

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA.91331

4. Generator's Phone (818) 89[illegible]-2411

A. State Manifest Document Number: 86208389

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 708528

D. Transporter's Phone: (805) 281-3737

7. Transporter 2 Company Name: HANK PAGE TRUCKING

8. US EPA ID Number: CAD981424005

E. State Transporter's ID: 708528

F. Transporter's Phone: [illegible] 255[illegible]

9. Designated Facility Name and Site Address
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD0[illegible]5394556

G. State Facility's ID: CAD 095874556

H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1.93 | 001 | TT | 01500 | G | D001 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL--------10%--7%
STODDARD SOLVENT----------1%--1%
HALOGENATED ORGANICS------Trace XXXXX amount

K. Handling Codes for Wastes Listed Above: 15

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
DOT-E-7476

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: FRED PAINTER — Signature: [signature] — Month Day Year: 10 17 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: HANK PAGE — Signature: [signature] — Month Day Year: 10 17 85

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: BOB MILLER — Signature: Bob Miller — Month Day Year: 10 17 85

GENERATOR / TRANSPORTER / FACILITY

86208389

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

Health and Welfare Agency

(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. CAD041162330 | Manifest Document No. 90505

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) [redacted] 806-2411

A. State Manifest Document Number: 86208385

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628626

C. State Transporter's ID: 708529

D. Transporter's Phone: (805) 251-5737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD005894556

G. State Facility's ID: CAD095-894556

H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 1000 | G | D001 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL-----10%-7%
STODDARD SOLVENT--------1%--1%
HALOGENATED ORGANICS----Trace amount

K. Handling Codes for Wastes Listed Above: 15

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

DOT-E-7476

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: CHUCK YOUNGJOHN | Signature: [signature] | Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS EATON | Signature: Thomas Eaton | Month Day Year: 10 28 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: BOB MILLER | Signature: Bob Miller | Month Day Year: 10 29 86

GENERATOR

TRANSPORTER

FACILITY

86208385

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

HA HQ 36-008695

Health and Welfare Agency

(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. | 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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 86208378

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number

C. State Transporter's ID: 708541

D. Transporter's Phone: (805)251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD 9[illegible]

G. State Facility's ID

H. Facility's Phone: (619) 233-6424

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | | G | D001 [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL------10%-7%
STODDARD SOLVENT---------1%--1%
HALOGENATED ORGANICS-----Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
DOT-[illegible] 8822

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: CHUCK YOUNGJOHN | Signature: [signature] | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: TOM MARTIN | Signature: [signature] | Month Day Year

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 | Signature | Month Day Year

GENERATOR / TRANSPORTER / FACILITY

86208378

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: GENERATOR RETAINS

...rnia—Health and Welfare Agency
...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. [illegible]
Manifest Document No. [illegible]
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Clemens Blvd.
Pacoima, Ca. 91331
4. Generator's Phone (818) [illegible]

A. State Manifest Document Number: 86208376
B. State Generator's ID: CAD041162330
C. State Transporter's ID: 108530
D. Transporter's Phone: [illegible]
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (818) 233-[illegible]

5. Transporter 1 Company Name: MARTIN INDUSTRIAL [illegible]
6. US EPA ID Number: [illegible]
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
PACIFIC [illegible] CORP.
130 MAIN STREET
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD[illegible]

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, A19 3 | 01 | T | 1800 | G | D001 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------[illegible]%-82%
SOLUBLE CUTTING OIL----------10%-7%
STODDARD SOLVENT----------1%--1%
HALOGENATED ORGANICS----------Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING [illegible] 1976

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: [illegible] YOUNGJOHN
Signature: [illegible]
Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE REINA
Signature: Mike Reina
Month Day Year: 12 02 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:
Signature:
Month Day Year

GENERATOR
TRANSPORTER
FACILITY

86208376

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW. GENERATOR RETAINS

Department of Health Services

...rnia—Health and Welfare Agency

...t 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. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| [illegible] | [illegible] | | |

**GENERATOR**

3. Generator's Name and Mailing Address
[illegible] TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca.

4. Generator's Phone ( 818 ) 899-2411

A. State Manifest Document Number: 6208371

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: [illegible]

C. State Transporter's ID: 7085[illegible]41

D. Transporter's Phone: (805) 21-3737

7. Transporter 2 Company Name: HANK PAGE TRUCKING

8. US EPA ID Number: CAD981424005

E. State Transporter's ID: 7055 28

F. Transporter's Phone: 805 255 6887

9. Designated Facility Name and Site Address
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD009 803488

G. State Facility's ID: CAD095894536

H. Facility's Phone: (619) 233-8424

| 11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)* | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. WASTE COMBUSTIBLE LIQUID .O. . Combustible Liquid, NA1993 | 001 | TT | 1500 | G | D001 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------86%-82%
SOLUBLE CUTTING OIL----------10%-7%
STODDARD SOLVENT----------1%-1%
HALOGENATED ORGANICS----------Trace amount

K. Handling Codes for Wastes Listed Above: 15

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
DOT-E ~~7466~~ 8822

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| JOHN AGOPICHIAN | [signature] | 1 | 21 | 86 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| LARRY RAMIREZ | [signature] | 1 | 21 | 86 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| HANK PAGE | [signature] | 1 | 21 | 86 |

**FACILITY**

19. Discrepancy Indication Space
LOAD DELIVERED IN TANKER #1

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| BOB MILLER | [signature] | 1 | 21 | 86 |

86208371

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — 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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number 84366104

B. State Generator's ID CAD041162330

5. Transporter 1 Company Name: RHO-CHEM CORPORATION — 6. US EPA ID Number: CAD008364432

C. State Transporter's ID

D. Transporter's Phone (213)776-6233

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
RHO-CHEM CORPORATION
425 Isis Ave.
Inglewood Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID

H. Facility's Phone (213) 776-6233

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. WASTE ORM-A LIQUID N.O.S. NA1693 "RQ" | 1 | DM | 55 | G | 211 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
1,1,1 TRICHLOROETHANE-85%-80%
[illegible]-25%-15%
[illegible]-3%-1%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 [illegible] — Signature [illegible] — Date Month 1 Day 1 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [illegible] — Signature [illegible] — Date Month 1 Day 1 Year 86

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 — Signature — Date Month Day Year

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 69541

...—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...se print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366103
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.
6. US EPA ID Number: CAD008302903
C. State Transporter's ID: 63582
D. Transporter's Phone: (818)334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 WEST FIRST STREET
AZUSA, CA. 91702
10. US EPA ID Number: CAD008302903
G. State Facility's ID: CAD008302903
H. Facility's Phone: (818) 334-5117

| 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 NA918 | [illegible] | DM | 350 | G | 211 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
XXX FREON 85%--80%
OIL------ 20%--15%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: XXXXXXX CHUCK YOUNGJOHN
Signature: [signature]
Date: Month 01 Day 10 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [signature]
Date: Month [illegible] Day [illegible] Year [illegible]

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space
NIT

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Betty Peckham
Signature: [signature]
Date: Month [illegible] Day [illegible] Year [illegible]

GENERATOR

TRANSPORTER

FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

State of [illegible]—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.: CAD041162330 | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 818 896-2411
4. Generator's Phone ( )

A. State Manifest Document Number: 84366105
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD028277038
C. State Transporter's ID: 62676
D. Transporter's Phone: 321-1392

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
DLMMEL/KLRDON
2000 Alameda Ave.
Compton, Ca. 90222
10. US EPA ID Number: CA 0800133 52
G. State Facility's ID
H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S. Combustible Liquid UA1270 | 001 | TT | 1000 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[redacted]

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK TOURNJOHN | | 1 6 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

DHS 8022 A (7/84)
(EPA 8700-22)

**Yellow: GENERATOR RETAINS**

84 89541

and Welfare Agency

Department of Health Service
Toxic Substances Control Divisio
Sacramento, Californi

(Form designed for use on elite (12-pitch) typewriter.)

# IFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 | 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
AR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA CA. 91331 CY

A. State Manifest Document Number 84366095

B. State Generator's ID

4. Generator's Phone ( 818 ) XXXXXX 896-2411

5. Transporter 1 Company Name: ASBURY OIL COMPANY | 6. US EPA ID Number: CAD028277936

C. State Transporter's ID 0769

D. Transporter's Phone 321-1392

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
DEM ENO/KERDO
2000 Alameda Ave.
Compton, Ca. 9[illegible]2

10. US EPA ID Number: CA 0301 13652

G. State Facility's ID [illegible] 13352

H. Facility's Phone (213) 537-7100

| 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 OIL N O.S. Combustible Liquid NA1270 | 01 | TT | 01000 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL EX------35%-30%
CUTTING OIL----------70%-65%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGJOHN | | 02216 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MIKE BUTCHER | | 02216 |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| [illegible] | | |

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.: CAD041162330
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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) XXXXX 896-2411

A. State Manifest Document Number: 84366093
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.
6. US EPA ID Number: CAD008302903
C. State Transporter's ID: 63584
D. Transporter's Phone: (818) 334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 WEST FIRST STREET
AZUSA, CA. 91702
10. US EPA ID Number: CAD008302903
G. State Facility's ID: CAD008302903
H. Facility's Phone: (818) 334-5117

| 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 FLAMMABLE LIQUID N.O.S. / UN1993 | 013 | DM | 00650 | G | 214 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
STODDARD SOLVENT----------80%-75%
OIL----------20%-10%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

B1-03960

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: CHUCK [illegible]
Signature: [signature]
Date: Month 2 Day 2 Year 4

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DONALD NEDWARD
Signature: Donald Nedwards
Date: Month 2 Day 2 Year 4

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space
N/A

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible]
Signature: [illegible]
Date: Month Day Year

GENERATOR

TRANSPORTER

FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

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.: CAD041162330
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
HR TEXTRON
10445 GLENOAKS BLVD
PACOIMA, CA. 91331
4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366091
B. State Generator's ID: CAD 028277036

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD028277036
C. State Transporter's ID: 0769
D. Transporter's Phone: 321-1392

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
DEMMENO/KERDON
2000 Alameda Ave
Compton, Ca. 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID:
H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S. Combustible Liquid NA1270 | 001 | TT | 400 gl. | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL----------35%-30%
CUTTING OIL----------70%-65%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: FRED PAINTER
Signature:
Date: Month 3 Day 19 Year 2

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE FLUTCHER
Signature:
Date: Month 3 Day 19 Year 00

18. Transporter 2 Acknowledgement or 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:
Signature:
Date: Month Day Year

GENERATOR / TRANSPORTER / FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 89541

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. CAD041162330 — 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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number 84366086

B. State Generator's ID CAD041162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.

6. US EPA ID Number: CADO[illegible]8302903

C. State Transporter's ID 63584

D. Transporter's Phone (818)334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 West RX First Street
AZUSA, CA 91702

10. US EPA ID Number: CAD008302903

G. State Facility's ID (CA) 08302903

H. Facility's Phone (818)334-5117

| 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. 1 WASTE FLAMMABLE LIQUID N.O.S. UN1993 | 012 | DM | 600 | G | 214 |
| b. 2. HAZARDOUS WASTE, LIQUID N.O.S./ORM-E NA9189 | 009 | DM | 450 | G | 211 |
| c. 3. WASTE FLAMMABLE LIQUID N.O.S. UN1993 | 002 | DM | 100 | G | 214 |
| d. | | | | | |

GENERATOR

J. Additional Descriptions for Materials Listed Above
1.1 STODDARD SOLVENT--80%-75%
1.2 OIL----------20%-10%
2.1 FREON----------85%-80%
2.2 OIL----------20%-15%
3.1 ISOPROPYL ALCOHOL---80%-78%
3.2 WATER----20%-15%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES ~~WHEN~~ WHEN HANDLING
31-41931-32-33

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK YOUNGJOHN | | 6/6/86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| RONALD NEDWARDS | Ronald Nedwards | 6/09/86 |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| William R. Walters | William R. Walters | 6/10/86 |

DHS 8022 A (7/84)
(EPA 8700-22)

**Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS**

84 8954

...ia—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. CAD041162330 | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima Ca. 91331

A. State Manifest Document Number 8436607B

B. State Generator's ID CAD041162330

4. Generator's Phone ( 818 ) 896-2411

5. Transporter 1 Company Name: RHO-CHEM CORPORATION | 6. US EPA ID Number: CAD008364432 | C. State Transporter's ID 64089 | D. Transporter's Phone (213)778-6233

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
RHO-CHEM CORPORATION
425 Isis Ave.
Inglewood Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID CAD008364432

H. Facility's Phone XXX (213)776-6233

| 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. NA1693 "RQ" | | DM | 10 | G | 711 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[redacted]
25%-15%
3%-1%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date Month Day Year 5 7 X

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

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 | Signature | Date Month Day Year

DHS 8022 A (7/84)
(EPA 8700-22)

**Yellow: GENERATOR RETAINS**

84 80641

Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Print or type. (Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 | Manifest Document No.:
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
IR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA,CA. XXXXX 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366080
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD028277036
C. State Transporter's ID: 708173
D. Transporter's Phone: 321-1392

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
DEMMENO/KERDON
2000 Alameda Ave.
Compton,Ca 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID: CAT080013352
H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S. Combustible Liquid NA1270 | 001 | TT | 900 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL----------35%-30%
CUTTING OIL----------70%-65%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK [illegible] | [signature] | 5 10 84 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MIKE LUECKER | [signature] | 5 12 84 |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| ROBERT J. JALIMAN | [signature] | 5 12 84 |

DHS 8022 A (7/84)
(EPA 8700-22)

**Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS**

TSDF IS P/O

...nd Welfare Agency

Department of Health Servi...
Toxic Substances Control Divisi...
Sacramento, Califor...

...pe. (Form designed for use on elite (12-pitch) typewriter.)

# ...NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD0...116...3...0
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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366073
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD028277036
C. State Transporter's ID: 708173
D. Transporter's Phone: 321-1392

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
DEMENO/KERDON
2000 Alameda Ave.
Compton, Ca. 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID: CAT080613352
H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S. Combustible Liquid A1210 | 001 | TT | 12 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL----------35%-30%
CUTTING OIL----------70%-65%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN
Signature:
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE BUCHER
Signature:
Date: Month Day Year: 6 02 86

18. Transporter 2 Acknowledgement or 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: FIA GATTELLI
Signature:
Date: Month Day Year: 6 02 84

GENERATOR

TRANSPORTER

FACILITY

...ld Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

(Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 | 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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 899-2411

A. State Manifest Document Number 84366070

B. State Generator's ID CAD041162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.

6. US EPA ID Number: CAD008309293

C. State Transporter's ID

D. Transporter's Phone (818)334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 WEST FIRST STREET
AZUSA, CA. 91702

10. US EPA ID Number: CAD008330290

G. State Facility's ID

H. Facility's Phone (818) XXX 334-5117

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | T | [illegible] | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible] OIL 10%-7%
[illegible] 40%-30%
[illegible] 50%-45%
CHLORINATED [illegible] ORGANICS--Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES

GENERATOR

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 | Signature | Date Month Day Year |
|---|---|---|
| CHUCK YOUNGJOHN | | 06 10 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| | | |

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 | Signature | Date Month Day Year |
|---|---|---|
| | | |

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 86

...d Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

(Form designed for use on elite (12-pitch) typewriter.)

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — 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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA.

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366069

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.

6. US EPA ID Number: CAD008302903

C. State Transporter's ID: 6253

D. Transporter's Phone: (818)334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 WEST FIRST STREET
AZUSA, CA. 91702

10. US EPA ID Number: CAD008302903

G. State Facility's ID

H. Facility's Phone: (818) 334-5117

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. 1. HAZARDOUS WASTE LIQUID N.O.S./CRI- N.A. 9189 | 004 | DM | 200 | G | 211 |
| b. 2. WASTE ALCOHOL N.O.S. / FLAMMABLE LIQUID UN1987 | 001 | DM | 30 | G | 214 |
| c. 3. WASTE FLAMMABLE LIQUID N.O.S. / UN1993 | 002 | DM | 100 | G | 214 |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
1.1 [illegible] 90%-85%
1.2 OIL----------10%-5%
2.1 ISOPROPYL ALCOHOL-80%-75%
2.2 oil----------20%-10%
3.1 Petroleum oil 40%
XH 3.2 Isopropyl Alcohol 40%
3.3 Ketones 20%

K. Handling Codes for Wastes Listed Above
a. 01
b. 99
c. 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

6497+6497+6498

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 | Signature | Date (Month Day Year) |
|---|---|---|
| CHUCK [illegible] | [signature] | 5 12 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| ED GUTIERREZ | | 5 12 86 |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| William R. Walters | [signature] | 06 13 86 |

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 80641

Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

(Form designed for use on elite (12-pitch) typewriter.)

# FORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD04111230 | 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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91355

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366061

B. State Generator's ID: CAD04162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.

6. US EPA ID Number: CAD008302003

C. State Transporter's ID: 63581

D. Transporter's Phone: (818)334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 West First Street
Azusa, Ca. 91702

10. US EPA ID Number: CAD008300903

G. State Facility's ID:

H. Facility's Phone: X (818) 334-5117

| 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 FLAMMABLE LIQUID N.O.S./Flammable Liquid U 1993 | 1 2 | DM | 600 | G | 214 |
| b. WASTE COMBUSTIBLE LIQUID N.O.S./ Combustibl Liquid NA1993 | 0 1 | DM | 50 | G | 214 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
1.1 Stoddard Solvent-----86%-85%
1.2 Oil----------15%-14%
2.1 Triethylene Glycol----------95%-90%
2.2 Water---------- 5%-10%

K. Handling Codes for Wastes Listed Above
A - 01
B - 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

BL-6820 6821

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: CHUCK YOUNGJOHN | Signature: [signature] | Date: Month 07 Day 01 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JONALD NEDWARDS | Signature: [signature] | Date: Month 07 Day 01 Year 86

18. Transporter 2 Acknowledgement or 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: William R Walters | Signature: William R Walters | Date: Month 07 Day 01 Year 86

GENERATOR

TRANSPORTER

FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89541

...are Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

...form designed for use on elite (12-pitch) typewriter.)

# ...RM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD041162330 | | | |

**Generator's Name and Mailing Address**

HR TEXTRON
10445 Glenoaks Blvd.
Pacoima Ca. 91331
4. Generator's Phone ( 818 ) 896-2411

**A. State Manifest Document Number:** 84366058

**B. State Generator's ID:** CAD041162330

| 5. Transporter 1 Company Name | 6. US EPA ID Number | C. State Transporter's ID | D. Transporter's Phone |
|---|---|---|---|
| ASBURY ENK OIL COMPANY | CAD[illegible]277[illegible]36 | 7 | 321-1392 |
| 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 | 10. US EPA ID Number | G. State Facility's ID | H. Facility's Phone |
|---|---|---|---|
| DEMENNO/KERDON<br>2000 Alameda Ave.<br>Compton, Ca. 90222 | CAT080013352 | | (213) 537-7100 |

| 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 OIL N.O.S. Combustible Liquid NA1270 | 001 | TT | 1000 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

**J. Additional Descriptions for Materials Listed Above**

[illegible]-----35%-30%
[illegible]-----70%-65%

**K. Handling Codes for Wastes Listed Above**

**15. Special Handling Instructions and Additional Information**

USE GLOVES AND GOGGLES WHEN HANDLING

**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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

**17. Transporter 1 Acknowledgement of Receipt of Materials**

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MIKE BUTCHER | | 2 14 86 |

**18. Transporter 2 Acknowledgement or 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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

GENERATOR

TRANSPORTER

FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

**Yellow: GENERATOR RETAINS**

84 80541

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.: CAD041162330
Manifest Document No.: 00000

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 84366054

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: ASBURY OIL COMPANY

6. US EPA ID Number: CAD[illegible]2827703[illegible]

C. State Transporter's ID: 708176

D. Transporter's Phone: 321-1392

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
DEMMENO/KERDON
2000 Alameda Ave.
Compton, Ca. 90222

10. US EPA ID Number: CAD000013352

G. State Facility's ID: CAT000013352

H. Facility's Phone: (213) 537-7100

| 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 ~~XXX~~ OIL N.O.S. Combustible Liquid NA1270 | 001 | TT | 670 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[illegible] OIL----------35%-30%
[illegible] OIL----------70%-65%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date Month Day Year |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| KEVIN [illegible] | [illegible] | [illegible] |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| KEVIN [illegible] | [illegible] | [illegible] |

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 | Signature | Date Month Day Year |
|---|---|---|
| | | |

GENERATOR

TRANSPORTER

FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 89541

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.: CAD041162330 | 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
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 84366050

B. State Generator's ID

C. State Transporter's ID: 20709

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO. | 6. US EPA ID Number: CAD008302903

D. Transporter's Phone: (818)334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 West First Street
Azusa, Ca. 91702

10. US EPA ID Number: CAD008302903

G. State Facility's ID

H. Facility's Phone: (818) 334-5117

| 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 FLAMMABLE LIQUID N.O.S./Flammable Liquid UN1993 | 01 | DM | 600 | | 214 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
[redacted]
[redacted]

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Date (Month Day Year) |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

18. Transporter 2 Acknowledgement of 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 | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 89541

Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

*...designed for use on elite (12-pitch) typewriter.)*

# ...ORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CA9[illegible] Manifest Document No.

2. Page 1 of 1

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

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
PACOIMA,CA. 91331

4. Generator's Phone ( 818 ) 899-411

A. State Manifest Document Number: 86208394

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.

6. US EPA ID Number: CAD[illegible]

C. State Transporter's ID: 708712

D. Transporter's Phone: (818)334-5117

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
OIL AND SOVENT PROCESS CO.
1704 West First Street
Azusa , Ca. 91702

10. US EPA ID Number: CAD[illegible]2903

G. State Facility's ID

H. Facility's Phone: (813) 334-5117

| 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. XXX HAZARDOUS WASTE LIQUID N.O.S. / ORM-E NA9188 | 006 | DT | 12500 | G | 211 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
FREON----------85%-80%
OIL----------20%-15%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YANGJEAN | Signature | Month 11 Day 1 Year 8[illegible]

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ED GUERRERO | Signature | Month 11 Day 1 Year 8[illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | 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 | Signature | Month Day Year

86208394

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

...fare Agency

...d for use on elite (12-pitch) typewriter.)

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# ...HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD041162330 | 86208386 | | |

**3. Generator's Name and Mailing Address**
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

**4. Generator's Phone** ( 818 ) 896-2411

**A. State Manifest Document Number** 86208386

**B. State Generator's ID** CAD041162330

**5. Transporter 1 Company Name** RHO-CHEM CORPORATION

**6. US EPA ID Number** CAD009836772

**C. State Transporter's ID** 64289

**D. Transporter's Phone** (213) 776-6233

**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**
RHO-CHEM CORPORATION
425 Isis Ave.
Inglewood, Ca. 90301

**10. US EPA ID Number** CAD008304432

**G. State Facility's ID**

**H. Facility's Phone** (213) 776-6233

| 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 ORM-A LIQUID N.O.S. "RQ" | 5 | DM | 250 | G | 211 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

**J. Additional Descriptions for Materials Listed Above**
111 TRICHLOROETHANE--85%-80%
OIL----------25%-15%
INHIBITOR----------3%--1%

**K. Handling Codes for Wastes Listed Above**
01

**15. Special Handling Instructions and Additional Information**
USE GLOVES AND GOGGLES WHEN HANDLING

**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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| FRED A. PAINTER | | 11 | 12 | 86 |

**17. Transporter 1 Acknowledgement of Receipt of Materials**

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| KENNETH G. ATKINSON | | 11 | 12 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Chet Earley | | 11 | 12 | 86 |

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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.: CAD[illegible]

Manifest Document No.: [illegible]

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
MR TEXTRON
10445 GLENOAKS BLVD.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 86208388

B. State Generator's ID: CAD041162333

5. Transporter 1 Company Name: XXXXXX AUBURY OIL COMPANY

6. US EPA ID Number: [illegible]

C. State Transporter's ID: 708173

D. Transporter's Phone: 321-1392

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
DEMMEMO/KERDON
2[illegible]04 Alameda Ave.
Compton, Ca. 90222

10. US EPA ID Number: CA[illegible]080013352

G. State Facility's ID: CA[illegible]

H. Facility's Phone: (213) 537-7100

| 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 OIL N.O.S. Combustible Liquid NA1270 | 001 | TT | 1580 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL----------35%-30%
CUTTING OIL----------70%-65%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: FRED A. PANTER | Signature: [signature] | Month Day Year: 1[illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ANGEL LICANO | Signature: Angel Licano | Month Day Year: 1[illegible]24[illegible]6

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: [illegible] | Signature: [illegible] | Month Day Year:

GENERATOR

TRANSPORTER

FACILITY

86208388

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

...nia—Health and Welfare Agency
...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. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
ER TEXTRON
10445 Glenoaks Blvd.
PACOIMA, CA. 91331
4. Generator's Phone ( 818) 899-2411

A. State Manifest Document Number: 86208382
B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.
6. US EPA ID Number
C. State Transporter's ID: 708209
D. Transporter's Phone: (818) 334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 West First Street
Azusa, Ca. 9170
10. US EPA ID Number: CAD 008302903
G. State Facility's ID
H. Facility's Phone: (818) 334-5117

| 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 FLAMMABLE LIQUID N.O.S./ Flammable Liquid UN1993 | 012 | D M | 50 | G | 214 |
| b. HAZARDOUS WASTE LIQUID N.O.S./ RM-E NA9187 "RQ" 100 | 009 | D M | 450 | G | 211 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
1.1STODDARD SOLVENT---85%-85%
1.2 Oil----------15%-14%
2.1 FREON----------55%-80%
2.2 OIL----------20%-15%
*"RQ" 100lb.

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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 | Signature | Month Day Year

86208382

OMB no. 2...-00139 Exp. 9/30/88

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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.: CAD041162330 — Manifest Document No.: 86208375

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
1044 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 81 ) 8 6-2 11

A. State Manifest Document Number: 86208375

B. State Generator's ID: CAD 41162330

5. Transporter 1 Company Name: ASBURY OIL COMPANY

6. US EPA ID Number: FAD048277036

C. State Transporter's ID

D. Transporter's Phone: 321-1392

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID: 100176

F. Transporter's Phone

9. Designated Facility Name and Site Address
D MOFFO/KERIO
2 0 Alameda Av.
Compton, Ca. 90 22

10. US EPA ID Number: CAT 8 0 3 5

G. State Facility's ID: CAT 800 12252

H. Facility's Phone: (213) 537-7100

| 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. ASTE OIL [illegible] /Combustible Liquid A 2 0 | 001 | TT | 1480 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
CUTTING OIL----------70%-85%
HYDRAULIC OIL----------35%-30%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: EDDIE JACKSON — Signature: Eddie Jackson — Month Day Year: 12 16 86

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: EDDIE JACKSON — Signature: Eddie Jackson — Month Day Year: 12 16 86

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: [illegible] — Signature: [illegible] — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

86208375

CMB. No. 2[illegible]-0033 Exp. 9/30/88

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

2166-04749

#HYHQ36-008695

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.: CAD041162330 — Manifest Document No.: 00061
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone (818) 89[illegible]-[illegible]411

A. State Manifest Document Number: 86208369
B. State Generator's ID: CAD041162330
C. State Transporter's ID: 708712
D. Transporter's Phone: (818) 334-5117
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAD008302903
H. Facility's Phone: (818) 334-5117

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.
6. US EPA ID Number: CAD008302903
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
OIL AND SOLVENT PROCESS CO.
1704 West First Street
Azusa, Ca. 91702
10. US EPA ID Number: CAD008302903

| 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 FLAMMABLE LIQUID N.O.S./ ~~Flammable Liquid~~ ESD UN 1993 ~~UN 1993~~ | 12 | DM | 600 | G | 214 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
1.1 STODDARD SOLVENT-----28%-85% **RQ* 100lb.
1.2 OIL----------15%-14%

K. Handling Codes for Wastes Listed Above: 01/0001

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
10153

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: JOHN AGORICHAS — Signature: [signature] — Month Day Year: 1 12 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ED GUERRERO — Signature: [signature] — Month Day Year: 1 12 87

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: [illegible] — Signature: [signature] — Month Day Year: [illegible]

GENERATOR — TRANSPORTER — FACILITY

86208369

OMB No. 2050-0039 Exp. 9/30/88

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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.: CAD041162330 — Manifest Document No.: 36538

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd
Pacoima, Ca. 91331

4. Generator's Phone (818) 296-2411

A. State Manifest Document Number: 87136538

B. State Generator's ID: HTH036008695

5. Transporter 1 Company Name: RHO-CHEM Corp.
6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 709955

D. Transporter's Phone: 213-776-6233

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
RHO-CHEM Corp.
425 Isis Ave.
Inglewood, Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364432

H. Facility's Phone: 213-776-6233

| 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 Flammable Liquid N.O.S./UN1993 | 011 | DM | 550 | G | State 213; EPA/Other D001 |
| b. Waste Flammable Liquid N.O.S./UN1993 | 001 | DM | 50 | G | State 212; EPA/Other D001 |
| c. Waste Flammable Liquid N.O.S./UN1993 | 006 | DM | 300 | G | State 213; EPA/Other D001 |
| d. Waste ORM-A Liquid, N.O.S./NA1693 *"RQ" | 001 | DM | 50 | G | State d.211 e.211 |
| e. Hazardous Waste Liquid N.O.S./ORM-E NA9189 | 006 | DM | 300 | G | EPA/Other d.F002 e.F002 |

J. Additional Descriptions for Materials Listed Above
A.1 Stoddard Solvent - 95%
A.2 Oil, Metal fines, Water-5%
B.1 Isopropyl Alcohol - 85%
B.2 Oil - 15%
C.1 JP-5 - 95%
C.2 Water - 5%
D.1 III Trichoeroethane-85%
D.2 Oil - - - - - - - - - 15%
E.1 Freon - - - - - - - - 85%
E.2 Oil - - - - - - - - - 15%

K. Handling Codes for Wastes Listed Above
a. 17-07
b.
c. 8-01
d.

15. Special Handling Instructions and Additional Information *"RQ" 1000

Use gloves and goggles when handling

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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 10 21 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GERALD RIES — Signature: [signature] (25) 46-87 — Month Day Year: 10 21 87

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: Cosme Cerritos — Signature: [signature] — Month Day Year: 10 21 87

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

HY11Q36-008692

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.: CAD041162330 — Manifest Document No.: 008359

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 89 -2411

A. State Manifest Document Number: 86208359

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: OIL AND SOLVENT PROCESS CO.

6. US EPA ID Number: CAD008302903

C. State Transporter's ID: 708711

D. Transporter's Phone: (818) 334-5117

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
OIL AND SOLVENT PROCESS CO.
1704 West First Street
Azusa, Ca. 91702

10. US EPA ID Number: CAD008302903

G. State Facility's ID: CAD008302903

H. Facility's Phone: (818) 334-5117

| 11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)* | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. ~~HAZARDOUS WASTE LIQUID~~ HAZARDOUS WASTE LIQUID N.O.S. / ORM-E NA9189 | 010 | DM | 0500 | G | [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
FREON----------85%--80%
OIL----------20%--15%

K. Handling Codes for Wastes Listed Above: 01/F002

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

BL-11487

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: JOHN AGORICHAS — Signature: [signature] — Month Day Year: 2 12 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DONALD NEDWARDS — Signature: [signature] — Month Day Year: 02 12 87

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: [illegible] — Signature: [signature] — Month Day Year: 02 12 87

86208359

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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. CAD041162330 Manifest Document No. 0[illegible]7

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
BR TEXTRON
10445 GLENOAKS BLVD
PACOIMA, CA 91331

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number 86209707

B. State Generator's ID CAD041162330

C. State Transporter's ID 70[illegible]

D. Transporter's Phone (818)334-5117

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID CAD008302903

H. Facility's Phone (818) 334-5117

5. Transporter 1 Company Name
OIL AND SOLVENT PROCESS CO.

6. US EPA ID Number CAD008302903

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address
OIL AND SOLVENT PROCESS CO
1704 WEST FIRST STREET
AZUSA, CA 91702

10. US EPA ID Number CAD008302903

| 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 FLAMMABLE LIQUID N.O.S./FLAMMABLE LIQUID UN1993 | 12 | DM | 600 | G | Dool 214 |
| b. WASTE ALCOHOL N.O.S./FLAMMABLE LIQUID UN1987 | 1 | DM | 50 | G | Dool 214 |
| c. HAZARDOUS WASTE LIQUID N.O.S./ORM-E NA9189 | 3 | DM | 150 | G | Dool 2[illegible] |
| d. | | | | | |

[illegible]
1.[illegible] OIL 15% - 14% 2.[illegible] OIL - 25%
2.1 ISOPROPYL ALCOHOL - 75% - 70%
2.2 OIL 30% - 25%

[illegible] Handling Codes for Wastes Listed Above
a. 01/D001
b. 01/D001
c. 01/F002

15. Special Handling Instructions and Additional Information
USE GLOVES AND [illegible]
[illegible] x 12[illegible] x 12[illegible]

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: CHUCK YOUNGJOHN | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CJ GUERREAL | Signature | Month Day Year

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: William R Watts | Signature: William R Watts | Month Day Year: 0[illegible]-8[illegible]

GENERATOR

TRANSPORTER

FACILITY

86209707

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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. CAD0141111623314 Manifest Document No. 15519

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 899-9411

A. State Manifest Document Number 86208354

B. State Generator's ID CAD041111816

C. State Transporter's ID 700176

D. Transporter's Phone 323-583-2

E. State Transporter's ID

F. Transporter's Phone

5. Transporter 1 Company Name: ASBURY OIL COMPANY
6. US EPA ID Number: CAD0R2127705216

7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
DENMENO/KERDON
2000 Alameda Ave.
Compton, Ca. 90222

10. US EPA ID Number: CAT080013352

G. State Facility's ID CAT080013352

H. Facility's Phone (213) 537-7100

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. WASTE OIL N.O.S. /Combustible Liquid NA1270 | 01 | TT | 11500 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
HYDRAULIC OIL 85%-30%
CUTTING OIL 70%-85%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK — Signature — Month Day Year: 03 17 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: EDDIE JACKSON — Signature — Month Day Year: 3 17 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: EDDIE JACKSON — Signature — Month Day Year: 3 17 87

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: FRANCISCO HANIEL — Signature — Month Day Year: 03 07 87

GENERATOR

TRANSPORTER

86208354

8700-22 (11/85)
0—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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. CAD041162330365011 — 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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331 818-896-2411

4. Generator's Phone

A. State Manifest Document Number: 87136503

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: RHO-CHEM CORP.

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 20785

D. Transporter's Phone: 213-776-6233

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
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID: CA9008364432

H. Facility's Phone: 213-776-6233

| 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 FLAMMABLE LIQUID N.O.S. UN 1993 | 20 | DM | 1000 | G | State 213 / EPA/Other F003 |
| b. HAZARDOUS WASTE LIQUID N.O.S. ORM-E/NA 9189 | 3 | DM | 150 | G | State 211 / EPA/Other F001 |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A.1 SPAR FUEL, STODDARD SOLVENT - - - - - - 86%
A.2 OIL, WATER, METAL FINES - - - - - - - - 5%
B.1 FREON - - - - - - - - - - - - - - - - - 86%
B.2 OIL - - - - - - - - - - - - - - - - - - 14%

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

15. Special Handling Instructions and Additional Information
WEAR GLOVES AND GOGGLES WHEN HANDLING HAZARDOUS WASTE

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.

GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | | 05 | 24 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| GERALD RIES | Gerald Ries (23) 44115 | 05 | 24 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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.: CAD041162330 — Manifest Document No.: 36521

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 87136521

B. State Generator's ID: HYHQ360086 95

5. Transporter 1 Company Name: RHO-CHEM CORPORATION

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 09185

D. Transporter's Phone: (213)776-6233

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
RHO-CHEM Corporation
425 Isis Ave.
Inglewood, Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364932

H. Facility's Phone: (213) 776-6233

| 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 FLAMMABLE LIQUID N.O.S. / UN1993 | 12 | DM | 600 | G | State 213; EPA/Other CY D001 |
| b. WASTE ORM-A LIQUID N.O.S. * "RQ" / NA1693 | 12 | DM | 600 | G | State 211; EPA/Other F001 |
| c. HAZARDOUS WASTE LIQUID N.O.S. ORM-E / NA9189 | 006 | DM | 275 | G | State 211; EPA/Other F002 |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
A.1 Stoddard Solvent-95%
A.2 Oil, Metal fines, water-5%
B.1 111 Trichloroethane-85% *RQ 1000
B.2 Oil——13%
B.3 Inhibitor——2%
C.1 Freon——86%
C.2 Oil——14%

K. Handling Codes for Wastes Listed Above
a. 5-01
b.
c. 1-07
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 09 16 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GERALD RIES — Signature: [signature] (30) #45962 — Month Day Year: 09 16 87

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: Cosme Cerritos — Signature: [signature] — Month Day Year: 9 16 87

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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.: CAD041162330
Manifest Document No.: 38090

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
H. R. Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 87138090

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: RHO-CHEM Corp.

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 804449

D. Transporter's Phone: 213-776-6233

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
RHO-CHEM Corp.
425 Isis Ave.
Inglewood, Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364432

H. Facility's Phone: 213-776-6233

| 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. *"RQ" WASTE ORM-A LIQUID, N.O.S./NA1693 | 007 | DM | 300 | G | State 211 / EPA/Other F002 |
| b. WASTE FLAMMABLE LIQUID N.O.S./UN1993 | 008 | DM | 375 | G | State 213 / EPA/Other D001 |
| c. HAZARDOUS WASTE LIQUID N.O.S./ORM-E NA9189 | 007 | DM | 350 | G | State 211 / EPA/Other F002 |
| d. WASTE FLAMMABLE LIQUID N.O.S./UN1993 | 002 | DM | 100 | G | State 212 / EPA/Other D001 |

J. Additional Descriptions for Materials Listed Above
A.1 Ill Trichloroethane—85%
A.2 Oil—15%
B.1 Stoddard Solvent—95%
B.2 Oil, Metal Fines, Water—5%
C.1 Freon—85%
C.2 Oil—15%
D.1 Isopropyl Alcohol 85%
D.2 Oil—15%

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

15. Special Handling Instructions and Additional Information
*"RQ" 1000
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNG JONN
Signature: Chuck Young Jonn
Month Day Year: 12 18 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GERALD RIES
Signature: Gerald Ries (24) # 46709
Month Day Year: 12 18 87

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: Cosme Cerritos
Signature: [signature]
Month Day Year: 12 18 87

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

GENERATOR NOTIFICATION TO RHO-CHEM CORPORATION

SHIPMENT OF WASTES RESTRICTED FROM LAND DISPOSAL UNDER 40 CFR 268.7(a)(1)

This notification is submitted by HR TEXTRON to Rho-Chem Corp. in accordance with the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under 40 CFR 268.7(a)(1). According to this final rule, generators of EPA Hazardous Waste Nos. F001 to F005 must provide the following information with each shipment delivered to Rho-Chem Corp.:

1. EPA Hazardous Waste Number(s): F002, D001.
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment 87138090.
4. Waste analysis data (attach if different from Rho-Chem qualification analysis).

CORRESPONDING TREATMENT STANDARD

INSTRUCTIONS: For each solvent waste constituent present in this waste or its extract, check the appropriate box in front of the treatment standard(s) which app

| Solvent Constituent | Treatment Standard, mg/liter (ppm) | | | |
|---|---|---|---|---|
| | Wastewaters containing spent solvents | | All other spent solvent wastes | |
| Acetone | | 0.05 | | 0.59 |
| n-Butyl Alcohol | | 5.0 | | 5.0 |
| Carbon disulfide | | 1.05 | | 4.81 |
| Carbon tetrachloride | | 0.05 | | 0.96 |
| Chlorobenzene | | 0.15 | | 0.05 |
| Cresols and cresylic acid | | 2.82 | | 0.75 |
| Cyclohexanone | | 0.125 | | 0.75 |
| 1,2-Dichlorobenzene | | 0.65 | | 0.125 |
| Ethyl acetate | | 0.05 | | 0.75 |
| Ethyl benzene | | 0.05 | | 0.053 |
| Ethyl ether | | 0.05 | | 0.75 |
| Isobutanol | | 5.0 | | 5.0 |
| Methanol | | 0.25 | | 0.75 |
| Methylene chloride | | 0.20 | | 0.96 |
| Methylene chloride (from the pharamaceutical industry) | | 12.7 | | 0.96 |
| Methyl ethyl ketone | | 0.05 | | 0.75 |
| Methyl isobutyl ketone | | 0.05 | | 0.33 |
| Nitrobenzene | | 0.66 | | 0.125 |
| Pyridine | | 1.12 | | 0.33 |
| Tetrachloroethylene | | 0.079 | | 0.05 |
| Toluene | | 1.12 | | 0.33 |
| 1,1,1 Trichloroethane | | 1.05 | X | 0.41 |
| 1,1,2-Trichloro-1,2,2-trifluoroethane | | 1.05 | X | 0.96 |
| Trichloroethylene | | 0.062 | | 0.091 |
| Trichlorofluromethane | | 0.05 | | 0.96 |
| Xylenes | | 0.05 | | 0.15 |

Dilute wastewaters containing ≥1,000 mg/l and <10,000 mg/l liquid HOC's* must be treated to <1,000 mg/l•
Wastewaters that are not diluted and contain ≥1,000 mg/l liquid HOC's* must be incinerate
Solid HOC's* ≥1,000 mg/kg must be incinerated+

*HOC's that are listed in 268 app.III
+Restriction effective 7/8/89
•If wastes are rendered non-liquid, they are no longer considered restricted wastes.

Signature (authorized by generator) | CHUCK YOUNGJOHN Name (print or type) | 12-18-87 Date

State of California—Health and Welfare Agency
Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

HYHQ 76-00[illegible]
Department of Health Services
Toxic Substances Control Division
Sacramento, California

OMB no. 2050-0039 Exp. 9/30/88

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] | Manifest Document No. [illegible]
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 89-2411

A. State Manifest Document Number: 86208370
B. State Generator's ID: CAD[illegible]
C. State Transporter's ID: [illegible]
D. Transporter's Phone: (805) [illegible]
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (619) 238-0024

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC
6. US EPA ID Number: [illegible]

7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894506

| 11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)* | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. WASTE COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 0 0 1 | TT | [illegible] | [illegible] | D001 [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

Additional Descriptions for Materials Listed Above
WATER—[illegible]—86%-82%
SOLUBLE CUTTING OIL—[illegible]—10%-7%
STODDARD SOLVENT—[illegible]—[illegible]%
HALOGENATED ORGANICS—Trace amount

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] | Signature: [illegible] | Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE REINA | Signature: Mike Reina | Month Day Year: 9 10 87

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: | Signature: | Month Day Year:

86 208370
86 208370

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW. GENERATOR RETAINS

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.: CAD041162330 — Manifest Document No.: 08367

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 89[illegible]-1411

A. State Manifest Document Number: 86208367

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000622636

C. State Transporter's ID: 108541

D. Transporter's Phone: (805) 251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, Ca. 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID: CAD095894556

H. Facility's Phone: (619) 233-0424

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 01500 | G | D001 [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
~~MAXXX~~ WATER----------[illegible]
SOLUBLE CUTTING OIL---[illegible]
STODDARD SOLVENT----[illegible]
HALOGENATED ORGANICS--Trace amount

K. Handling Codes for Wastes Listed Above: 15

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

DOT E 8822

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: JOHN AGORICHAS — Signature: [signature] — Month Day Year: 1 2 0 8 7

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: LARRY KAMIRE — Signature: [signature] — Month Day Year: 0 1 2 0 8 7

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: JUAN J NAVARRETE — Signature: [signature] — Month Day Year: 0 1 2 0 8 7

86208367

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

HYH036-008695 XXXXXX

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. CAD041116222 Manifest Document No. 00000

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima Ca. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number 86208355

B. State Generator's ID CAD041152330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.

6. US EPA ID Number: CAD000628636

C. State Transporter's ID 78037

D. Transporter's Phone (805)241-3797

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
PACIFIC TREATMENT CORP.
2198 MAIN STREET
SAN DIEGO, Ca. 92113

10. US EPA ID Number: CAD0058945 6

G. State Facility's ID

H. Facility's Phone (619) 238-0424

| 11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)* | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. WX WASTE COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 1700 | G | D001 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

I. Additional Descriptions for Materials Listed Above
WATER----------[illegible]
SOLUBLE CUTTING OIL-----10%-7%
STODDARD SOLVENT---------1%--1%
HALOGENATED ORGANICS----Trace amount

J. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK [illegible] | Signature: [signature] | Month Day Year: 9 21 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIKE [illegible] | Signature: [signature] | Month Day Year: 9 21 87

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 | Signature | Month Day Year

GENERATOR

TRANSPORTER

FACILITY

86208355

OMB No. 2050-0039 Exp. 9/30/87

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

#HYHQ36-008695

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
Manifest Document No.: 08360
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( 812 ) 896-2411

A. State Manifest Document Number: 86208360
B. State Generator's ID: CAD041162330
C. State Transporter's ID: 708529
D. Transporter's Phone: (805) 251-3737
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (619) 233-0424

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
PACIFIC TREATMENT CORP.
2190 MAIN STREET
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD098045[illegible]6

| 11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)* | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. WASTE COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, HA1993 | 001 | TT | [illegible] | | D001 [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

GENERATOR

9. Additional Descriptions for Materials Listed Above
WATER----------[illegible]
SOLUBLE CUTTING OIL--------[illegible]
STODDARD SOLVENT----------[illegible]
HALOGENATED ORGANICS------Trace amount

10. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
DOT E - 7476

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: [illegible] | Signature: [illegible] | Month Day Year: [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | 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: | Signature: | Month Day Year:

86 208360

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW. GENERATOR RETAINS

81-623

#HYHQ36-008695

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. CAD041162330 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
MR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 86209705

B. State Generator's ID: CAD041162330

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 70858

D. Transporter's Phone: (805)251-3737

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
CHEM-TECH SYSTEMS INC.
3650 East 26th Street
Vernon Ca. 90023

10. US EPA ID Number: CAT080033681

G. State Facility's ID

H. Facility's Phone: (213) 288-5056

| 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 NA9189 | 001 | TT | 1750 | G | [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER [illegible]
SOLUBLE CUTTING [illegible]
STODDARD SOLVENT [illegible]
HALOGENATED ORGANICS—Trace amount

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information DOTE7476

Use Gloves and Goggles when handling

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: JOHN AGORICHAS | Signature: John Agorichas | Month Day Year: 03 27 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIKE REINA | Signature: Mike Reina | Month Day Year: 03 27 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

TTO < 100 g/L

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: Jerry Godek Chem. Tech Sys. | Signature: Jerry Godek | Month Day Year: 03 27 87

86209705

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

# YHQ36-008695
Department of Health Services
Toxic Substances Control Division
Sacramento, California

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.: CAD041116233 — Manifest Document No.: 08353
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone (818) 896-2421

A. State Manifest Document Number: 86208353
B. State Generator's ID: CAD041162330
C. State Transporter's ID: 108522
D. Transporter's Phone: (805)251-3737
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (213) 268-5058

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PLUMBING
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
CHEM-TECH SYSTEMS INC.
3850 East 26th Street
Vernon Ca. 90023
10. US EPA ID Number: CAT080033081

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid, NA1993 | 001 | TT | 1170 | G | Dool 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

13. Additional Descriptions for Materials Listed Above
WATER ---------- [illegible]
SOLUBLE CUTTING OIL ---------- 10%-7%
STODDARD SOLVENT ---------- 1%-1%
HALOGENATED ORGANICS--Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
[illegible]476

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: [illegible] — Signature: [signature] — Month Day Year: 03 04 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE [illegible] — Signature: [signature] — Month Day Year: 03 04 87

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: — Signature: — Month Day Year:

86208353
86208353

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW. GENERATOR RETAINS

#HYHQ86-008695

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.: [illegible]
Manifest Document No.: [illegible]
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 86208350
B. State Generator's ID: CAD041162390

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.
6. US EPA ID Number: CA[illegible]

C. State Transporter's ID: 708529
D. Transporter's Phone: (805) 251-3737

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
CHEM-TECH SYSTEMS INC.
3650 East 26th Street
Vernon, Ca. 90023

10. US EPA ID Number: CAT080033681

G. State Facility's ID:
H. Facility's Phone: (213) 268-5056

| 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 COMBUSTIBLE LIQUID N.O.S. Combustible Liquid NA199 | 001 | T | [illegible] | G | D001 [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------[illegible]
SOLUBLE CUTTING OIL------10%--7%
STODDARD SOLVENT----------1%--1%
HALOGENATED ORGANICS------Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
DOT E - 7476

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: CHUCK [illegible]
Signature: [signature]
Month Day Year: 03 13 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: TOM [illegible]
Signature: [signature]
Month Day Year: 03 13 87

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:
Signature:
Month Day Year:

GENERATOR

TRANSPORTER

FACILITY

86208350

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW: GENERATOR RETAINS

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. CAD041162330 Manifest Document No. 09709

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca.

4. Generator's Phone ( 818 ) 896-2411

A. State Manifest Document Number: 86209701

B. State Generator's ID: HYHQ30-008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 708528

D. Transporter's Phone: (805) 251-3737

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
CHEM-TECH SYSTEMS INC.
3650 East 2 th Street
Vernon, CA. 90023

10. US EPA ID Number: CAT 80033081

G. State Facility's ID

H. Facility's Phone: (213) 288-5056

| 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 NA9189 | 001 | TT | 1850 | G | 223 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WATER----------85%-92%
SOLUBLE CUTTING OIL---10%--7%
STODDARD SOLVENT---<1%--<1%
HALOGENATED ORGANICS--Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLIN

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: CHUCK [illegible] | Signature: [signature] | Month Day Year: 09 15 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIKE REINA | Signature: Mike Reina | Month Day Year: 09 15 87

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 | Signature | Month Day Year

86209701

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW. GENERATOR RETAINS

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).*

87 -1154

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. C A D 0 4 1 1 6 2 3 3 0 3 | Manifest Document No. 6 5 0 4

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
Textron(SR)
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone 818-896-2411

A. State Manifest Document Number 87136504

B. State Generator's ID H Y H Q 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6
C. State Transporter's ID 708529
D. Transporter's Phone (805)251-3737

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
Chem-Tech Systems Inc.
3650 East 28th St.
Vernon, Ca. 90023
10. US EPA ID Number: C A T 0 8 0 0 3 3 6 8 1
G. State Facility's ID
H. Facility's Phone (213) 288-3737

| 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 NA9189 | 0 0 1 | T T | 1 1 8 0 0 | G | State CA 223 / EPA/Other |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER - - - - - - - - - - - - - - - - 86%-82%
SOLUBLE CUTTING OIL - - - - - - - - - 10%--7%
STODDARD SOLVENT- - - - - - - - - - - <1%-<1%
HALOGENATED ORGANICS - - - - - - - - - TRACE AMOUNT

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN | Signature | Month Day Year: 10 15 26 87

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: TOM MARTIN | Signature | Month Day Year: 10 15 26 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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: Jerry Goodek Chem-Tech Syst | Signature: Jerry Goodek | Month Day Year: 10 26 87

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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.: CAD041162330 — Manifest Document No.: 09696

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 896-[illegible]411

A. State Manifest Document Number: 86209696

B. State Generator's ID: HYH036-008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 708529

D. Transporter's Phone: (805)251-3737

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
CHEM-TECH SYSTEMS INC.
3650 East 28th Street
Vernon, Ca. 90023

10. US EPA ID Number: CAT080033681

G. State Facility's ID:

H. Facility's Phone: (213) 288-5056

| 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 NA9189 | 001 | TT | 1800 | G | 223 NON RCRA |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

[illegible] for Materials Listed Above
[illegible]
[illegible] CUTTING OIL-[illegible]
[illegible] SOLVENT-[illegible]
HALOGENATED ORGANICS--Trace amount

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month Day Year |
|---|---|---|
| CHUCK [illegible] | [signature] | 05 06 87 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| TOM MARTIN | [signature] | 05 06 87 |

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 | Signature | Month Day Year |
|---|---|---|
| | | |

86209696

DHS 8022 A (11/85)
(EPA 8700—22)

YELLOW GENERATOR RETAINS

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).

87-1349

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 65110

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, (CA.) 91331 818-896-2411

4. Generator's Phone

A. State Manifest Document Number: 87136511

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 708528

D. Transporter's Phone: 805-251-3737

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
CHEM-TECH SYSTEMS INC.
3650 EAST 28TH ST.
VERNON, CA. 90023

10. US EPA ID Number: CAT080033681

G. State Facility's ID:

H. Facility's Phone: 213-288-3737

| 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 NA9189 | 001 | TT | 1800 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER - - - - - - - - - - - - - 86% - - 82%
SOLUBLE CUTTING OIL - - - - - 10% - - 7%
STODDARD SOLVENT - - - - - - - <1% - - < 1%
HALOGENATED ORGANICS - - - - - TRACE AMOUNT

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature: Chuck Youngjohn — Month Day Year: 06 18 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ — Signature: Larry Ramirez — Month Day Year: 06 18 87

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: Jerry Godel Chem-Tech Syst. — Signature: Jerry Godel — Month Day Year: 06 18 87

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

4

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. CAD041116233013511 — 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
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone 818-896-2411

A. State Manifest Document Number 87136510

B. State Generator's ID EXHQ360086968

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636

C. State Transporter's ID 804731

D. Transporter's Phone (805)251-3737

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
CHEM-TECH SYSTEMS INC.
3650 EAST 28TH ST
VERNON, CA. 90023
10. US EPA ID Number: CAT080033681

G. State Facility's ID

H. Facility's Phone 213-288-3737

| 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 NA9189 | 001 | TT | 1600 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER ---------- 86%--82%
SOLUBLE CUTTING OIL ---------- 10%---7%
STODDARD SOLVENT ---------- 4%---1%
HALOGENATED ORGANICS ---------- TRACE AMOUNT

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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.

GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGSMAN | | 1 | 16 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL POPP | | 01 | 16 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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.: CAD0411 62330
Manifest Document No.: 36520

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 87136520

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 804733

D. Transporter's Phone: 805 251-3737

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
CHEM-TECH SYSTEMS INC.
3650 East 26th Street
Vernon, Ca. 90023

10. US EPA ID Number: CAT080033681 (CY) XXXXXXXXXXXXXXXXXXXXXXXX

G. State Facility's ID:

H. Facility's Phone: (213) 268-5056

| 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 NA9189 | 001 | TT | 1825 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——86%—82%
SOLUBLE CUTTING OIL——10%—7%
STODDARD SOLVENT——1%—1%
HALOGENATED ORGANICS——Trace amount

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN
Signature: [signature]
Month Day Year: 08 31 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ
Signature: [signature]
Month Day Year: 08 31 87

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: J. ARTURO PEREZ FOR CHEM-TECH
Signature: J. Arturo Perez
Month Day Year: 08 31 87

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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.: CAD041162330 — Manifest Document No.: 36514

2. Page 1 of

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD
PACOIMA, CA. 91331 818-896-2411

A. State Manifest Document Number: 87136514

B. State Generator's ID: HYHQ360086915

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 804731

D. Transporter's Phone: 805-251-3737

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
CHEM-TECH SYSTEMS INC
3550 EAST 28TH ST.
VERNON, CA. 90023

10. US EPA ID Number: CAT080033681

G. State Facility's ID:

H. Facility's Phone: 213-288-3737

| 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 NA9189 | 001 | TT | 1800 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER - - - - - - - - - - - - - - - - 86%--82%
SOLUBLE CUTTING OIL - - - - - - - - 10%---7%
STODDARD SOLVENT - - - - - - - - - - 1%---1%
HALOGENATED ORGANICS - - - - - - - TRACE AMOUNT

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: Chuck Young John — Signature: [signature] — Month Day Year: 03 05 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry Kennedy — Signature: Larry Kennedy — Month Day Year: 03 05 87

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: — Signature: — Month Day Year:

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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.: CAD041162330 — Manifest Document No.: 36527

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331 818-896-2411

4. Generator's Phone

A. State Manifest Document Number: 87136527

B. State Generator's ID: NYH036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.
6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 804732

D. Transporter's Phone: 805-251-3737

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
CHEM-TECH SYSTEMS
3650 EAST 26TH ST.
VERNON, CA. 90023

10. US EPA ID Number: CAT080033631

G. State Facility's ID

H. Facility's Phone: 213-268-5056

| 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 NA9189 | 001 | TT | 1800 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER - - - - - - - - - - - - - - - - - - - - - - 86%—82%
SOLUBLE CUTTING OIL - - - - - - - - - - - - - - 10%—7%
STODDARD SOLVENT - - - - - - - - - - - - - - - 1%—1%
HALOGENATED ORGANICS - - - - - - - - - - - - - TRACE AMOUNT

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 09 25 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ — Signature: [signature] — Month Day Year: 09 25 87

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 — Signature — Month Day Year

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

MARTIN
INDUSTRIAL PUMPING INC.

P.O. Box 1128, Canyon Country, CA 91351
Telephone (805) 251-3737

INVOICE
No 1331

HR TEXTRON.

EPA I.D. No.
CAD000628636

Date 9-25-87

Pacoima CA Zip

WASTE HAULER
REGISTRATION NO. 335

Time Out

Time In

Elapsed Time

MANIFEST #

Address

City Zip By

| Description | Price | Total |
|---|---|---|
| Pump waste soluable oil. Haul to chemTech. For Disposal. | | 540.00 |
| DISPOSAL FEES | | 1566.30 |
| RECEIVED ACCOUNTS PAYABLE SEP 30 1987 APPROVED FOR PAYMENT BY [signature] 10-2-87 | | |

Other Information

22710
Customer's P.O. Number

HR TEXTRON
Authorized by

Customer's Signature

DATE
Total Charges 2106.30

**TERMS AND CONDITIONS**

WARRANTIES: Customer expressly warrants that the information provided on the Uniform Hazardous Waste Manifest is complete and accurate.

INDEMNITY: Customer shall indemnify MARTIN INDUSTRIAL PUMPING, INC. against all losses on account of claims of injury to persons or damage to property, including attorney's fees, which may result in any way due to Customer providing incomplete or inaccurate information regarding materials being transported and/or information provided on the Uniform Hazardous Waste Manifest. Said Customer shall further be responsible for all costs incurred by MARTIN INDUSTRIAL PUMPING, INC. due to incomplete or inaccurate information provided which results in the disposal site's refusal to accept the waste for disposal. Customer assumes all liability for overweight fines levied by the State.

ATTORNEY'S FEES AND COSTS: If Customer fails to pay the total charges pursuant to the invoice or the additional terms set forth therein, and it becomes necessary to obtain the services of an attorney to collect the amount owed, then MARTIN INDUSTRIAL PUMPING, INC. shall be entitled to attorney's fees and costs in collecting said amount owed.

INTEREST ON OBLIGATION: If Customer fails to make total payment within fifteen (15) days from the date of the invoice, then MARTIN INDUSTRIAL PUMPING, INC. shall be entitled to interest at the rate of 1.5% per month on the amount owed until paid in full.

1800 gallons
$1.17/gallon

**CHEM-TECH SYSTEMS, INC.** № 002620
**TRIPLE J TREATMENT CENTER**
**3650 E. 26th Street, Los Angeles, CA 90023**
**(213) 268-5056**

## WEIGHMASTER'S CERTIFICATE OF WEIGHT AND MEASURE

This is to certify that the following described merchandise was weighed, measured or counted by a public weighmaster, and his signature is a recognized authority of accuracy as prescribed by Chapter 7 (commencing with Section 12700) of Division 5 of the California Business and Professions Code administered by the Division of Measurement Standards of the Department of Food and Agriculture of the State of California.

| TRANSPORTER | GENERATOR |
|---|---|
| MARTIN | H.R. TEXTRON |
| **POINT OF ORIGIN** | **WEIGHED AT** |
| DACOIMA, CA. | TRIPLE J PACIFICATION CORP<br>3650 EAST 26TH STREET<br>VERNON, CA 90023 |

| GROSS WT. (TONS) | TARE WT. (TONS) | NET WT. (TONS) |
|---|---|---|
| | | |

| HAZARDOUS ☒ NON-HAZARDOUS ☐ | WASTE TYPE | HAZ. MANIFEST NO. |
|---|---|---|
| | NA 9189 | 8713527 |

| TRUCK LIC. NO. | TRAILER LIC. NO. | TRANS. EPA NO. |
|---|---|---|
| 2X12285 | WS 6176 | CAD000628636 |

BY CHEM-TECH SYS. INC
~~TRIPLE J PACIFICATION FACILITY CORP.~~

DEPUTY

DATE 9/25/87

DRIVER'S SIGNATURE

**FOR OFFICE USE ONLY**

SPECIFIC GRAVITY

1. _____ lbs.

@ _____

2. Hazardous Waste Fee

_____ Tons @ _____

3. WASH OUT (15 minutes)

4. @ $100.00 per 1/2 Hr.

TOTAL $ 100.00

A service fee of 1½ percent per month (18% per annum) shall be charged on all 30 days past due accounts. In the event this account becomes delinquent and it is necessary to institute legal proceedings, purchaser agrees to pay reasonable attorney's fee and court costs.

---

**CHEM-TECH SYSTEMS, INC.** № 002615
**TRIPLE J TREATMENT CENTER**
**3650 E. 26th Street, Los Angeles, CA 90023**
**(213) 268-5056**

## WEIGHMASTER'S CERTIFICATE OF WEIGHT AND MEASURE

This is to certify that the following described merchandise was weighed, measured or counted by a public weighmaster, and his signature is a recognized authority of accuracy as prescribed by Chapter 7 (commencing with Section 12700) of Division 5 of the California Business and Professions Code administered by the Division of Measurement Standards of the Department of Food and Agriculture of the State of California.

| TRANSPORTER | GENERATOR |
|---|---|
| MARTIN | H.R. TEXTRON |
| **POINT OF ORIGIN** | **WEIGHED AT** |
| DACOIMA, CA. | TRIPLE J PACIFICATION CORP<br>3650 EAST 26TH STREET<br>VERNON CA 90023 |

| GROSS WT. (TONS) | TARE WT (TONS) | NET WT (TONS) |
|---|---|---|
| 51240 | 36870 | 14370 |

| HAZARDOUS ☒ NON-HAZARDOUS ☐ | WASTE TYPE | HAZ MANIFEST NO |
|---|---|---|
| | NA 9189 | 8713527 |

| TRUCK LIC NO | TRAILER LIC NO | TRANS EPA NO |
|---|---|---|
| 2X12285 | WS 6176 | CAD000628636 |

BY CHEM-TECH SYS INC
~~TRIPLE J PACIFICATION FACILITY CORP~~
WEIGHMASTER

DEPUTY

DATE (9/25/87

TIME 1105

DRIVER'S SIGNATURE

**FOR OFFICE USE ONLY**

SPECIFIC GRAVITY 0.989

1. 8.25 lbs.

@ _____

2. Hazardous Waste Fee

_____ Tons @ _____

3. _____

4. _____

TOTAL $ _____

A service fee of 1½ percent per month (18% per annum) shall be charged on all 30 days past due accounts. In the event this account becomes delinquent and it is necessary to institute legal proceedings, purchaser agrees to pay reasonable attorney's fee and court costs.

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

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.: CAD041162330 | 316536

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
4. PACOIMA, CA. 91331 818-896-2411

A. State Manifest Document Number: 87136536
B. State Generator's ID: 19030600869 5
C. State Transporter's ID: 80473 2
D. Transporter's Phone: 805-251-3737

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.
6. US EPA ID Number: CAD000628636

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
CHEM-TECH SYSTEMS
3650 EAST 26TH ST
VERNON, CA. 90023
10. US EPA ID Number: CAT080033681

G. State Facility's ID
H. Facility's Phone: 213-268-5056

| 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 NA9189 | 001 | TT | 11810 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER — 85%—82%
CUTTING OIL — 10%—7%
CHLORINATED SOLVENT — 1%—1%
HALOGENATED ORGANICS — TRACE AMOUNT

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | Chuck Youngjohn | 11 | 16 | 87 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| LARRY RAMIREZ | Larry Ramirez | 11 | 01 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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

YELLOW: GENERATOR RETAINS

**INSTRUCTIONS ON THE BACK**

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).*

87-2240

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A D 0 4 1 1 6 2 3 3 0 — Manifest Document No. 3 6 5 4 3

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks blvd.
Pacoima, Ca. 91331

4. Generator's Phone 818 896-2411

A. State Manifest Document Number 87136543

B. State Generator's ID H Y H Q 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.

6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6

C. State Transporter's ID 804731

D. Transporter's Phone (805) 251-3737

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
CHEM-TECH SYSTEMS
3650 EAST 26th ST
VERNON, CA. 90023

10. US EPA ID Number: C A T 0 8 0 0 3 3 6 8 1

G. State Facility's ID

H. Facility's Phone 213 268-5056

| 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 NA9189 | 001 | TT | 2825 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——66%-82%
SOLUBLE CUTTING OIL——10%--7%
STODDARD SOLVENT——1%-11%
HALOGENATED ORGANICS——Trace amount

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

15. Special Handling Instructions and Additional Information
[illegible]
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | | 11 | 02 | 87 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | | 10 | 16 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Jerry Goodell Chem-Tech Syst. | Jerry Goodell | 11 | 02 | 87 |

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

GENERATOR

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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.: CAD041162330
Manifest Document No.: 316549
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( ) 818-896-2411

A. State Manifest Document Number: 87136549
B. State Generator's ID: HYH036008695
C. State Transporter's ID: 8C4732

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.
6. US EPA ID Number: CAD000628636
D. Transporter's Phone: 805-251-3737

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
CHEM-TECH SYSTEMS
3650 EAST 26TH ST.
VERNON, CA. 90023
10. US EPA ID Number: CAT080033681
G. State Facility's ID:
H. Facility's Phone: 213-268-5056

| 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 NA9189 | 001 | TT | 02290 | G | State 223<br>EPA/Other NON-RCRA |
| b. | | | | | State<br>EPA/Other |
| c. | | | | | State<br>EPA/Other |
| d. | | | | | State<br>EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER - - - - - - - - - - - - - - - - - 66%-82%
SOLUBLE CUTTING OIL - - - - - - - - - - - - - - - - 10%—7%
STODDARD SOLVENT - - - - - - - - - - - - - - - - - 1%—1%
HALOGENATED ORGANICS - - - - - - - - - - - - - - TRACE AMOUNT

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month Day Year |
|---|---|---|
| CHUCK [illegible] | [signature] | 11 [illegible] 7 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| LARRY RAMIREZ | [signature] | 11 9 87 |

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 | Signature | Month Day Year |
|---|---|---|
| | | |

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C A D 0 4 1 1 6 2 3 3 0 | Manifest Document No.: 3 8 0 9 7

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone (818) 896-2411

A. State Manifest Document Number: 87138097

B. State Generator's ID: H Y H 0 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping Co.
6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6
C. State Transporter's ID: 30473
D. Transporter's Phone: 805-251-3737

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
Chem-Tech Systems Inc.
3650 East 26th St.
Vernon, Ca. 90023
10. US EPA ID Number: C A T 0 8 0 0 3 3 6 8 1
G. State Facility's ID
H. Facility's Phone: 213-268-5056

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. Hazardous waste liquid N.O.S./ORM-E NA9189 | 0 0 1 | T T | 0 1 9 0 | G | State 223<br>EPA/Other NON-RCRA |
| b. | | | | | State<br>EPA/Other |
| c. | | | | | State<br>EPA/Other |
| d. | | | | | State<br>EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water - - - - - - - - - - - - - - - - - - - - 84% - 82%
Soluble Cutting Oil - - - - - - - - - - - - - - 10% — 7%
Stoddard Solvent - - - - - - - - - - - - - - - 1% — 1%
Halogenated Organics - - - - - - - - - - - - - Trace Amount

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | | 1 1 | 1 7 | 8 7 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL M. [illegible] | | 1 1 | 1 7 | 8 7 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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.: CAD041162330
Manifest Document No.: 36546
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( ) 818-896-2411

A. State Manifest Document Number: 87136546
B. State Generator's ID: HYHQ3c6008695

5. Transporter 1 Company Name: Martin Industrial Pumping Co.
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 804733
D. Transporter's Phone: 805-251-3737

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
Chem-Tech Systems Inc.
3650 East 26th St.
Vernon, Ca. 90023
10. US EPA ID Number: CAT080033681
G. State Facility's ID:
H. Facility's Phone: 213-268-5056

| 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 NA9189 | 001 | TT | 01,260 | G | State 223 / EPA/Other Non-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Solids - - - - - - 12%
Oil - - - - - - - 22%
Water - - - - - - 66%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling.

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: [illegible] Signature: [signature] Month Day Year: 11 11 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [signature] Month Day Year: 11 12 87

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: Signature: Month Day Year:

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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. C A D 0 4 1 1 6 2 3 3 0 | Manifest Document No. 3 8 0 9 3

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone 818 ) 896-2411

A. State Manifest Document Number 87138093

B. State Generator's ID H Y H 0 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping Co.

6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6

C. State Transporter's ID 804753

D. Transporter's Phone 805-251-3737

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
Chem-Tech Systems Inc.
3650 East 26th st.
Vernon, Ca. 90023

10. US EPA ID Number: C A T 0 8 0 0 3 3 6 8 1

G. State Facility's ID

H. Facility's Phone 213-268-5056

| 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 NA9189 | 001 | TT | 1PP | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
[illegible] - - - - - - - - - - - - - - - - 86%—82%
Mineral Cutting Oil - - - - - - - - - - - - 10%—7%
Xylene Solvent - - - - - - - - - - - - - - 4%—1%
Halogenated Organics - - - - - - - - - - - Trace Amount

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | | 1 | 20 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL M. POPP | | 1 | 20 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

GENERATOR

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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).*

87-2663

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| C A D 0 4 1 1 6 2 3 3 0 | 3 8 0 8 9 | | |

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( ) 818-890-9380

A. State Manifest Document Number: 87138089
B. State Generator's ID: H Y H 0 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping Co. INC
6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6
C. State Transporter's ID: 804731
D. Transporter's Phone: 805-251-3737

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
Chem-Tech Systems Inc.
3650 East 26th St.
Vernon, Ca. 90023
10. US EPA ID Number: C A T 0 8 0 0 3 3 6 8 1
G. State Facility's ID
H. Facility's Phone: 213-268-5056

| 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 NA9189 | 0 0 1 | T T | 0 1 2 5 5 | G | State 223<br>EPA/Other NON-RCRA |
| b. | | | | | State<br>EPA/Other |
| c. | | | | | State<br>EPA/Other |
| d. | | | | | State<br>EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water — 86%—82%
Soluble Cutting Oil — 10%—7%
Stoddard Solvent — <1%—1%
Halogenated Organics — Trace Amount

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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.

GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHNS | | 1 | 22 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL POPP | | 1 | 22 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| LARRY YORK | | 1 | 23 | 87 |

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| ELEO A. NIGHETTI JR | | 1 | 23 | 87 |

RECEIVED
JAN 1988
PURCHASING

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. 9-88) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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).

2166-04749

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
Manifest Document No.: 38083

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( ) 818-890-9380

A. State Manifest Document Number: 87198083
B. State Generator's ID: HY NQ 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping Co.
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 804732
D. Transporter's Phone: 805-251-3737

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
Chem Tech Systems Inc.
3650 East 26th St.
Vernon, Ca. 90023

10. US EPA ID Number: CAT080033681
G. State Facility's ID:
H. Facility's Phone: 213-268-5056

| 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 NA9189 | 001 | TT | 2000 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

[illegible] 86—82%
[illegible] 10%—7%
[illegible] Solvent 1%—1%
[illegible] Organics Trace Amount

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

15. Special Handling Instructions and Additional Information

Use gloves and goggles when handling

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: Chuck Youngjohn
Signature: [signature]
Month Day Year: 11 1988

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Carl Popp
Signature: [signature]
Month Day Year: 11 8 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:
Signature:
Month Day Year:

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) [illegible] editions are obsolete.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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.: CAD041162330
Manifest Document No.: 38080
2. Page 1 of 4
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone: 818-890-9380

A. State Manifest Document Number: 87138080
B. State Generator's ID: HYHG36008695

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 801732
D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID:
H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 1800 | G | State 223 EPA/Other Non-RCRA |
| b. | | | | | State EPA/Other |
| c. | | | | | State EPA/Other |
| d. | | | | | State EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water ——— 86% — 82%
Soluble Cutting Oil ——— 10% — 7%
Stoddard Solvent ——— 4% — 1%
Halogenated Organics ——— Trace Amount

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: CHUCK YOUNGJOHN
Signature: Chuck Youngjohn
Month Day Year: 02 [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ
Signature: Larry Ramirez
Month Day Year: 02 03 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:
Signature:
Month Day Year:

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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).*

116227

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041116213 — Manifest Document No. 38017

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
818-890-9380

4. State Manifest Document Number 87138076

B. State Generator's ID WXH036008695

5. Transporter 1 Company Name: Martin Industrial Pumping — 6. US EPA ID Number: CAD000628836

C. State Transporter's ID 80473

D. Transporter's Phone 805-251-3737

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
Gibson Oil and Refining Co.Inc.
Commercial Drive
Bakersfield, Ca. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID CAD980883177

H. Facility's Phone 805-327-0413

| 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 NA9189 | 001 | TT | 18010 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

RECEIVED
FEB 29 1988
PURCHASING

J. Additional Descriptions for Materials Listed Above
Water — 86% — 82%
Soluble Cutting Oil — 10% — 7%
Stoddard Solvent — 1% — 1%
Halogenated Organics — Trace Amount

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling 8033-2

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | | 10 | 21 | 88 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL PAPP | | 02 | 27 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Larry Cook | | 02 | 25 | 88 |

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. 9-88) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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. CAD041162330 — Manifest Document No. 35075

2. Page 1 of — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
Generator's Phone: 818-890-9380

A. State Manifest Document Number: 87138075

B. State Generator's ID: HTH 0360086955

5. Transporter 1 Company Name: Martin Industrial Pumping Inc — 6. US EPA ID Number: CAD000628836

C. State Transporter's ID: 804753

D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD980883177

H. Facility's Phone: 805-327-0413

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | L Waste No. |
|---|---|---|---|---|---|
| a. Hazardous Waste Liquid N.O.S./ORM-E NA9189 | 001 | TT | 1800 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water — 86—82%
Soluble Cutting Oil — 10%—7%
Stoddard Solvent — 1%—1%
Halogenated Organics — Trace Amount

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

3033-3

RECEIVED
MAR 10 1988
PURCHASING

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.

GENERATOR — Printed/Typed Name: PAUL FLORES — Signature: Paul Flores — Month Day Year: 03 07 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE REINA — Signature: Mike Reina — Month Day Year: 03 07 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — 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: Larry Cook — Signature: Larry Cook — Month Day Year: 03 15 88

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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. CAD041162830 — Manifest Document No. 38070

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
MR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( 818-890-9380

A. State Manifest Document Number: 8713870

B. State Generator's ID: HXH036008695

5. Transporter 1 Company Name — 6. US EPA ID Number
Martin Industrial Pumping Inc. — CAD000628885

C. State Transporter's ID: 604731

D. Transporter's Phone: 805-251-3737

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 — 10. US EPA ID Number
Gibson Oil and Refining Co. Inc.
Commercial Drive
Bakersfield, Ca. 93308 — CAD980830877

G. State Facility's ID

H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 01/800 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water — 86—92%
Soluble cutting oil — 10%—7%
Chlorinated solvent — 1%—1%
Halogenated Organics — Trace Amount

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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.

GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGSON | | 04 | 14 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL POPP | | 04 | 04 | 88 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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.: CAD041162330 — Manifest Document No.: 38058

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331 818-890-9380

4. Generator's Phone

A. State Manifest Document Number: 87138058

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: Martin Industrial Pumping Inc.

6. US EPA ID Number: CAD000628836

C. State Transporter's ID: 804733

D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co. Inc.
Commercial Drive
Bakersfield, Ca. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD[illegible]

H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 1800 | G | State 223; EPA/Other NON - RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water——————86%——82%
Soluble Cutting Oil ————10%——7%
Stoddard Solvent——————<1%——1%
Halogenated Organics—Trace Amount

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

RECEIVED APR 25 1988 PURCHASING

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: Chuck Youngjohn — Signature: [signature] — Month Day Year: 04 20 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Carl Dodd — Signature: [signature] — Month Day Year: 04 20 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Martin — Signature: [signature] — Month Day Year: [illegible]

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: John Halstead — Signature: [signature] — Month Day Year: 04 20 88

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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).

117825

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
Manifest Document No.: 38060
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331 818-890-9380

4. Generator's Phone

A. State Manifest Document Number: 87138060
B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: Martin Industrial Pumping Inc.
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 804733
D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CAD980883177
H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 01800 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water - - - - - - - - - - - - 86—82%
Soluble Cutting Oil - - - - 10%—7%
Stoddard Solvent - - - - - - 1%—1%
Halogenated Organics — Trace Amount

8033-2

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: Paul Flores
Signature: [signature]
Month Day Year: 05 09 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Carl Popp
Signature: [signature]
Month Day Year: 05 07 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: Larry Cook
Signature: [signature]
Month Day Year: 05 09 88

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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).*

H 88-0866

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 38055

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone: 818-890-9380

A. State Manifest Document Number: 87138055
B. State Generator's ID: HYHQ360086955

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.
6. US EPA ID Number: CAD000[redacted]
C. State Transporter's ID: 804732
D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD019587516
H. Facility's Phone: 619-233-0424

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. DOO7 DOT-E 7476 HAZARDOUS WASTE LIQUID N.O.S./ORM-E NA9189 "RQ" | 001 | TT | 1200 | G | State 223 / EPA/Other D007 ~~NON-RCRA~~ |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
LEAD - - 1-5 ppm
SOLIDS ----------12%
OIL----------22%
WATER----------66%
CHROME - - - - 200 - 400 ppm

K. Handling Codes for Wastes Listed Above
a. 15 b. c. d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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.

GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK [illegible] | [signature] | | | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL POPP | [signature] | 05 | 05 | 88 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [signature] | | | |

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

Form Approved OMB No 2050-0039 (Expires 3-31-87)
Please print or type. (Form designed for use on elite (12-pitch typewriter)

Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD041162330 | Manifest Document No: 38056

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 896-2411

A. State Manifest Document Number: 87138056
B. State Generator's ID: HYH 03 60 08 69 5

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING CO.
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 804733
D. Transporter's Phone: 805-251-3737

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
CHEM-TECH SYSTEMS INC.
3650 EAST 26TH ST.
VERNON, CA. 90023
10. US EPA ID Number: CAT080033681
G. State Facility's ID:
H. Facility's Phone: 213-268-5056

| 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 NA9189 | 001 | TT | 01200 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J Additional Descriptions for Materials Listed Above
SOLIDS ----------12%
OIL _____ 22%
WATER_____ 66%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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.

GENERATOR

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| CHUCK YOUNGSOHN | | 10 5 0 5 8 6 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| CARL POPP | | 05 05 86 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| | | |

FACILITY

19. Discrepancy Indication Space
REJECTED @ LTG - INTENTIONAL

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| [illegible] JOHNSON | | 05 05 86 |

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 3006, Sacramento, CA 95812

INSTRUCTIONS ON THE BACK

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.: C A D 0 4 1 1 6 2 3 3 0
Manifest Document No.: 3 8 0 4 7

2. Page 1 of 1

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

RECEIVED
JUN 13 1988
PURCHASING

3. Generator's Name and Mailing Address
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( 818 ) 890-9330

A. State Manifest Document Number: 87138047

B. State Generator's ID: H Y H Q 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping Inc.

6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6

C. State Transporter's ID: 804731

D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co. Inc.
Commercial Drive
Bakersfield, Ca. 93308

10. US EPA ID Number: C A D 9 8 0 8 8 3 1 7 7

G. State Facility's ID: [illegible]

H. Facility's Phone: 805-327-0413

| 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 NA9189 | 0 0 1 | T T | 0 1 6 0 0 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water----------86%----82%
Soluble cutting oil----10%--7%
Stoddard solvent----- 1%-- 1%
Halogenated Organics--Trace amount

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

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] | Signature: [signature] | Month Day Year: 06 06 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID SUTHERLAND | Signature: [signature] | Month Day Year: 06 06 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: Larry Cook | Signature: [signature] | Month Day Year: [illegible]

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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).

111804

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
Manifest Document No.: 38044
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331 818-890-9380

A. State Manifest Document Number: 87138044
B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 804733
D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CAD980883177
H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 01850 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER ——————86%——82%
SOLUBLE CUTTING OIL —— 10%—17%
STODDARD SOLVENT ——— 1%——1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNG JOHN
Signature: [signature]
Month Day Year: 06 28 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL POPP
Signature: [signature]
Month Day Year: 06 28 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: JOHN HOLLIEND
Signature: [signature]
Month Day Year: 06 28 88

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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).

JUL 18 1988

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162 Manifest Document No. 330380 43

PURCHASE

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331 818-890-9330

4. Generator's Phone

A. State Manifest Document Number: 87138043

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING INC.

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 804731

D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO. INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD980883177

H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 1800 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above

Water ----------86%----82%
Soluble Cutting Oil ------10%----27%
Stoddard Solvent----------<1%---- 1%

K. Handling Codes for Wastes Listed Above

a. 01 b. c. d.

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING

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: Chuck [illegible] Signature: [signature] Month Day Year: 07 14 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [signature] Signature: [signature] Month Day Year

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: [signature] Signature: [signature] Month Day Year: 07 14 88

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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. CAD041162330 — Manifest Document No. 3033

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca.
4. Generator's Phone (818) 899-3380

A. State Manifest Document Number: **87138033**
B. State Generator's ID: H Y H 0 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: CAD 006286366
C. State Transporter's ID:
D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca 93308
10. US EPA ID Number: CAD 088083177
G. State Facility's ID
H. Facility's Phone: 805-327-0413

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. Hazardous Waste Liquid N.O.S./ORM-E NA9189 | 001 | TT | 17PP | G | State 223 / EPA NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
**Water ——————86%——82%**
**Soluble Cutting Oil—10%——17%**
**Stoddard Solvent—— <1%—<1%**

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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 | Signature | Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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 | Signature | Month Day Year

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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.: CAD041162330
Manifest Document No.: 380312
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (318) 890-9320

A. State Manifest Document Number: 87138032

B. State Generator's ID: HYHD360086951

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 906303

D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield Ca. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID:

H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 1800 | G | State 223; EPA/Other NON - RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water ——————86%—82%
Soluble Cutting Oil——10%—17%
Stoddard Solvent———<1%-<1%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: [illegible] Signature: [illegible] Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry Ramirez Signature: Larry Ramirez Month Day Year 00 00 00

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: Signature: Month Day Year

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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.: CAD041162330 — Manifest Document No.: 9-6-88
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: HR TEXTRON, 10445 GLEN OAKS BL, PACOIMA CA 91331
4. Generator's Phone: (818) 890 9380
A. State Manifest Document Number: 87861183
B. State Generator's ID: HYH936-008695
5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 906308
D. Transporter's Phone: 805 251 3737
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: ADTEC II, 1700 MAYWELL RD, CHULA VISTA CA 92011
10. US EPA ID Number: CAT080010101
G. State Facility's ID: CAT080010101
H. Facility's Phone: (619) 421-1175

| 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. RQ WASTE CORROSIVE LIQUID NOS CORROSIVE MATERIAL (D007) UN 2837 | 003 | DF | 00165 | G | State 723; EPA/Other D002/D007 |
| b. WASTE FLAMABLE LIQUID NOS FLAMABLE LIQUID UN 1993 | 001 | DM | 0000½ | G | State 214; EPA/Other F001 |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above: Δ 90% WATER 5% SODIUM BISULFATE 10% CHROMIC (SMUT GO) 1/SPL 3 (LAB PACK 4 PINTS 1 EA) — VESSEL SOLUTION PYRIDINE / SULFUR DIOXIDE / METHANOL MIX

K. Handling Codes for Wastes Listed Above: a. 15; b. 14/07; c.; d.

15. Special Handling Instructions and Additional Information: Goggles, Gloves, Protective Gear

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: Chuck [illegible] — Signature: [signature] — Month Day Year: 10 12 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Edward Aylwell — Signature: [signature] — Month Day Year: 09 26 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space: [illegible]

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year: [illegible]

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.

INSTRUCTIONS ON THE BACK

RECEIVED
OCT 17 1988
PURCHASING

State of Calif[illegible]nia—Health and Welfare Agency
Form Approve[illegible] OMB No. 2050—0039 (Expires 9-30-88)
Please print [illegible] 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.: C A D 0 4 1 1 6 2 3 3 0
Manifest Document No.: 3 8 0 1 8

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
818-890-9380

A. State Manifest Document Number: 87138018

B. State Generator's ID: H Y H 0 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: C A D [illegible] 6 3 6

C. State Transporter's ID: [illegible]

D. Transporter's Phone: 805-251-3737

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
Gibson Oil & Refining Co. Inc.
Commercial Drive
Bakersfield, Ca. 93[illegible]
10. US EPA ID Number: C A D [illegible] 1 7 7

G. State Facility's ID:

H. Facility's Phone: 805-327-0413

| 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. California Regulated Waste Only | 001 | TT | 04551 | G | State 023 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above

| | | | |
|---|---|---|---|
| Water | 99% | Zinc | 68.25mg/L |
| Solids | 1% | Chromium | 41.25mg/L |
| Stoddard Solvent | <1% | Copper | 7.00mg/L |
| Cadmium | 0.44mg/L | Lead | 1.11mg/L |
| | | Nickel | 1.55mg/L |

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

15. Special Handling Instructions and Additional Information

Use gloves and goggles when handling

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 | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

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 | Signature | Month Day Year

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.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

PatChem Laboratories TEL No.805-581-9325 Nov.18,88 14:29 P.01

# PATCHEM LABORATORIES

2205 First St. #108 • Simi Valley, CA 93065 • (805) 581-9006

Customer: Martin Industrial Pumping
P.O. Box 1128
Canyon Country, CA 91351

Attention: Mr. Tom Martin

Sample Date: 11-18-88

Report Date: 11-18-88

Sample I.D.: 8811-464612

Subject: H.R. Textron - Underground Rain Tank

Method: Sample was analyzed per EPA Test Methods for Evaluating Solid Waste, Physical/Chemical Methods (SW-846).

Results:

| PARAMETER | EPA METHOD | DETECTION LIMIT | ANALYSIS |
|---|---|---|---|
| Cadmium | 7130 | 0.02 mg/L | 0.44 mg/L |
| Chromium | 7190 | 0.05 mg/L | 41.25 mg/L |
| Copper | 7290 | 0.02 mg/L | 7.00 mg/L |
| Lead | 7380 | 0.02 mg/L | 1.11 mg/L |
| Nickel | 7520 | 0.02 mg/L | 1.55 mg/L |
| Zinc | 7950 | 0.02 mg/l | 69.25 mg/L |

Comments: Sample was prepared per Method 3050 of SW-846.

Respectfully Submitted,

Pat Brueckner

Pat Brueckner
Chemist

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.: CAD041162330 — Manifest Document No.: 38014

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd., Pacoima, CA 91331

4. Generator's Phone (818) 890-9360

A. State Manifest Document Number: 87138014

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: Martin Industrial Pumping

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 906303

D. Transporter's Phone: 805-251-3737

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
Pacific Treatment Corp.
2190 Main Street
San Diego, CA 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID: CAD0[illegible]

H. Facility's Phone: 619-233-0424

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. Hazardous Waste Liquid N.O.S./ORM-E NA9189 "RQ" | 001 | FT | 01360 | G | State 223; EPA/Other Doc7 |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above

Solids--------12%
Oil----------22%
Water---------65%
Stoddard Solvent--<1-1%
Chrome------200 - 400 ppm
Lead--------1 --5 ppm

K. Handling Codes for Wastes Listed Above
a. 15
b.
c.
d.

15. Special Handling Instructions and Additional Information

Use gloves and goggles when handling.

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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 11 29 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES D. SMITH — Signature: [signature] — Month Day Year: 11 29 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: — Signature: — Month Day Year:

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

RECEIVED
JAN 3 1989
CHASING

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.: CAD041162880
Manifest Document No: 38020
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone: 313-390-9380

A. State Manifest Document Number: 87138020
B. State Generator's ID: HYH036008695
C. State Transporter's ID:
D. Transporter's Phone: 805-251-3737
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 805-327-0413

5. Transporter 1 Company Name: Martin Pumping Industrial
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
Gibson Oil & Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: CAD980883177

| 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 NA9139 | 001 | TT | 180 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water----------86%---82%
Soluble Cutting Oil----10%---17%
Stoddard Solvent--------<1%-- <1%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: CHUCK YOUNGTOHN
Signature: Chuck Youngtohn
Month Day Year: 11 10 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry [illegible]
Signature: [illegible]
Month Day Year: [illegible]

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:
Signature:
Month Day Year:

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

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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)

H-88-1913 H88-1913

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C A D 0 4 1 1 6 2 3 3 0
Manifest Document No: 3 8 0 2 1

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd., Pacoima, CA 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 87138021

B. State Generator's ID: H X H 0 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6
C. State Transporter's ID: 906303
D. Transporter's Phone: 805-251-3737

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
Pacific Treatment Corp.
2190 Main Street
San Diego, CA 92113
10. US EPA ID Number: C A D 0 1 9 5 8 9 4 5 5 6
G. State Facility's ID: CAD095894556 D-Y
H. Facility's Phone: 619-233-0424

| 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 NA9189 "RQ" | 001 | TT | 11600 | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Solids--------12% Chrome--------200 - <400 ppm
Oil----------22% Lead----------1 --5 ppm
Water---------66%
STODDARD SOLVENT - <1 - 1%

K. Handling Codes for Wastes Listed Above
a. 15 b.
c. d.

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling.

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.

GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | | 11 | 9 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| JAMES D. SMITH | | 11 | 10 | 88 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| BS M RECEIVED | | 11 | 10 | 88 |

DEC 2 1988

PURCHASING

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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. | 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

4. Generator's Phone ( )

A. State Manifest Document Number: 87862553

B. State Generator's ID

5. Transporter 1 Company Name | 6. US EPA ID Number | C. State Transporter's ID

D. Transporter's Phone

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 | 10. US EPA ID Number | G. State Facility's ID

H. Facility's Phone

| 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. | | | | | State / EPA/Other |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above

QTips, chemical wipes, and adsorbant contaminated with alodine

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

15. Special Handling Instructions and Additional Information

gloves, goggles, ...

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 | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

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 | Signature | Month Day Year

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

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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: CAD041162330 — Manifest Document No.: 38008

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone: 805-900-9580

A. State Manifest Document Number: 87138008

B. State Generator's ID: HYHO35008695

5. Transporter 1 Company Name: Martin Industrial Pumping — 6. US EPA ID Number: CAD000528636

C. State Transporter's ID: 706210

D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308

10. US EPA ID Number: CAD930883177

G. State Facility's ID: CAD930883177

H. Facility's Phone: 805-327-0413

| 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. California Regulated Waste Only | 001 | TT | 41600 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above

| | | | |
|---|---|---|---|
| Water | 99% | Zinc | 68.25mg/L |
| Solids | 1% | Chromium | 41.25mg/L |
| Stoddard Solvent | 1% | Copper | 7.00mg/L |
| Cadium | 0.44mg/L | Lead | 1.11mg/L |
| | | Nickel | 1.55mg/L |

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

0033-2

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: [illegible] — Signature: [signature] — Month Day Year: 12 21 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE REINA — Signature: [signature] — Month Day Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

RECEIVED
JAN 3 1989
PURCHASING

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name — Signature — Month Day Year

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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.: CAD041162330 — Manifest Document No.: 62532

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: HK Textron, 10445 Glenoaks Blvd., Pacoima, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 87862532

B. State Generator's ID: HYHQ36098695

5. Transporter 1 Company Name: Martin Industrial Pumping

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 906-309 / 906-312

D. Transporter's Phone: (805) 251-3937

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: Appropriate Technologies, 1200 Maxwell Rd., Chula Vista, CA. 90744

10. US EPA ID Number: CAT080010101

G. State Facility's ID: CAT080010101

H. Facility's Phone: [illegible]

| 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 Nitric Acid 40% or L. Corrosive Material NA 1760 | 002 | DF | 000050 | G | State 792 / EPA/Other D002/D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above: 11 A.) Waste 63% Water and Nitric Acid, and 2% Sodium Dichromate <35%

K. Handling Codes for Wastes Listed Above: a. 15 b. c. d.

15. Special Handling Instructions and Additional Information: Glove Goggles, Protective Clothing

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: Chuck Youngjohns — Signature: [signature] — Month Day Year: 12 01 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Donald D. Dyer — Signature: [signature] — Month Day Year: 12 01 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: [illegible] — Signature: — Month Day Year:

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BAC

RECEIVED
JAN 5 1989
PURCHASING

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.: CAD041162330 — Manifest Document No.: 38026

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 87138026

B. State Generator's ID:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number:

C. State Transporter's ID: 906 319

D. Transporter's Phone: (805) 251-2737

7. Transporter 2 Company Name:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
CASMALIA RESOURCES
NTU RP
CASMALIA CA

10. US EPA ID Number: CAD020748125

G. State Facility's ID: CAD020748125

H. Facility's Phone:

GENERATOR COPY
Return to 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. NA9189 HAZARDOUS WASTE SOLID N.O.S. ORM-E | 1 | DF | 00001 | Y | State 561 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. SODIUM METASILICATE 20%
SODIUM CARBONATE - 50%
(1 OVERPACK) (See Analysis)
(PH - 10)

K. Handling Codes for Wastes Listed Above
a. [illegible] b. [illegible]
c. d.

15. Special Handling Instructions and Additional Information
[illegible] GLOVES AND GOGGLES [illegible]

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: CHUCK [illegible] JOHN — Signature: [signature] — Month Day Year: 10 06 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: EDWARD A POWELL — Signature: [signature] — Month Day Year: 10 06 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: [illegible] — Signature: [illegible] — Month Day Year: [illegible]

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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. | Manifest Document No | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law |
|---|---|---|---|
| CAD061162330 | 38027 | | |

**GENERATOR**

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( ) 818-390-9380

A. State Manifest Document Number: 87138027

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: CAD009062836
C. State Transporter's ID: 706303
D. Transporter's Phone: 805-251-3727

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: CAD983083177
G. State Facility's ID
H. Facility's Phone: 805-327-0413

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. Hazardous Waste Liquid N.O.S./ORM-E NA9189 | 001 | TT | 1375 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water----------86%---82%
Soluble Cutting Oil----10%---17%
Stoddard Solvent------<1%---<1%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

RECEIVED
OCT 10 1988
PURCHASING

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Chuck Ferguson | | 10 | 7 | 88 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

805/327-0413 Telex: 494-9206

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.: CAD041162330
Manifest Document No.: 38011

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca.

4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 87138011

B. State Generator's ID: HYHQ3600 8695

5. Transporter 1 Company Name: Rho-Chem Corp.
6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 810146

D. Transporter's Phone: 213-776-6233

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
Rho-Chem Corp.
425 Isis Ave.
Inglewood, Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364432

H. Facility's Phone: 213-776-6233

| 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 III Trichloroethane, ORM-A RQ 1000 UN2831 F002 | 002 | DM | 100 | G | State 211 / EPA/Other F002 |
| b. Waste ORM-E Liquid, N.O.S., NA9189 F001 | 001 | DM | 50 | G | State 211 / EPA/Other F001 |
| c. Waste Petroleum Naphta, Combustible Liquid, UN1255 | 008 | DM | 400 | G | State 213 / EPA/Other D001 |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. III Trichloroethane --- 85%
Oil ---------- 15%
B. Freon ---------- 90%
Oil---------- 10%
C. Stoddard Solvent- 85%
Oil ---------- 15%

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

15. Special Handling Instructions and Additional Information

Use gloves and goggles when handling

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: [illegible] JOHN
Signature: [signature]
Month Day Year: 12 19 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GERALD KIES
Signature: [signature] (11) #52976
Month Day Year: 12 19 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: JERRY C SADLER
Signature: [signature]
Month Day Year: 12 19 88

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

Yellow- TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

MENT OF WASTES RESTRICTED FROM LAND DISPOSAL UNDER 40 CFR 268.7(a)(1)

...fication is submitted by HR TEXTRON to Rho-Chem Corp. in ...th the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under ...(a)(1). According to this final rule, generators of EPA Hazardous Waste Nos. ...s must provide the following information with each shipment delivered to Rho-...:

1. EPA Hazardous Waste Number(s): F001 F002.
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment 871380111.
4. Waste analysis data (attach if different from Rho-Chem qualification analysis).

## CORRESPONDING TREATMENT STANDARD

NSTRUCTIONS: For each solvent waste constituent present in this waste or its extract, check the appropriate box in front of the treatment standard(s) which apply

| Solvent Constituent | Wastewaters containing spent solvents | All other spent solvent wastes |
|---|---|---|
| Acetone | ☐ 0.05 | ☐ 0.59 |
| n-Butyl Alcohol | ☐ 5.0 | ☐ 5.0 |
| Carbon disulfide | ☐ 1.05 | ☐ 4.81 |
| Carbon tetrachloride | ☐ 0.05 | ☐ 0.96 |
| Chlorobenzene | ☐ 0.15 | ☐ 0.05 |
| Cresols and cresylic acid | ☐ 2.82 | ☐ 0.75 |
| Cyclohexanone | ☐ 0.125 | ☐ 0.75 |
| 1,2-Dichlorobenzene | ☐ 0.55 | ☐ 0.125 |
| Ethyl acetate | ☐ 0.05 | ☐ 0.75 |
| Ethyl benzene | ☐ 0.05 | ☐ 0.053 |
| Ethyl ether | ☐ 0.05 | ☐ 0.75 |
| Isobutanol | ☐ 5.0 | ☐ 5.0 |
| Methanol | ☐ 0.25 | ☐ 0.75 |
| Methylene chloride | ☐ 0.20 | ☐ 0.96 |
| Methylene chloride (from the pharmaceutical industry) | ☐ 12.7 | ☐ 0.96 |
| Methyl ethyl ketone | ☐ 0.05 | ☐ 0.75 |
| Methyl isobutyl ketone | ☐ 0.05 | ☐ 0.33 |
| Nitrobenzene | ☐ 0.66 | ☐ 0.125 |
| Pyridine | ☐ 1.12 | ☐ 0.33 |
| Tetrachloroethylene | ☐ 0.079 | ☐ 0.05 |
| Toluene | ☐ 1.12 | ☐ 0.33 |
| 1,1,1-Trichloroethane | ☐ 1.05 | ☒ 0.41 |
| 1,1,2-Trichloro-1,2,2-trifluoroethane | ☐ 1.05 | ☒ 0.96 |
| Trichloroethylene | ☐ 0.062 | ☐ 0.091 |
| Trichlorofluoromethane | ☐ 0.05 | ☐ 0.96 |
| Xylenes | ☐ 0.05 | ☐ 0.15 |

...ute wastewaters containing ≥1,000 mg/l and <10,000 mg/l liquid HOC's* must be treated ...<1,000 mg/l*

...stewaters that are not diluted and contain ≥1,000 mg/l liquid HOC's* must be incinerated-...ids HOC's* ≥1,000 mg/kg must be incinerated-

*HOC's that are listed in 268 app.III

-Restriction effective 7/8/89

*If wastes are rendered non-liquid, they are no longer considered restricted wastes.

Signature (authorized by generator) | CHUCK YOUNGSCHN (Name (print or type) | 12-19-88 (Date)

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.: CAD041162330 — Manifest Document No.: 38024

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone: 818-980-9380

A. State Manifest Document Number: 87138024

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: Rho-Chem Corp.

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 805364

D. Transporter's Phone: 213-776-6233

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
Rho-Chem Corp.
425 Isis Ave.
Inglewood, Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364432

H. Facility's Phone: 213-776-6223

| 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 III Trichloroethane, ORM-A UN2831 F002 | 004 | DM | 2000 | G | State 211 / EPA/Other F002 |
| b. Waste ORM-E Liquid, NO.S., NA0189 F001 | 006 | DM | 3000 | G | State 211 / EPA/Other F001 |
| c. Waste Petroleum Naphta, Combustible Liquid, UN1255 | 005 | DM | 2500 | G | State 213 / EPA/Other D001 |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above

A. III Trichloroethane ------85%
Oil----------15%
B. Freon----------90%
Oil----------10%
C. Stoddard Solvent--------85%
Oil----------15%

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

15. Special Handling Instructions and Additional Information

Use gloves and goggles when handling

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: Chuck Youngjohn — Signature: [signature] — Month Day Year: 10 27 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Steve Evans — Shift # 51759 — Signature: [signature] (15) — Month Day Year: 10 27 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: — Signature: — Month Day Year:

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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: CAD041162330 — Manifest Document No.: 38084

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone: 818-890-9380

A. State Manifest Document Number: 87138084

B. State Generator's ID: HYH0360086 95

5. Transporter 1 Company Name: Rho-Chem Corp.
6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 810186

D. Transporter's Phone: 213-776-6233

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
Rho-Chem Corp.
425 Isis Ave.
Inglewood, Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364432

H. Facility's Phone: 213-776-6233

| 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. *"RQ" Waste ORM-A Liquid, N.O.S./NA1693 | 007 ~~0012~~ | DM | 350 ~~1400~~ | G | State 211 / EPA/Other F002 |
| b. Waste Flammable Liquid N.O.S./UN1993 | 007 | DM | 350 | G | State 213 / EPA/Other D001 |
| c. *"RQ" Waste ORM-A Liquid, N.O.S./NA1693 | 001 | DM | 50 | G | State 211 / EPA/Other F002 |
| d. *"RQ" Waste ORM-A Liquid N.O.S./NA1693 | 004 | DM | 200 | G | State 211 / EPA/Other F002 |

J. Additional Descriptions for Materials Listed Above
A.1 Freon ----------85%
A.2 Oil ---------- 15%
B.1 Stoddard Solvent 95%
B.2 Oil, Metal Fines, Water - 5%
C.1 Freon ----- 67%
C.2 Oil ------- 15%
C.3 III Trichloroethane 18%

K. Handling Codes for Wastes Listed Above
a. 12-01
b.
c. 7-07
d.

15. Special Handling Instructions and Additional Information
*"RQ" 1000
D.1 III Trichloroethane --85%
D.2 Oil --- 15%
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK [illegible] — Signature: [signature] — Month Day Year: 02 [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard R Parker Sh. Mgr # 47737 — Signature: [signature] (19) — Month Day Year: [illegible]

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: — Signature: — Month Day Year:

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

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

GENERATOR NOTIFICATION TO RHO-CHEM CORPORATION

...DING SHIPMENT OF WASTES RESTRICTED FROM LAND DISPOSAL UNDER 40 CFR 268.7(a)(1)

This notification is submitted by HR TEXTRON to Rho-Chem Corp. in ...rdance with the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under ... CFR 268.7(a)(1). According to this final rule, generators of EPA Hazardous Waste Nos. F001 to F005 must provide the following information with each shipment delivered to Rho-Chem Corp.:

1. EPA Hazardous Waste Number(s): F002, D001.
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment 87138084.
4. Waste analysis data (attach if different from Rho-Chem qualification analysis).

CORRESPONDING TREATMENT STANDARD

INSTRUCTIONS: For each solvent waste constituent present in this waste or its extract, check the appropriate box in front of the treatment standard(s) which apply

| Solvent Constituent | Wastewaters containing spent solvents | All other spent solvent wastes |
|---|---|---|
| Acetone | 0.05 | 0.59 |
| n-Butyl Alcohol | 5.0 | 5.0 |
| Carbon disulfide | 1.05 | 4.81 |
| Carbon tetrachloride | 0.05 | 0.96 |
| Chlorobenzene | 0.15 | 0.05 |
| Cresols and cresylic acid | 2.82 | 0.75 |
| Cyclohexanone | 0.125 | 0.75 |
| 1,2-Dichlorobenzene | 0.65 | 0.125 |
| Ethyl acetate | 0.05 | 0.75 |
| Ethyl benzene | 0.05 | 0.053 |
| Ethyl ether | 0.05 | 0.75 |
| Isobutanol | 5.0 | 5.0 |
| Methanol | 0.25 | 0.75 |
| Methylene chloride | 0.20 | 0.96 |
| Methylene chloride (from the pharamaceutical industry) | 12.7 | 0.96 |
| Methyl ethyl ketone | 0.05 | 0.75 |
| Methyl isobutyl ketone | 0.05 | 0.33 |
| Nitrobenzene | 0.66 | 0.125 |
| Pyridine | 1.12 | 0.33 |
| Tetrachloroethylene | 0.079 | 0.05 |
| Toluene | 1.12 | 0.33 |
| 1,1,1 Trichloroethane | 1.05 | X 0.41 |
| 1,1,2-Trichloro-1,2,2-trifluoroethane | 1.05 | X 0.96 |
| Trichloroethylene | 0.062 | 0.091 |
| Trichlorofluromethane | 0.05 | 0.96 |
| Xylenes | 0.05 | 0.15 |

Dilute wastewaters containing ≥1,000 mg/l and <10,000 mg/l liquid HOC's* must be treated to <1,000 mg/l°

Wastewaters that are not diluted and contain ≥1,000 mg/l liquid HOC's* must be incinerated+

Solid HOC's* ≥1,000 mg/kg must be incinerated+

*HOC's that are listed in 268 app.III

+Restriction effective 7/8/89

°If wastes are rendered non-liquid, they are no longer considered restricted wastes.

[signature] — Signature (authorized by generator)

CHUCK YOUNGJOHN — Name (print or type)

2-12-88 — Date

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: CAD041162330 — Manifest Document No.: 38071

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331 818-890-9380

4. Generator's Phone

A. State Manifest Document Number: 87138071

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: Rho-Chem Corp.

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 810146

D. Transporter's Phone: 213-776-6233

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
Rho-Chem Corp.
425 Isis Ave.
Inglewood, Ca. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID

H. Facility's Phone: 213-776-6233

| 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 ORM-A LIQUID N.O.S./NA1693 | 001 | DM | 00050 | G | State 211; EPA/Other F002 |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
III Trichloroethane ----------85%
Oil----------15%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: Chuck Young Jr. — Signature: [signature] — Month Day Year: 05 25 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Gerald Kies — Signature: [signature] — Month Day Year: 05 25 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 — Signature — Month Day Year

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

SHIPMENT OF WASTES RESTRICTED FROM LAND DISPOSAL UNDER 40 CFR 268.7(a)(1)

This notification is submitted by HR TEXTRON to Rho-Chem Corp. in accordance with the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under 40 CFR 268.7(a)(1). According to this final rule, generators of EPA Hazardous Waste Nos. F001 to F005 must provide the following information with each shipment delivered to Rho-Chem Corp.:

1. EPA Hazardous Waste Number(s): F002.
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment 87138071.
4. Waste analysis data (attach if different from Rho-Chem qualification analysis).

CORRESPONDING TREATMENT STANDARD

INSTRUCTIONS: For each solvent waste constituent present in this waste or its extract, check the appropriate box in front of the treatment standard(s) which apply

| Solvent Constituent | Wastewaters containing spent solvents | All other spent solvent wastes |
|---|---|---|
| Acetone | 0.05 | 0.59 |
| n-Butyl Alcohol | 5.0 | 5.0 |
| Carbon disulfide | 1.05 | 4.81 |
| Carbon tetrachloride | 0.05 | 0.96 |
| Chlorobenzene | 0.15 | 0.05 |
| Cresols and cresylic acid | 2.82 | 0.75 |
| Cyclonexanone | 0.125 | 0.75 |
| 1,2-Dichlorobenzene | 0.55 | 0.125 |
| Ethyl acetate | 0.05 | 0.75 |
| Ethyl benzene | 0.05 | 0.053 |
| Ethyl ether | 0.05 | 0.75 |
| Isobutanol | 5.0 | 5.0 |
| Methanol | 0.25 | 0.75 |
| Methylene chloride | 0.20 | 0.96 |
| Methylene chloride (from the pharamaceutical industry) | 12.7 | 0.96 |
| Methyl ethyl ketone | 0.05 | 0.75 |
| Methyl isobutyl ketone | 0.05 | 0.33 |
| Nitrobenzene | 0.66 | 0.125 |
| Pyridine | 1.12 | 0.33 |
| Tetrachloroethylene | 0.079 | 0.05 |
| Toluene | 1.12 | 0.33 |
| 1,1,1-Trichloroethane | 1.05 | X 0.41 |
| 1,1,2-Trichloro-1,2,2-trifluoroethane | 1.05 | 0.96 |
| Trichloroethylene | 0.062 | 0.091 |
| Trichlorofluoromethane | 0.05 | 0.96 |
| Xylenes | 0.05 | 0.15 |

Dilute wastewaters containing ≥1,000 mg/l and <10,000 mg/l liquid HOC's* must be treated to <1,000 mg/l°
Wastewaters that are not diluted and contain ≥1,000 mg/l liquid HOC's* must be incinerated+
Solid HOC's* ≥1,000 mg/kg must be incinerated+
*HOC's that are listed in 268 app.III
+Restriction effective 7/8/89
°If wastes are rendered non-liquid, they are no longer considered restricted wastes.

Signature (authorized by generator) — CHUCK YOUNGJOHNS (Name (print or type)) — 3-25-88 (Date)

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.: CAD041162330 — Manifest Document No: 31801712

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331 818-899-9380

A. State Manifest Document Number: 87138072

B. State Generator's ID: HYH0360086951

5. Transporter 1 Company Name: Rho-Chem Corp. — 6. US EPA ID Number: CAD010183164482

C. State Transporter's ID: 10415

D. Transporter's Phone: 213-776-6233

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
Rho-Chem Corp.
425 Isis Ave.
Inglewood, Ca. 90301 — 10. US EPA ID Number: CAD010183164662

G. State Facility's ID

H. Facility's Phone: 213-776-6233

| 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 Flammable Liquid N.O.S./UN1993 | 01219 | D M | 14510 | G | State 213 / EPA/Other D001 |
| b. Waste Flammable Liquid N.O.S./UN1993 | 01212 | D M | 11010 | G | State 213 / EPA/Other D001 |
| c. Waste Combustible Liquid N.O.S./NA1993 | 01211 | D M | 1510 | G | State 223 / EPA/Other D001 |
| d. Waste ORM-A Liquid N.O.S./NA1693 | 01014 | D M | 12010 | G | State 211 / EPA/Other F002 |

J. Additional Descriptions for Materials Listed Above
A.1 Stoddard Solvent- 95%
A.2 Oil, Metal Fines, Water - 5%
B.1 JP-5 ------ 97%
B.2 Water ------ 3%
C.1 Ethylbiphenyl - 60%
C.2 Diphenyl Oxide- 15%
C.3 Methylbiphenyl - 15%
C.4 Biphenyl - - - - 3%
C.5 Water - - - - - 4%
D.1 Freon - - - - - 90%
D.2 Oil - - - - - - - 10%

K. Handling Codes for Wastes Listed Above
a. 12-07 b.
c. 4-01 d.

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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.

GENERATOR — Printed/Typed Name: Charles Yeung-Jung — Signature — Month Day Year: 2 12 [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: George Ruiz — Signature — Month Day Year: 2 12 [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — 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 — Signature — Month Day Year

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

HIPMENT OF WASTES RESTRICTED FROM LAND DISPOSAL UNDER 40 CFR 268.7(a)(1)

otification is submitted by H R TEXTRON to Rho-Chem Corp. in e with the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under 68.7(a)(1). According to this final rule, generators of EPA Hazardous Waste Nos. o F005 must provide the following information with each shipment delivered to Rho-Corp.:

1. EPA Hazardous Waste Number(s): D001 F002.
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment 87138072.
4. Waste analysis data (attach if different from Rho-Chem qualification analysis).

CORRESPONDING TREATMENT STANDARD

INSTRUCTIONS: For each solvent waste constituent present in this waste or its extract, check the appropriate box in front of the treatment standard(s) which apply

| Solvent Constituent | Wastewaters containing spent solvents | All other spent solvent wastes |
|---|---|---|
| Acetone | 0.05 | 0.59 |
| n-Butyl Alcohol | 5.0 | 5.0 |
| Carbon disulfide | 1.05 | 4.81 |
| Carbon tetrachloride | 0.05 | 0.96 |
| Chlorobenzene | 0.15 | 0.05 |
| Cresols and cresylic acid | 2.82 | 0.75 |
| Cyclonexanone | 0.125 | 0.75 |
| 1,2-Dichlorobenzene | 0.66 | 0.125 |
| Ethyl acetate | 0.05 | 0.75 |
| Ethyl benzene | 0.05 | 0.053 |
| Ethyl ether | 0.05 | 0.75 |
| Isobutanol | 5.0 | 5.0 |
| Methanol | 0.25 | 0.75 |
| Methylene chloride | 0.20 | 0.96 |
| Methylene chloride (from the pharamaceutical industry) | 12.7 | 0.96 |
| Methyl ethyl ketone | 0.05 | 0.75 |
| Methyl isobutyl ketone | 0.05 | 0.33 |
| Nitrobenzene | 0.66 | 0.125 |
| Pyridine | 1.12 | 0.33 |
| Tetrachloroethylene | 0.079 | 0.05 |
| Toluene | 1.12 | 0.33 |
| 1,1,1 Trichloroethane | 1.05 | X 0.41 |
| 1,1,2-Trichloro-1,2,2-trifluoroethane | 1.05 | X 0.96 |
| Trichloroethylene | 0.062 | 0.091 |
| Trichlorofluoromethane | 0.05 | 0.96 |
| Xylenes | 0.05 | 0.15 |

Dilute wastewaters containing ≥1,000 mg/l and <10,000 mg/l liquid HOC's* must be treated to <1,000 mg/l•
Wastewaters that are not diluted and contain ≥1,000 mg/l liquid HOC's* must be incinerated+
Solid HOC's* ≥1,000 mg/kg must be incinerated+

*HOC's that are listed in 268 app.III
+Restriction effective 7/8/89
•If wastes are rendered non-liquid, they are no longer considered restricted wastes.

Signature (authorized by generator)

CHUCK YOUNGJOHN
Name (print or type)

3/25/88
Date

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.: CAD041162330 — Manifest Document No.: 38052

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331 818-890-9380

4. Generator's Phone

A. State Manifest Document Number: 87138052

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: RHO-Chem Corp.
6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 8[illegible]

D. Transporter's Phone: 213-776-6233

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
RHO-CHEM Corp.
425 Isis Ave.
Inglewood, Ca. 90301
10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364432

H. Facility's Phone: 213-776-6233

| 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 flammable liquid N.O.S./UN1993 | 009 | DM | 1450 | G | State 213 / EPA/Other D001 |
| b. Waste flammable liquid N.O.S./UN1993 | 002 | DM | 1100 | G | State 213 / EPA/Other D001 |
| c. Waste ORM-A Liquid N.O.S./NA1693 | 007 | DM | 1350 | | State 211 / EPA/Other F002 |
| d. Waste ORM-A Liquid N.O.S./NA1693 | 13 | DM | 1150 | G | State 211 / EPA/Other F002 |

J. Additional Descriptions for Materials Listed Above

A.1 Stoddard Solvent --- 95%
A.2 Oil, Metal fines, Water 5%
B.1 JP-5 ---------- 97%
B.2 Water ---------- 3%
C.1 Freon---- 90%
C.2 Oil ---- 10%
D.1 III Trichloeroethane
D.2 Oil 15% 85%

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

15. Special Handling Instructions and Additional Information

Use gloves and goggles when handling

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: CHUCK YOUNG JOHN — Signature: [signature] — Month Day Year: 05 16 93

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: GERALD [illegible] — Signature: [signature] (21) [illegible] — Month Day Year: [illegible]

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: — Signature: [signature] — Month Day Year:

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

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.: C A D 0 4 1 1 6 2 3 3 0
Manifest Document No: 3 8 0 5 4

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 818-890-9330

4. Generator's Phone ( )

A. State Manifest Document Number: 87138054

B. State Generator's ID: H Y H Q 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Rho-Chem Corp.
6. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2

C. State Transporter's ID: 810146

D. Transporter's Phone: 213-776-6233

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
Rho-Chem Corp.
425 Isis Ave.
Inglewood, Ca. 90301

10. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2

G. State Facility's ID: CAD008364432

H. Facility's Phone: 213-776-6233

| 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 flammable liquid N.O.S./UN1993 | 001 | DM | 50 | G | State 212; EPA/Other D001 |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
A.1 Isopropyl Alcohol 85%
A.2 Oil ---------- 15%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: [illegible]
Signature: [signature]
Month Day Year: 05 16 98

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GERALD RIES
Signature: [signature] (1) #47301
Month Day Year: 05 16 98

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: [illegible]
Signature: [signature]
Month Day Year:

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

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS — INSTRUCTIONS ON THE BACK

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: CAD041163130 — Manifest Document No: 38035

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima Ca. 91331
4. Generator's Phone: 818-890-9380

A. State Manifest Document Number: 87138035

B. State Generator's ID: HTH0360086955

5. Transporter 1 Company Name: Rho-Chem Corp.
6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 810184
D. Transporter's Phone: 213-776-6233

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
Rho-Chem
425 Isis Ave.
Inglewood, Ca. 90301
10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364432
H. Facility's Phone: 213-776-6233

| 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 flammable liquid N.O.S. UN1993 | 113 | DM | 1650 | G | State 213 / EPA/Other D001 |
| b. Waste ORM-A Liquid N.O.S. NA1693 | 003 | DM | 1150 | G | State 211 / EPA/Other F002 |
| c. Waste flammable liquid N.O.S. UN1993 | 003 | DM | 1150 | G | State 213 / EPA/Other D001 |
| d. Waste ORM-A Liquid, N.O.S. NA1693 | 002 | DM | 1100 | G | State 211 / EPA/Other F002 |

J. Additional Descriptions for Materials Listed Above
A. Stoddard Solvent --- 85%
Oil - - - - - - - - - - 15%
B. Freon---------- 90%
Oil - - - - - - - - - - 10%
C. JP-5 -------- 95%
Water - - - - - 5%
D. III Trichloroethane 85%
Oil - - - - - - 15%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGSEND | | 09 | 08 | 88 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| ANTHONY GILLIAM | | 09 | 08 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

GENERATOR NOTIFICATION TO RHO-CHEM CORPORATION

REGARDING SHIPMENT OF WASTES RESTRICTED FROM LAND DISPOSAL UNDER 40 CFR 268.7(a)(1)

This notification is submitted by HR TEXTRON to Rho-Chem Corp. in accordance with the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under 40 CFR 268.7(a)(1). According to this final rule, generators of EPA Hazardous Waste Nos. F001 to F005 must provide the following information with each shipment delivered to Rho-Chem Corp.:

1. EPA Hazardous Waste Number(s): F002, D001.
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment 87138035.
4. Waste analysis data (attach if different from Rho-Chem qualification analysis).

CORRESPONDING TREATMENT STANDARD

INSTRUCTIONS: For each solvent waste constituent present in this waste or its extract, check the appropriate box in front of the treatment standard(s) which apply

| Solvent Constituent | Wastewaters containing spent solvents | All other spent solvent wastes |
|---|---|---|
| Acetone | 0.05 | 0.59 |
| n-Butyl Alcohol | 5.0 | 5.0 |
| Carbon disulfide | 1.05 | 4.81 |
| Carbon tetrachloride | 0.05 | 0.96 |
| Chlorobenzene | 0.15 | 0.05 |
| Cresols and cresylic acid | 2.82 | 0.75 |
| Cyclohexanone | 0.125 | 0.75 |
| 1,2-Dichlorobenzene | 0.65 | 0.125 |
| Ethyl acetate | 0.05 | 0.75 |
| Ethyl benzene | 0.05 | 0.053 |
| Ethyl ether | 0.05 | 0.75 |
| Isobutanol | 5.0 | 5.0 |
| Methanol | 0.25 | 0.75 |
| Methylene chloride | 0.20 | 0.96 |
| Methylene chloride (from the pharamaceutical industry) | 12.7 | 0.96 |
| Methyl ethyl ketone | 0.05 | 0.75 |
| Methyl isobutyl ketone | 0.05 | 0.33 |
| Nitrobenzene | 0.66 | 0.125 |
| Pyridine | 1.12 | 0.33 |
| Tetrachloroethylene | 0.079 | 0.05 |
| Toluene | 1.12 | 0.33 |
| 1,1,1 Trichloroethane | 1.05 | X 0.41 |
| 1,1,2-Trichloro-1,2,2-trifluoroethane | 1.05 | X 0.96 |
| Trichloroethylene | 0.062 | 0.091 |
| Trichlorofluromethane | 0.05 | 0.96 |
| Xylenes | 0.05 | 0.15 |

Dilute wastewaters containing ≥1,000 mg/l and <10,000 mg/l liquid HOC's* must be treated to <1,000 mg/l°
Wastewaters that are not diluted and contain ≥1,000 mg/l liquid HOC's* must be incinerated+
Solid HOC's* ≥1,000 mg/kg must be incinerated+

*HOC's that are listed in 268 app.III
+Restriction effective 7/8/89
°If wastes are rendered non-liquid, they are no longer considered restricted wastes.

Signature (authorized by generator)

CHUCK YOUNGJOHN
Name (print or type)

5-8-88
Date

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. CA 3 0 4 1 1 6 2 3 3 0 | Manifest Document No. 3 8 0 2 9

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone ( ) 818-890-9390

A. State Manifest Document Number: 87138029

B. State Generator's ID: H Y H Q 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Rho Chem Corp.

6. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2

C. State Transporter's ID: 805364

D. Transporter's Phone: 213-776-6233

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
Rho-Chem
425 Isis Ave.
Inglewood, Ca. 90301

10 US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2

G. State Facility's ID: Q A D 0 0 8 3 6 4 4 3 2

H. Facility's Phone: 213-776-6233

| 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 Flammable Liquid N.O.S. UN1993 | 001 | D M | 450 | G | State 213 / EPA/Other D001 |
| b. Waste ORM-A Liquid N.O.S. NA1693 | 004 / 008 | D M | 250 | G | State 211 / EPA/Other F002 |
| c. Waste Flammable Liquid N.O.S. UN1993 | 001 | D M | 50 | G | State 213 / EPA/Other D001 |
| d. Waste ORM-A Liquid N.O.S. NA1693 | 001 | D M | 50 | G | State 211 / EPA/Other F002 |

J. Additional Descriptions for Materials Listed Above
A. Stoddard Solvent----85%
Oil----------15%
B. Freon----------90%
Oil----------10%
C. Isopropyl Alcohol---90%
Oil----------10%
D. III Trichloroethane-85%
Oil----------15%

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

15 Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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.

GENERATOR

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| [illegible] | [signature] | [illegible] |

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| JAY GUERRA (17) | Jay Guerra 91355 | 10/21/86 |

18 Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month Day Year |
|---|---|---|
| [illegible] | [signature] | [illegible] |

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. 3-86) Previous editions are obsolete

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

2166-04749

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

# Instructions on the Back

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 99214
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address:
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca.

4. Generator's Phone: 818- 890-9380

A. State Manifest Document Number: 88399214
B. State Generator's ID: NYHQ36008695

5. Transporter 1 Company Name: Rho-Chem Corp.
6. US EPA ID Number: CAD008364432
C. State Transporter's ID: 911266
D. Transporter's Phone: 213-776-6233

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:
Rho-Chem Corp.
425 Isis Ave.
Inglewood, Ca. 90301
10. US EPA ID Number: CAD008364432
G. State Facility's ID: CAD008364432
H. Facility's Phone: 213-776-6233

| 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 ORM-E Liquid, N.O.S. NA9189 F001 | 005 | DM | 250 | G | State 211 / EPA/Other F001 |
| b. Waste III Trichloroethane, ORM-A RQ1000 F002 UN2831 | 003 | DM | 150 | G | State 211 / EPA/Other F002 |
| c. Waste Petroleum Naphta, Combustible Liquid [illegible] | 008 | DM | 400 | G | State 213 / EPA/Other [illegible] |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. Freon——90%
Oil——10%
B. III Trichloroethane—85%
Oil——15%
C. [illegible]

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 03 30 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAY GUERRA (16) — Signature: [signature] 53609 — Month Day Year: 03 03 89

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: JERRY L SADLER — Signature: [signature] — Month Day Year: 03 03 89

Do Not Write Below This Line

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

88399214

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

**Rho-Chem Corp.**
[illegible]nue, Inglewood, CA 90301
[illegible]: (213) 776-6233 • FAX: (213) 645-6379

This notification is submitted by IHR TEXTRON to **Rho-Chem Corp.** in accordance with the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under 40 CFR 268.7(a)(1). According to this final rule, generators of EPA Hazardous Waste Numbers F001 to F005 (list definition on backside) must provide the following information:

1. EPA Hazardous Waste Number(s): F001, F002, D001
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment: 88399214
4. Waste analysis data.

## CORRESPONDING TREATMENT STANDARD

Instructions:

For each solvent waste **constituent present** in this waste or its extract, check the appropriate box in front of the treatment **standard(s) which** apply.

| Solvent Constituent | Treatment Standard (mg/liter) | | | |
|---|---|---|---|---|
| | Wastewaters containing spent solvents | | All other spent solvent wastes | |
| Acetone | 0.05 | X | 0.59 | |
| n-Butyl alcohol | 5.0 | | 5.0 | |
| Carbon disulfide | 1.05 | | 4.81 | |
| Carbon tetrachloride | 0.05 | | 0.96 | |
| Chlorobenzene | 0.15 | | 0.05 | |
| Cresols and cresylic acid | 2.82 | | 0.75 | |
| Cyclohexanone | 0.125 | | 0.75 | |
| 1,2-Dichlorobenzene | 0.65 | | 0.125 | |
| Ethyl acetate | 0.05 | | 0.75 | |
| Ethyl benzene | 0.05 | | 0.053 | |
| Ethyl ether | 0.05 | | 0.75 | |
| Isobutanol | 5.0 | | 5.0 | |
| Methanol | 0.25 | | 0.75 | |
| Methylene chloride | 0.20 | | 0.96 | |
| Methylene chloride (from the pharmaceutical industry | 127 | | 0.96 | |
| Methyl ethyl ketone | 0.05 | | 0.75 | |
| Methyl isobutyl ketone | 0.05 | | 0.33 | |
| Nitrobenzene | 0.66 | | 0.125 | |
| Pyridine | 1.12 | | 0.33 | |
| Tetrachloroethylene | 0.079 | | 0.05 | |
| Toluene | 1.12 | | 0.33 | |
| 1,1,1-Trichloroethane | 1.05 | X | 0.41 | |
| 1,1,2-Trichloro - 1,2,2-trifluoroethane | 1.05 | X | 0.96 | |
| Trichloroethylene | 0.062 | | 0.091 | |
| Trichlorofluoromethane | 0.05 | | 0.96 | |
| Xylene | 0.05 | | 0.15 | |

Signature (Authorized by Generator)

CHUCK YOUNGSCHAN
Name (Print or Type)

3/3/89
Date

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377288

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041116[illegible] — Manifest Document No.: [illegible]
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
ER TEXTRON
10445 GLENOAKS BLVD
PACOIMA, CA. 91331
4. Generator's Phone: 818-890-9380

A. State Manifest Document Number: 88377288
B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: RHO-CHEM CORP.
6. US EPA ID Number: CAD008364432
C. State Transporter's ID: 911266
D. Transporter's Phone: 213-776-6233

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
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301
10. US EPA ID Number: CAD008364432
G. State Facility's ID: CAD008364432
H. Facility's Phone: 213-776-6233

| 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 III TRICHLOROETHANE, ORM-A [illegible] RQ1000 F002 | [illegible] | DM | [illegible] | G | State 211 / EPA/Other F002 |
| b. WASTE ORM-E LIQUID, N.O.S. NA9189 F001 | [illegible] | DM | [illegible] | G | State 211 / EPA/Other F001 |
| c. WASTE PETROLEUM NAPHTA, COMBUSTIBLE [illegible] | [illegible] | DM | [illegible] | G | State 213 / EPA/Other D001 |
| d. WASTE ISOPROPANOL SOLUTION, FLAMMABLE [illegible] | [illegible] | DM | [illegible] | G | State 213 / EPA/Other D001 |

J. Additional Descriptions for Materials Listed Above
A. III TRICHLOROETHANE—85%
OIL—15%
B. FREON—90%
OIL—10%
C. [illegible]
D. [illegible]

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

16.
**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this [illegible] 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 [illegible] 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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 04 24 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEN ATKINSON 54194 — Signature: [signature] (16) — Month Day Year: 04 21 89

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: — Signature: — Month Day Year:

Do Not Write Below This Line

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377290

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77290
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone: 818-890-9380

A. State Manifest Document Number: 88377290
B. State Generator's ID: RYH036008693
C. State Transporter's ID: 911266
D. Transporter's Phone: 213-776-6233

5. Transporter 1 Company Name: RHO CHEM CORP.
6. US EPA ID Number: CAD008364432
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
RHO CHEM
425 ISIS AVE.
INGLEWOOD, CA. 90301

10. US EPA ID Number: CAD008364432
G. State Facility's ID: CAD008364432
H. Facility's Phone: 213-776-6233

| 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 ORM-E LIQUID N.O.S. NA 9189 F001, F001 | 001 | DM | 50 | G | State 223 / EPA/Other F001 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. [redacted]
[redacted]

K. Handling Codes for Wastes Listed Above
b.
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 04 24 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEN ATKINSON 5419 — Signature: [signature] (1) — Month Day Year: 4 24 89

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: — Signature: — Month Day Year:

GENERATOR / TRANSPORTER / FACILITY

3022 A (1/88)
700—22
9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typ...

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's ID: CAD0[illegible] — Manifest Document No.: 77272

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 92331 818-890-9[illegible]

4. Phone

A. State Manifest Document Number: 88377272

B. State Generator's ID: NYH0360086[illegible]

5. Transporter 1 Company Name: RHO-CHEM CORP.
[illegible] Number: [illegible]364432

C. State Transporter's ID: 911265

D. Transporter's Phone: 213-776-6233

7. Transporter 2 Company Name
[illegible] Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301
[illegible] Number: [illegible]4432

G. State Facility's ID: CAD008364432

H. Facility's Phone: 213-776-6233

| 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 III TRICHLOROETHANE, ORM-A [illegible] | 004 | [illegible] | 200 | G | State 211; EPA/Other F002 |
| b. WASTE ORM-E LIQUID, N.O.S., NA9189 [illegible] | 004 | [illegible] | 200 | G | State 211; EPA/Other F001 |
| c. WASTE PETROLEUM NAPHTA, COMBUSTIBLE [illegible] | [illegible] | [illegible] | 450 / 400 | G | State 213; EPA/Other D001 |
| d. WASTE ORM-E LIQUID N.O.S. NA9189, [illegible] | [illegible] | [illegible] | 50 | G | State 223; EPA/Other F001, D001 |

J. Additional Descriptions for Materials Listed Above
A. III TRICHLOROETHANE ——85%
OIL ——15%
B. FREON ——90%
OIL ——10%

[illegible] Wastes Listed Above

15. Special Handling Instructions and Additional Information
IN [illegible]
USE GLOVES AND GOGGLES WHEN HANDLING [illegible]

16.
GENERATOR'S CERTIFICATION: I hereby declare that the [illegible] accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects [illegible] 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 [illegible] toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable [illegible] or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, [illegible] I have made a good faith effort to minimize my waste generation and select the best waste management method that is [illegible]

Printed/Typed Name: CHUCK YOUNGJOHN — Month Day Year: 06 26 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GERALD RIES — Month Day Year: 06 26 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials [illegible] except as noted in Item 19.
Printed/Typed Name — Month Day Year

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

88377272

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete

Do Not Write [illegible]

YELLOW: GENERATOR RETAINS

Approved OMB No. 2050—0039 (Expires 9-30-91)
Print or type (Form designed for use on elite (12-pitch typewriter))

Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's ID: CAD[illegible] Manifest Document No.: [illegible]77273
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD., PACOIMA, [illegible]
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377273
B. State Generator's ID: HYHQ36008695
C. State Transporter's ID: 911265
D. Transporter's Phone: 213-776-6233
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAD008364432
H. Facility's Phone: 213-776-6233

5. Transporter 1 Company Name: RHO-CHEM CORP. ID Number: [illegible]364432
7. Transporter 2 Company Name: ID Number:
9. Designated Facility Name and Site Address: RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301 ID Number: [illegible]364432

| 11. US DOT Description (Including Proper Shipping Name) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. RQ [D001] WASTE ISOPROPANOL SOLUTION | 001 | DM | 20 | G | State 213 EPA/Other D001 |
| b. | | | | | State EPA/Other |
| c. | | | | | State EPA/Other |
| d. | | | | | State EPA/Other |

J. Additional Descriptions for Materials
A. ISOPROPYL [illegible]
OIL

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND [illegible]

16.
GENERATOR'S CERTIFICATION: I hereby [illegible] are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, [illegible] 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 [illegible] volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have [illegible] treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and [illegible] quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management [illegible] that I can afford.

Printed/Typed Name: CHUCK YOUNGJOHN [signature] Month Day Year: 06 26 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GERALD RIES [signature] ① #54865 Month Day Year: 06 26 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous [illegible] manifest except as noted in Item 19.
Printed/Typed Name: JERRY L. SADLER [signature] Month Day Year: 06 26 89

Do Not [illegible] Line

GENERATOR
TRANSPORTER
FACILITY

88377273

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

**.o-Chem Corp.**
425 Isis Avenue, Inglewood, CA 90301
Phone: (213) 776-6233 • FAX: (213) 645-6379

This notification is submitted by HR TEXTRON to **Rho-Chem Corp.** in accordance with the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under 40 CFR 268.7(a)(1). According to this final rule, generators of EPA Hazardous Waste Numbers F001 to F005 (list definition on backside) must provide the following information:

1. EPA Hazardous Waste Number(s): D001
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment: 88377273
4. Waste analysis data.

## CORRESPONDING TREATMENT STANDARD

Instructions:

For each solvent waste constituent present in this waste or its extract, check the appropriate box in front of the treatment standard(s) which apply.

| Solvent Constituent | Treatment Standard (mg/liter) | |
|---|---|---|
| | Wastewaters containing spent solvents | All other spent solvent wastes |
| Acetone | 0.05 | 0.59 |
| n-Butyl alconol | 5.0 | 5.0 |
| Carbon disulfide | 1.05 | 4.81 |
| Carbon tetrachloride | 0.05 | 0.96 |
| Chlorobenzene | 0.15 | 0.05 |
| Cresols and cresylic acid | 2.82 | 0.75 |
| Cyclohexanone | 0.125 | 0.75 |
| 1,2-Dichlorobenzene | 0.65 | 0.125 |
| Ethyl acetate | 0.05 | 0.75 |
| Ethyl benzene | 0.05 | 0.053 |
| Ethyl ether | 0.05 | 0.75 |
| Isobutanol | 5.0 | 5.0 |
| Methanol | 0.25 | 0.75 |
| Methylene chloride | 0.20 | 0.96 |
| Methylene chloride (from the pharmaceutical industry | 12.7 | 0.96 |
| Methyl ethyl ketone | 0.05 | 0.75 |
| Methyl isobutyl ketone | 0.05 | 0.33 |
| Nitrobenzene | 0.66 | 0.125 |
| Pyridine | 1.12 | 0.33 |
| Tetrachloroethylene | 0.079 | 0.05 |
| Toluene | 1.12 | 0.33 |
| 1,1,1-Trichloroethane | 1.05 | 0.41 |
| 1,1,2-Trichloro - 1,2,2-trifluoroethane | 1.05 | 0.96 |
| Trichloroethylene | 0.062 | 0.091 |
| Trichlorofluoromethane | 0.05 | 0.96 |
| Xylene | 0.05 | 0.15 |

Signature (Authorized by Generator)

CHUCK YOUNGJOHN
Name (Print or Type)

1/22/94
Date

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377235

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A D 0 4 1 1 6 8 3 6 7 3 5 — 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
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818-890-9380

A. State Manifest Document Number 88377235

B. State Generator's ID H Y H 0 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: RHO-CHEM CORP.
6. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2
C. State Transporter's ID 911266
D. Transporter's Phone 213-776-6233

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
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301
10. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2
G. State Facility's ID C A D 0 0 8 3 6 4 4 3 2
H. Facility's Phone 213-776-6233

| 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. RQ1000 F002 WASTE III TRICHLOROETHANE, ORM-A UN 2831 | 005 | D M | 350 | G | State 211 EPA/Other F002 |
| b. WASTE ORM-E LIQUID, N.O.S. NA9189 F001 | 004 | D M | 200 | G | State 211 EPA/Other F001 |
| c. WASTE PETROLEUM NAPTHA, COMBUSTIBLE LIQ | 008 | D M | 400 | G | State 213 EPA/Other D001 |
| d. WASTE ORM-E LIQUID N.O.S. NA9189, F001, | 110 | D M | 500 | G | State 213 EPA/Other F001, D001 |

J. Additional Descriptions for Materials Listed Above
A. III TRICHLOROETHANE——85%
OIL——15%
B. FREON——90%
OIL——10%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING (FREON)

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: Chuck Fouquette — Month 11 Day 26 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEN ATKINSON 56214 — Month 10 Day 27 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — 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: JERRY L SADLER — Month 10 Day 26 Year 89

Do Not Write Below This Line

EPA Form 8022 A (1/88)
TSCA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

GENERATOR

TRANSPORTER

FACILITY

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

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)

# Instructions on the Back

Toxic Substances Control Division
Sacramento, California

88399209

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

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 99209
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( ) 818-890-9380

A. State Manifest Document Number: 88399209
B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: CAD000628636
C. State Transporter's ID:
D. Transporter's Phone: 805-251-3737

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID: 906314
F. Transporter's Phone:

9. Designated Facility Name and Site Address
Gibson Oil and Refining Co. Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID:
H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water——86%——82%
Soluble Cutting Oil——17%——10%
Stoddard Solvent ——<1%——<1%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: — Signature: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Month Day Year: 01 25 89

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: Signature: Month Day Year

GENERATOR — TRANSPORTER — FACILITY

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

1492

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

**Instructions on the Back**

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD041162330 | 88399201 | | |

**3. Generator's Name and Mailing Address**
HR Textron
10443 Glenoaks Blvd.
Pacoima, Ca. 91331 818-890-9380
4. Generator's Phone ( )

**A. State Manifest Document Number:** 88399201 ✓
**B. State Generator's ID:** HYEQ360086935

**5. Transporter 1 Company Name:** Martin Industrial Pumping
**6. US EPA ID Number:** CAD000628636
**C. State Transporter's ID:** 906310
**D. Transporter's Phone:** 805-251-3737

**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:** Demenno Kardoon
2100 North Alameda
Compton, Ca. 90222
**10. US EPA ID Number:** CAT080013352
**G. State Facility's ID:** CAT080013352
**H. Facility's Phone:** 213-537-7100

| 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, NOS. /ORME NA9189 | 001 | TT | 2500 | G | State 223 / EPA/Other MOR-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

**J. Additional Descriptions for Materials Listed Above**
Water ——— 86% ——— 82%
Soluble Cutting Oil ——— 10% ——— 17%
Stoddard Solvent ——— 1% ——— 1%

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

**15. Special Handling Instructions and Additional Information**
Use gloves and goggles when handling

**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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK [illegible] | [signature] | | | |

**17. Transporter 1 Acknowledgement of Receipt of Materials**

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [signature] | 01 | 03 | 89 |

**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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| APOLONIO B. PEREZ | [signature] | 01 | 03 | 89 |

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

88399201

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

WASTE TECH 120970

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).*

**Instructions on the Back**

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 99207
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HK Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88399207
B. State Generator's ID: HTHQ360086955

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 906505
D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CAD980883177
H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 3402 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water——————86%——82%
Soluble Cutting Oil——10%——17%
Steddard Solvent——— 1%—— 1%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling — Replaces Manifest No. 87138010
8033-2

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 — Signature — Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year: 01 12 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

**FACILITY**

19. Discrepancy Indication Space
Actual gallons received = 3402.

RECEIVED
JAN 19 1989

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. PURCHASING
Printed/Typed Name: Larry Cook — Signature — Month Day Year: 01 17 89

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

88399207

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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).

9 122772

# Instructions on the Back

Department of Health Services
Toxic Substances Control Division
Sacramento, California

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 99211

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
NH Textron
10445 Glenoaks Blvd.
Padoima, Ca. 91331

4. Generator's Phone ( ) 818-890-9380

A. State Manifest Document Number: 88399211

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: Martin Industrial Pumping

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 906314

D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD980883177

H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 1PFP | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water——86%——82%
Soluble Cutting Oil——10%——17%
Stoddard Solvent——1%——1%

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

15. Special Handling Instructions and Additional Information
Use Gloves and Goggles when handling

8033-2

RECEIVED FEB 13 1989 PURCHASING

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: [illegible] — Signature: [illegible] — Month Day Year: 2 07 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year: 02 07 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space
This manifest is not in conformity to the requirements for manifest documentation dates required after January 1, 1989."

GIBSON OIL & REFINING CO., INC

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year: 02 07 89

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

88399211

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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).*

**Instructions on the Back**

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88399212

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

# ~~UNIFORM~~ HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C A D 0 4 1 1 6 2 3 3 0 — Manifest Document No.: 9 9 2 1 2
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima Ca. 91331 818-980-9380

A. State Manifest Document Number: 88399212
B. State Generator's ID: N Y N 0 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6
C. State Transporter's ID: 106310
D. Transporter's Phone: 805-251-3737

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
Gibson Oil & Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: D A C 9 8 0 8 8 3 1 7 7
G. State Facility's ID: CAL000083177
H. Facility's Phone: 805-327-0413

| 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. California Regulated Waste Only | 0 0 1 | T T | 4400 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water——————99%
Solids——————1%
Stoddard Solvent—1%
Cadium——————0.44/mg/L
Zinc——————60.25mg/L
Chromium——41.25mg/L
Copper———7.00mg/L
Lead———1.11mg/L
Nickel———1.55mg/L

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling
8033-2

RECEIVED
FEB 16 1989
PURCHASING

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [signature] | | | |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| MIKE [illegible] | [signature] | 10 | 21 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

**FACILITY**

19. Discrepancy Indication Space
[illegible] after January 1, 1989."
GIBSON OIL & REFINING CO., INC

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Gary Cook | [signature] | 12 | 14 | 88 |

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-86) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377286

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No.
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD. PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377286
B. State Generator's ID: 1130960005
C. State Transporter's ID: 7B333
D. Transporter's Phone: 805-251-3737
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 805-327-0413

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308
10. US EPA ID Number: CAD980883177

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 0119 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER 86%—92%
SOLUBLE CUTTING OIL 10%—17%
STODDARD SOLVENT <1%—1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Travis J Smith | Signature | Month Day Year: 10 31 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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 | Signature | Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

...WITHIN 90 DAYS

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).*

12435A

**Instructions on the Back**

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 99215
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd.
Pacoima, Ca. 91331
4. Generator's Phone ( ) 818-890-9380

A. State Manifest Document Number 88399215
B. State Generator's ID HYHQ360086 95

5. Transporter 1 Company Name: Martin INdustrial Pumping
6. US EPA ID Number: CAD000628636
C. State Transporter's ID 706394
D. Transporter's Phone 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID CAD980883177
H. Facility's Phone 805-327-0413

| 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 NA9189 | 001 | TT | 0 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water——————86%——82%
Soluble Cutting Oil——10%——17%
Stoddard Solvent———— 1%—— 1%

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling

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: [illegible] — Signature: [signature] — Month Day Year: 1 2 7

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry Kimmick — Signature: Larry Ramirez — Month Day Year: 1 2 8 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

**FACILITY**

19. Discrepancy Indication Space conforming to the requirements for manifest documentation dates require after January 1, 1989."
actual gallons received 2400
GIBSON OIL & REFINING CO., INC

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Richard Mathews — Signature: [signature] — Month Day Year: 1 30 89

RECEIVED
MAR 10 1989
PURCHASING

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF MAILS THIS COPY TO GENERATOR WITHIN 30 DAYS

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

88399215

121794

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377298

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 | Manifest Document No. 77298 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR Textron
10443 Glenoaks Blvd.
Pacoima, Ca. 91331 818-890-9380

A. State Manifest Document Number: 88377298

B. State Generator's ID: HWQ360086915

5. Transporter 1 Company Name: Martin Industrial Pumping | 6. US EPA ID Number: CAD000628636 | C. State Transporter's ID: 906314 | D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive, Bakersfield, Ca. 93308
10. US EPA ID Number: CAD980883177

G. State Facility's ID: CADF980883177

H. Facility's Phone: 805-327-0413

| 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. California Regulated Waste Only | 001 | TT | 01500 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water——99%
Solids——1%
Stoddard Solvent——1%
Cadium——0.44mg/L
Zinc——68.25mg/L
Chromium——41.25mg/L
Copper——7.00mg/L
Lead——1.11mg/L

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

15. Special Handling Instructions and Additional Information
Use gloves and goggles when handling
8033-2

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: C.J. | Signature | Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James A. Smith | Signature | Month Day Year: 03 31 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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: Richard Mathews | Signature | Month Day Year: 03 31 89

RECEIVED
APR - 7 1989
PURCHASING

Do Not Write Below This Line

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: ~~CAD041162330~~ CAD041162330
Manifest Document No.: 759122

2. Page 1 of 1

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

3. Generator's Name and Mailing Address: H.R. Textron, 10445 Glenoaks Blvd., Pacoima, CA 91331

4. Generator's Phone: (818) 896-2411

A. State Manifest Document Number: 88275922

B. State Generator's ID: HYH236-00861/906308

5. Transporter 1 Company Name: Martin Industrial Building

6. US EPA ID Number: CAD000625636

C. State Transporter's ID: 906308

D. Transporter's Phone: (805) 251-3737

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: Casmalia Resource Mgt, Nto Way, Casmalia, CA 93429

10. US EPA ID Number: CAD020748125

G. State Facility's ID: CAD020748125

H. Facility's Phone:

| 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 Solid Nos ORM-E NA 9189 | 001 | DM | 99.25 | Y | State 551 / EPA/Other |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above: a. DM# P/S-1 See attached inventory

K. Handling Codes for Wastes Listed Above: a. 03 b. c. d.

15. Special Handling Instructions and Additional Information: gloves, goggles, Protective clothing

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: Chuck [illegible] | Signature: [signature] | Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Donald D. Byer | Signature: Donald D. Byer | Month Day Year: 04 27 89

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: Casmalia Resources | Signature: [signature] | Month Day Year: [illegible]

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

88275922

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

PACOIMA 556

(Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER

CONTINUATION SHEET

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

THIS IS CONTINUATION SHEET 1 OF 3

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. TYPE | WASTE CAT. NO. |
|---|---|---|---|---|---|
| DM# P/S-1 | | | | | |
| [redacted] | | | | | |
| ✓ DOW CORNING RTV 730 ACETOXYSILANE 5% FLOURSILICON SEALANT (CONTAINS ACETOXYSILANE 5%) | | 3 | oz | TUBE | |
| ✓ LOCKTITE (contains Tributyl Amine 3%) (ORGANIC HYDROPEROXIDE 4%) | | 8 | oz | PLASTIC BOTTLE | |
| ✓ DEXTER HYSOL 934, part A contains p-aminophenol-epichlorohydrin resin 34% epoxidized phenolic novalil resin 31% Asbestos 14% | | 1 | pt | CAN | |
| ✓ DEXTER HYSOL 934 part B Contains polyamide 87% Diethylenetriamine 13% | | 12 | oz | (Bea 8oz CANS) | |
| ✓ DOW CORNING A 4040 PRIME COAT CONTAINS- VM&P NAPTHA 75% ORGANOMETHOXYSILANE 20% | | 2 | qts | (2ea 1pt CANS | |
| ✓ SCOTCH WELD 3M 2216 B CONTAINS BISPHENOL A EPOXY RESIN 70% | | 1 | qt | CAN | |

DHS 8022 (12/82) (b)

CONTINUATION SHEET

THIS IS CONTINUATION SHEET 2 OF 3

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. TYPE | WASTE CAT. NO. |
|---|---|---|---|---|---|
| DM# P15-1 CONT | | | | | |
| √SCOTCH WELD 3M 2216 A CONTAINS ALIPHATIC AMINE | 60% | 1 | qt | CAN | |
| √CREST 7111 CATALYST (MODIFIED POLYAMIDE) NOT HAZARDOUS BY ITSELF | | 3 | pts | 3ea 1/2pt | CANS |
| √SCOTCHSEAL SEALANT 801 (NOT HAZARDOUS BY ITSELF REQUIRES AN ACCELORATER) | | 2 | pts | 1ea 1/2pt | CANS |
| √SCOTCH WELD 3M 1648 A CONTAINS POLYAMIDE RESIN · ALUMINUM SILICATE, SILICA PIGMENT AND CHROME OXIDE | 81% 19% | 1 | qt | CAN | |
| √SCOTCH WELD 3M 1648 B CONTAINS BISPHENOL A TYPE EPOXY RESIN ALUMINUM SILICATE, BENTONITE, CALCIUM CARBONATE AND TITANIUM DIOXIDE | 72% 28% | 1 | qt | CAN | |
| √6 SCOTCHWELD 3M -1838 STRUCTURAL ADHESIVE CONTAINS MODIFIED EPOXY RESIN | | 4 | pts | | |
| √DOW CORNING Q4 2817 FLUOROSILICONE CONTAINS ACETOXYSILANE | 5% | 8 | oz | 1 Tube | |

DHS 8022 (12/82) (b)

55G

STATE ID NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

IS CONTINUATION SHEET 3 OF 3

| PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS | UN/NA NUMBER | TOTAL QUANTITY | UNIT WT/VOL | CONTAINER NO. TYPE | WASTE CAT. NO. |
|---|---|---|---|---|---|
| DM # P/S-1 CONT: | | | | | |
| LOCKTITE SEALANT GRADE A | | 2 | pts | 2ea 1 pint | |
| CONTAINS | | | | | |
| POLYGLYCOL DIMETHACRYLATES | 90+95% | | | | |
| HYDROPEROXIDE | 3-4% | | | | |
| SULFIMIDE | 2-3% | | | | |
| N, N-DIALKYL TOLUIDINES | 4 1% | | | | |
| LOCKTITE GRADE E SEALANT | | 16 | oz | 8ea 2 oz plastic bottles | |
| CONTAINS | | | | | |
| TRIBUTYL AMINE | 3% | | | | |
| ORGANIC HYDROPEROXIDE | 4% | | | | |

DHS 8022 (12/82) (b)

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) 125639
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.: CAD041162330 — Manifest Document No.: 77297

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR Textron
10445 Glenoaks Blvd
Pacoima, Ca. 91331

4. Generator's Phone ( ) 818-890-9380

A. State Manifest Document Number: 88377297

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: Martin Industrial Pumping

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 906310

D. Transporter's Phone: 805-251-3737

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
Gibson Oil and Refining Co., Inc.
Commercial Drive
Bakersfield, Ca. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD990823177

H. Facility's Phone: 805-327-0413

| 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 NA9189 | 001 | TT | 1000 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
Water——86%——82%
Soluble Cutting Oil——10%——17%
Stoddard Solvent——1%—— 1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

80-33-2

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: Chuck [illegible] — Signature: [signature] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Tom Martin — Signature: [signature] — Month Day Year

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: Richard Mathews — Signature: [signature] — Month Day Year: 04 03 89

GENERATOR — TRANSPORTER — FACILITY

88377297

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

(1/88)

Do Not Write Below This Line

RECEIVED
APR - 7 1989
PURCHASING

This editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377285

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041172330 — Manifest Document No.: 77285
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS BLVD.
PACOIMA, CA. 91331 818-890-9380

4. Generator's Phone ( )

A. State Manifest Document Number: 88377285
B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 926393
D. Transporter's Phone: 805-251-3737

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
AMERICHEM INC.
1737 E. DENNI ST.
WILMINGTON, CA. 90744
10. US EPA ID Number: CAD044429835
G. State Facility's ID: CAD044429835
H. Facility's Phone: 213-834-5131

| 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 NITRIC ACID, 40% OR LESS / NA1760 | 001 | TT | 00755 | G | State 792; EPA/Other D007,D002 |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
NITRIC ACID——1%—5%
SODIUM DICHROMATE——1%—2%
WATER—— 93%—90%

K. Handling Codes for Wastes Listed Above
a. 15
b.
c.
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK Y. [illegible] — Signature: [signature] — Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ — Signature: Larry Ramirez — Month Day Year: 043689

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: [illegible] — Signature: [signature] — Month Day Year: [illegible]

GENERATOR — TRANSPORTER — FACILITY

RECEIVED
JUN 12 1989
PURCHASING

Do Not Write Below This Line

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

# PATCHEM LABORATORIES

2205 First St. #108 • Simi Valley, CA 93065 • (805) 581-9006


Customer: Martin Industrial Pumping
P.O. Box 1128
Canyon Country, CA 91351

Attention: Mr. Darron Stankey

Sample Date: 3-13-89

Report Date: 3-14-89

Sample I.D.: 8903-1110

Subject: HR Textron - Nitric, Sodium Dichromate Sample

Method: Sample was analyzed per EPA Methods for Chemical Analysis of Water and Waste (EPA-600/4-79-020), and EPA Test Methods for Evaluating Solid Waste, Physical/Chemical Methods (SW-846).

Results:

| PARAMETER | EPA METHOD | DETECTION LIMIT | ANALYSIS |
|---|---|---|---|
| Barium | 7080 | 0.1 mg/L | Not Found |
| Cadmium | 7130 | 0.02 mg/L | 1.10 mg/L |
| Chromium | 7190 | 0.05 mg/L | 14,650 mg/L |
| Cobalt | 7200 | 0.03 mg/L | 2.15 mg/L |
| Copper | 7290 | 0.02 mg/L | 73.0 mg/L |
| Lead | 7380 | 0.02 mg/L | 0.35 mg/L |
| Nickel | 7520 | 0.02 mg/L | 830.0 mg/L |
| Silver | 7760 | 0.02 mg/L | Not Found |
| Thallium | 7840 | 0.1 mg/L | Not Found |
| Arsenic | 206.4 | 0.1 mg/L | Not Found |
| Selenium | 270.1 | 0.1 mg/L | Not Found |
| Zinc | 7950 | 0.02 mg/L | 75.0 mg/L |
| Cyanide | 9010 | 0.02 mg/L | Not Found |
| Volatie Organics | -- | 0.05 %/vol | Not Found |

Comments: Compounds listed as not found would have been reported if present at or above detection limits. Sample was prepared per Method 3010 of SW-846.

Respectfully Submitted,

Pat Brueckner
Chemist

Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type (Form designed for use on elite (12-pitch typewriter)

Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77279
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
XXXX 10445 GLENOAKS BLVD. PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377279
B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 906310
D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CAD980883177
H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 1500 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——86%——82%
SOLUBLE CUTTING OIL 10%——17%
STODDARD SOLVENT——1%——1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
8033-2

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: Chuck Yamazaki — Signature: [signature] — Month Day Year: 05 26 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE REINA — Signature: Mike Reina — Month Day Year: 05 26 89

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: Richard Mathews — Signature: [signature] — Month Day Year: 05 26 89

GENERATOR — TRANSPORTER — FACILITY

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

88377279

154073

2 A (1/88)
DHS 80—22
EPA 8(88) Previous editions are obsolete.
(Rev.

Do Not Write Below This Line

RECEIVED
JUN - 5 1989
PURCHASING

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: C AD 0 4 11 6 23 30
Manifest Document No.: 0 00 0 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
H.R. Textron
10445 Glenoaks Blvd., Pacoima, CA. 91331
4. Generator's Phone 818 ) 890-9380

A. State Manifest Document Number: 88646023
B. State Generator's ID:

5. Transporter 1 Company Name: Ventura Petroleum Srevices
6. US EPA ID Number: C A T 08 0 03 3 079
C. State Transporter's ID: 91C 595
D. Transporter's Phone: (805) 647-3495

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
Gibson Refinery
3121 Standard Street, Bakersfield, CA. 93308
(805) 327-0413
10. US EPA ID Number: C A D 98 0 88 31 7 7
G. State Facility's ID: CAD980863177
H. Facility's Phone: (805) 327-0413

| 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. Machine OIl Tank Rinse Water California Regulated Waste Only | 00 1 | TT | 00200 | G | State 221 / EPA/Other Exempt |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Tank Rinse Water Containing Hydrocarbons

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

RECEIVED
JUL 12 1989
PURCHASING

15. Special Handling Instructions and Additional Information
Gloves & Goggles

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: THOMAS NIGMA for H.R. TEXTRON
Signature: [signature]
Month Day Year: 06 23 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [illegible]
Month Day Year:

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: GEORGE NESBITT
Signature: George Nesbitt
Month Day Year: 09 06 89

19. Discrepancy Indication Space
ACTUAL GALLONS RECEIVED 142.00

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: [signature]
Signature: [signature]
Month Day Year: 09 06 89

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

88646023

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California, Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377276

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77276
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON, 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377276
B. State Generator's ID: NYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 906313
D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID:
H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REQULATED WASTE ONLY | 001 | TT | 91390 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——86%——82%
SOLUBLE CUTTING OIL——10%——17%
STODDARD SOLVENT—— 1%—— 1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry Ramirez — Signature: Larry Ramirez — Month Day Year: 06 16 87

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: — Signature: — Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

H 89-1AES

88377266

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77266
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377266
B. State Generator's ID: HYH036008695
C. State Transporter's ID: 011896
D. Transporter's Phone: 805-251-3737
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAD009587455
H. Facility's Phone: 619-233-0424

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
PACIFIC TREATMENT CORP.
2190 MAIN ST.,
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556

| 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 | 001 | TT | 01750 | G | State 223 EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

RECEIVED
AUG 08 1989
HEALTH & SAFETY

J. Additional Descriptions for Materials Listed Above
A. WATER——82% TOXIC ORGANICS——200mg/L
SOLIDS——12% (CHLOROFORM)
OIL——5% COPPER——105mg/L
CHROMIUM——325mg/L 88-0137

K. Handling Codes for Wastes Listed Above
a. 15 b.
c. d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | | 10 | 31 | 89 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| LARRY RAMIREZ | | 10 | 31 | 89 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| JULIA J. MINARETE | | 10 | 27 | 89 |

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow. TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

California—Health and Welfare Agency
Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

H89-1377

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 772681
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON, 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377268

B. State Generator's ID: HY H03600869 5

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 011490

D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.,
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID: CAD095894556

H. Facility's Phone: 619-233-0424

| 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 UA 9189 | 001 | TT | 00150 | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
HK A. WATER——82%
SOLIDS——12%
OIL——5%
CHROMIUM——325mg/L
TOXIC ORGANICS—— 200mg/L (CHLOROFORM)
COPPER—— 105mg/L
PTC approval # 88-0737

K. Handling Codes for Wastes Listed Above
a. 15
b.
c.
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: Chuck Young
Signature: [signature]
Month Day Year: 07 17 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry Ramirez
Signature: Larry Ramirez
Month Day Year: 07 17 89

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: Jaime Ramos
Signature: [signature]
Month Day Year: 07 17 89

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

88377268

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Department of Health Services
Toxic Substances Control Division
Sacramento, California

8827617 1

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 | Manifest Document No. 8276171

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address: H.R. Textron, 10445 Glencaks Blvd. Pacoima, CA 91331

4. Generator's Phone (818) 890-9390

A. State Manifest Document Number: 8 8276171

B. State Generator's ID: H HQ36-0C8695

5. Transporter 1 Company Name: Martin Ind Pumping

6. US EPA ID Number: CAD0CCE2S6SK

C. State Transporter's ID: 011859

D. Transporter's Phone: (805) 251-3737

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: Americhem INC, 1737 E Penni, Pomona CA 90744 CAD041429835

10. US EPA ID Number

G. State Facility's ID: CAD041429835

H. Facility's Phone

| 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 Nitric ACID Mixture 4% or less | 001 | DF | 001 | 20 | G State 792 EPA/Other D007/D002 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
Nitric Acid — 10% --- 20%
Sodium Dichromate — 1% --- 2%
Water — 87% --- 88%

K. Handling Codes for Wastes Listed Above
a. 99 b. c. d.

15. Special Handling Instructions and Additional Information
gloves, goggles, protective clothing

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: [redacted] CHUCK [illegible] | Signature | Month Day Year: 07 12 89

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DONALD D. BYER | Signature: Donald D. Byer | Month Day Year: 07 12 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | 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: Nancy Barnes | Signature: Nancy Barnes | Month Day Year: 07 12 89

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

071244-147

125055

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No: 77270

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON, 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377270

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 906314

D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD980883177

H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 2100 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

RECEIVED
JUL 19 1989
PURCHASING

J. Additional Descriptions for Materials Listed Above
WATER——86%—82%
SOLUBLE CUTTING OIL——10%—17%
STODDARD SOLVENT——1%—1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year: 07 14 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James A Smith — Signature: [illegible] — Month Day Year: 07 14 89

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: Richard Mathews — Signature: [illegible] — Month Day Year: 07 14 89

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

88377270

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) 139159
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377261

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 77261
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. (1331
4. Generator's Phone (818) HR 890-9380

A. State Manifest Document Number: 88377261
B. State Generator's ID: HXH0360088695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011868
D. Transporter's Phone: 805-325137

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CAD980883177
H. Facility's Phone: 805-327-0413

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 11975 | G | State 223 / EPA/Other [illegible] |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——————84%——82%
SOLUBLE CUTTING OIL——10%——17%
STODDARD SOLVENT————<1%—— 1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING 8C33-2

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: CHAS. H. JOHNSON — Signature: [signature] — Month Day Year: 10 | 21 | 87

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ — Signature: [signature] — Month Day Year: 10 | 21 | 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — 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: Richard Mathews — Signature: [signature] — Month Day Year: 10 | 28 | 87

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

...f California—Health and Welfare Agency
Approved OMB No. 2050—0039 (Expires 9-30-91)
...e 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.: CAD041162330
Manifest Document No.: 77260
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON, 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377260
B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011868
D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID:
H. Facility's Phone: 619-233-0424

| 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 NA9189 | 001 | TT | 01325 | G | State 223; EPA/Other D007 |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER——82%
SOLIDS——12%
OIL——5%
CHROMIUM——325mg/L
TOXIC ORGANICS—200mg/L (CHLOROFORM)
COPPER——105mg/L

K. Handling Codes for Wastes Listed Above
a. 15
b.
c.
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK [illegible]
Signature: [signature]
Month Day Year: 03 24 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID SUTHERLAND
Signature: [signature]
Month Day Year: 06 27 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

19. Discrepancy Indication Space
13) ACTUAL GALLONAGE 1,500 Glls

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: JAIME RAMOS
Signature: [signature]
Month Day Year: 08 24 89

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

88377260

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete.

RECEIVED
SEP 12 1989
PURCHASING

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

California—Health and Welfare Agency
Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

H-89-1537

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77262
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377262
B. State Generator's ID: HYN036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011890
D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.,
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD095894556
H. Facility's Phone: 619-233-0424

| 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 NA9189 | 001 | TT | 1000 | G | State 223; EPA/Other D007 |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER ——— 82%
SOLIDS ——— 12%
OIL ——— 5%
CHROMIUM ——— 325mg/L
TOXIC ORGANICS — 200mg/L
(CHLOROFORM) —
COPPER ——— 105mg/L

K. Handling Codes for Wastes Listed Above
a. 15
b.
c.
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK [illegible] — Signature: [signature] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ — Signature: Larry Ramirez — Month Day Year: 08 11 89

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: JUAN J NAVARRETE — Signature: [signature] — Month Day Year: 08 11 89

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

88377262

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

H-89-1547

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77263
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: HR Textron, 10445 Glenoaks Blvd. Pacoima, Ca. 91331
4. Generator's Phone ( 818-890-9380

A. State Manifest Document Number: 88377263
B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: Martin Industrial Pumping
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 04862
D. Transporter's Phone: 805-251-3737

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: Pacific Treatment Corp. 2190 Main St., San Diego, Ca. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD095894556
H. Facility's Phone: 619-233-0424

| 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 NA9189 | 001 | TT | 1300 | G | State 223; EPA/Other D007 |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above

A. Water——82%
Solids——12%
Oil——5%
Chromium——325mg/L
Toxic Organics (Chloroform) —— 200mg/L
Copper——105mg/L

K. Handling Codes for Wastes Listed Above
a. 15
b.
c.
d.

15. Special Handling Instructions and Additional Information

Use gloves and goggles when handling

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: CHUCK YOUNGSON — Signature: [signature] — Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James D [illegible] — Signature: [signature] — Month Day Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space
C = 0.1862

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: JUAN J. NAVARRETE — Signature: [signature] — Month Day Year: 080789

GENERATOR — TRANSPORTER — FACILITY

88377263

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 (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377258

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

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.: C A D 0 4 1 1 6 2 3 3 0 — Manifest Document No.: 7 7 2 5 8
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON, 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377258
B. State Generator's ID: N Y N Q 3 6 0 0 8 6 9 5
C. State Transporter's ID: 011868
D. Transporter's Phone: 805-251-3737
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 619-239-0424

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: PACIFIC TREATMENT CORP.
2190 MAIN ST.
SAN DIEGO, CA. 92113
10. US EPA ID Number: C A D 0 9 5 8 9 4 5 5 6

| 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 NA9189 | 0 0 1 | T T | | G | State 223 EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER——82%
SOLIDS——12%
OIL——5%
CHROMIUM——325/mg/L
TOXIC ORGANICS- 200mg/L (CHLOROFORM)
COPPER——105mg/L

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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 | Signature | Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 77256
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
WR TEXTRON- 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331 818-890-9380

4. Generator's Phone ( )

A. State Manifest Document Number: 88377256

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636

C. State Transporter's ID: C11570

D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID

H. Facility's Phone: 619-233-0424

| 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 NA9189 | 001 | TT | 01000 | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER——82%
SOLIDS——12%
OIL——5%
CHROMIUM——325mg/L
TOXIC ORGANICS—200mg/L (CHLOROFORM)
COPPER——105mg/L

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year: 07 21 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry Ramirez — Signature: [illegible] Ramirez — Month Day Year: 07 21 91

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 — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

88377256

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 (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377253

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 77253

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

A. State Manifest Document Number: 88377253

4. Generator's Phone ( 818 ) 980-9380

B. State Generator's ID: NYHQ360086 95

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD006286 36

C. State Transporter's ID: 01786

D. Transporter's Phone: 805-251-3737

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
GIBSON OIL & REFINING CO. INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308

10 US EPA ID Number: CAD980883177

G. State Facility's ID

H. Facility's Phone: 805-327-0413

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 1 | G | State 223 / EPA/Other RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above

WATER ——— 99%
SOLIDS ——— 1%
STODDARD SOLVENT 1%
CADIUM ——— 0.44/mg/L
ZINC ——— 68.25 mg/L
CHROMIUM ——— 41.25mg/L
COPPER ——— 7.00mg/L
LEAD ——— 1.11mg/L

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CARL POPP | Signature | Month Day Year: 9 7 91

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | 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 | Signature | Month Day Year

DHS 8022 A (1-88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 77254
2. Page 1 of 11 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377254
B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011868
D. Transporter's Phone: 805-251-3777

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CAD980883177
H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER----------86%---82%
SOLUBLE CUTTING OIL-10%--17%
STODDARD SOLVENT----<1%--<1%

8033-2

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

15. Special Handling Instructions and Additional Information
USE GLOVE AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [signature] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year: 09 15 89

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: [signature] — Signature: [signature] — Month Day Year: 09 18 89

GENERATOR — TRANSPORTER — FACILITY

88377254

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

RECEIVED Do Not Write Below This Line

SEP 20 1989

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 77240

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON-10445 GLENOAKS BLVD
PACOIMA, CA. 91331

4. Generator's Phone ( ) 818-890-9380

A. State Manifest Document Number: 88377240

B. State Generator's ID: HYHQ36008693

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 011863

D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID:

H. Facility's Phone: 619-233-0424

| 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 NA9189 (D 7) | 001 | TT | [illegible] | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER——82%
SOLIDS——12%
OIL——5%
CHROMIUM——325mg/L
TOXIC ORGANICS — 200mg/L
(CHLOROFORM
COPPER——105mg/L

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: David [illegible] — Signature: [illegible] — Month Day Year: 10 [illegible] 87

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: — Signature: — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

88377240

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

A (1/88)
-22
Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency H-89-2175
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77240

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON-10445 GLENOAKS BLVD
PACOIMA, CA. 91331

4. Generator's Phone ( ) 818-890-9380

A. State Manifest Document Number: 88377240

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 011863

D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID: CAD095894556

H. Facility's Phone: 619-233-0424

| 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. RQ HAZARDOUS WASTE LIQUID N.O.S./ORM-E NA9189 (D007) | 001 | TT | 01050 | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER----------82%
SOLIDS----------12%
OIL---------- 5%
CHROMIUM--------325mg/L
TOXIC ORGANICS -- 200mg/L
(CHLOROFORM
COPPER----------105mg/L

K. Handling Codes for Wastes Listed Above
a. 15
b.
c.
d.

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 10 19 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID SUTHERLAND — Signature: [signature] — Month Day Year: 10 19 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space
~~[illegible] 1325 GALLONS~~

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: JULIUS HANNEGAN — Signature: [signature] — Month Day Year: 10 19 89

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

00311240

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

148721

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 77239
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377239
B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011305
D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CAD980883177
H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 4175 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——86%——82%
SOLUBLE CUTTING OIL——10%——17%
STODDARD SOLVENT—— 1% 1%

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

80337

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK [illegible] — Signature: [signature] — Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year: 10 17 89

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: [illegible] — Signature: [signature] — Month Day Year: 10 17 89

GENERATOR — TRANSPORTER — FACILITY

88377239

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-86-87)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

H89-2427 See Instructions on Back of Page 6 and Front of Page 7

Department of Health Service
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77238
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890 9380

A. State Manifest Document Number: 88377238
B. State Generator's ID: HXHQ3600069 5

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011896
D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD095894556
H. Facility's Phone: 619-233-0424

| 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 NA9189 | 001 | TT | 1950 | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER----------82%
SOLIDS----------12%
OIL- 5%
CHROMIUM---------325mg/L
TOXIC ORGANICS-- 200mg/L
(CHLOROFORM)
COPPER --------- 105mg/L

K. Handling Codes for Wastes Listed Above
a. 5
b.
c.
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature: [signature] — Month Day Year: 10 25 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ — Signature: [signature] — Month Day Year: 10 25 89

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: J. CUBERTO MONTANO — Signature: [signature] — Month Day Year: 10 25 89

Do Not Write Below This Line

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

83311238

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

89479816

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 798116

2. Page 1 of 1

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

3. Generator's Name and Mailing Address: H.K. Textron, 10445 Glencaks Blvd., Pacoima, CA 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 89479816

B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: Martin Industrial Pumping

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 011889

D. Transporter's Phone: (805) 251-3737

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: Appropriate Technologies II, 1100 Maxwell Rd, Chula Vista, CA 92011

10. US EPA ID Number: CAT080010101

G. State Facility's ID: CAT080010101

H. Facility's Phone: 619-421-1175

| 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. (RQ 1000/454) Waste Sodium Hydroxide Liquid Corrosive Material UN1824 | 002 | DF | 00100 | G | State 122; EPA/Other D002 |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above: Oakite Cleaner Containing Sodium Hydroxide

K. Handling Codes for Wastes Listed Above: a. 15; b.; c.; d.

15. Special Handling Instructions and Additional Information: gloves, goggles, Protective clothing

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: Chuck Youngjohn — Signature: [signature] — Month Day Year: 10 19 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Donald D. Byer — Signature: Donald D. Byer — Month Day Year: 10 19 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space: 122/D001/.45T

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: R E Ellington — Signature: [signature] — Month Day Year: 10 23 89

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

S/C 4810

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California Health and Welfare Agency — See Instructions on Back of Page 6 and Front of Page 7 — Department of Toxic Substances Control Office of Sacramento, California

Form Approved OMB No. 2050—0039 (Expires 9-30-91)

Please print or type. (Form designed for use on elite (12-pitch typewriter).

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 77243 — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) 890-9380

A. State Manifest Document Number: 88377243
B. State Generator's ID: HYH031600862951
C. State Transporter's ID: 011890
D. Transporter's Phone: 805-251-3737
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAD075884556
H. Facility's Phone: 619-233-0424

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING — 6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name: — 8. US EPA ID Number:
9. Designated Facility Name and Site Address: PACIFIC TREATMENT CORP. 2190 MAINT ST. SAN DIEGO, CA. 92113 — 10. US EPA ID Number: CAD095894556

| 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 NA9189 | 001 | TT | 01500 | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER----------82%
SOLIDS----------12%
OIL----------5%
CHROMIUM----------.17%
TOXIC ORGANICS-200mg/L (CHLOROFORM)
COPPER----------105mg/L

K. Handling Codes for Wastes Listed Above
a. 13 b.
c. d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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.

GENERATOR — Printed/Typed Name: CHUCK YAMASAKI — Signature: [signature] — Month Day Year: 11 01 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMSEY — Signature: Larry Ramsey — Month Day Year: 11 01 89
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — 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: CHUCK YAMASAKI — Signature: [signature] — Month Day Year: 11 01 89

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

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

State of California—Health and Welfare Agency
Form Approved OMB No 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

H89-2268

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77233

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818-890-9380

A. State Manifest Document Number: 88377233

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 011868

D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST.
SAN DIEGO, CA. 92113

10. US EPA ID Number: CAD095894556

G. State Facility's ID: CAD095894556

H. Facility's Phone: 619-233-0424

| 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 NA9189 | 001 | TT | 125 | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER——82%
SOLIDS——12%
OIL——3%
CHROMIUM——325mg/L
TOXIC ORGANICS——200mg/L (CHLOROFORM)
COPPER——105mg/L

K. Handling Codes for Wastes Listed Above
a. 15
b.
c.
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year: 11 01 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James D Smith — Signature: [illegible] — Month Day Year: 11 01 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space
11a Vol = 1000g

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year: 11 01 89

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

88377233

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377227

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A D 0 4 1 1 6 2 3 3 0 — Manifest Document No. 7 7 2 2 7

2. Page 1 of — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10443 GLENOAKS BLVD.
PACOIMA, CA. 91331

A. State Manifest Document Number 88377227

B. State Generator's ID H Y E 0 3 6 0 0 8 6 8 3

4. Generator's Phone (818) 890-9380

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: C A D 0 0 0 6 2 8 6 3 6

C. State Transporter's ID 011008

D. Transporter's Phone 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93306

10. US EPA ID Number: C A D 9 8 0 8 8 3 1 7 7

G. State Facility's ID

H. Facility's Phone 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 0 0 1 | T T | | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER----------86%---92%
SOLUBLE CUTTING OIL-10%---17%
STODDARD SOLVENT-----1%---4%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James O Sr. | Signature | Month Day Year: 1 1 17 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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 | Signature | Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

H89-2305

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377231

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

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 77231
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON, 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377231
B. State Generator's ID: HYHQ360086 95

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011853
D. Transporter's Phone: 805-251-3737

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
PACIFIC TREATMENT CORP.
2190 MAIN ST
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894556
G. State Facility's ID: CAD095894556
H. Facility's Phone: 619-233-0424

| 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 | 001 | TT | 1500 | G | State 223<br>EPA/Other D007 |
| b. | | | | | State<br>EPA/Other |
| c. | | | | | State<br>EPA/Other |
| d. | | | | | State<br>EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER——82% TOXIC ORGANICS-200mg/L
SOLIDS——12% (CHLOROFORM)
OIL——5% COPPER——105mg/L
CHROMIUM——.17%

K. Handling Codes for Wastes Listed Above
a. 1 b.
c. d.

15. Special Handling Instructions and Additional Information
USE FOR GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] Signature: [signature] Month 11 Day 9 Year 87

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAMES D SMITH Signature: [signature] Month 11 Day 16 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Month Day Year

**FACILITY**

19. Discrepancy Indication Space
13a) Volume 1300 gls

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: MIKE RAMOS Signature: [signature] Month 11 Day 17 Year 87

RECEIVED
NOV 17 1989
PURCHASING

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SEND THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377228

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 72288
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number: 88377228
B. State Generator's ID: NTN036008693

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011863
D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID:
H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 0190 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——60%
SOLIDS——1%
CADIUM——0.44mg/L
STODDARD SOLVENT--39%
ZINC——68.25mg/L
CHROMIUM——41.25mg/L
COPPER——7.00mg/L
LEAD——1.11mg/L

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James [illegible] | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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 | Signature | Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

16 2894

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77224

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377224

B. State Generator's ID: N YN036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 011768

D. Transporter's Phone: 805-251-3737

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
GIBSON OIL & REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD980883177

H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 3500 ~~[illegible]~~ | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

8033-2

J. Additional Descriptions for Materials Listed Above
WATER----------86%---82%
SOLUBLE CUTTING OIL 10%--17%
STODDARD SOLVENT ~~<1%--<1%~~ 2%--5%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year: 12 30 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry [illegible] — Signature: Larry [illegible] — Month Day Year: 12 30 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space
Actual Gallons 3982.50

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year: 12 30 89

(1/88)
Do Not Write Below This Line

Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

GENERATOR

TRANSPORTER

88377224

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

2166-04749

State of California—Health and Welfare Agency WT# 28084
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377199

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77199
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377199
B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628633
C. State Transporter's ID: 011563
D. Transporter's Phone: 805-251-3737

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
DEMMENNO/KERDON
2000 NORTH ALAMEDA ST.
COMPTON, CA. 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID: CATP8P013352
H. Facility's Phone: 213-537-7100

| 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. WASTEWATER (NON RCRA HAZARDOUS WASTE) | 001 | TT | 04200 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER————99%————98%
STODDARD SOLVENT——1%—— 1%

K. Handling Codes for Wastes Listed Above
a. 61
b.
c.
d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year: 05 11 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ — Signature: Larry Ramirez — Month Day Year: 05 11 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space

RECEIVED
MAY 18 1990
PURCHASING

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: Curtis Killings — Signature: Curtis Killings — Month Day Year: 05 11 90

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete

Do Not Write Below This Line

011105651

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

176749 cancelled

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377203

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 77203
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377203
B. State Generator's ID: HYHQ360086935
C. State Transporter's ID: 011863
D. Transporter's Phone: 805-251-3737
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628633
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address: GIBSON OIL & REFINING CO COMMERCIAL OR BAKERSFIELD CA 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CADF108817
H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 02600 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——————86%——82%
SOLUBLE CUTTING OIL— 10%—17%
STODDARD SOLVENT——<1%——<1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

8033-2 ART GAL. RECVD = 2898.49

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK [illegible] | [signature] | 10 | 1 | 90 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL M. POPP | [signature] | 10 | 1 | 90 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

**FACILITY**

19. Discrepancy Indication Space

RECEIVED
MAY - 3 1990
PURCHASING

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [signature] | [illegible] | | |

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

90028588

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162B30 — Manifest Document No.: 28588
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: HR Textron, 10445 Glenoaks, Pacoima CA, 91331
4. Generator's Phone (818) 890-9380
5. Transporter 1 Company Name: Martin Ind. Pumping
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: Quick Silver, 200 Valley Dr., Brisbane CA, 94005
10. US EPA ID Number: CAD981424720

A. State Manifest Document Number: 90028588
B. State Generator's ID: HYHQ36-008695
C. State Transporter's ID: 011889
D. Transporter's Phone: (800) 251-2737
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (415) 468-2000

| 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 Mercury Metallic ORM-B NA# 2809 | 001 | DF | 0010418 | P | State 725 / EPA/Other D009 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above: 11A) Waste Mercury

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

15. Special Handling Instructions and Additional Information: gloves, goggles and protective clothing

**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 | Signature | Month Day Year |
|---|---|---|
| | [signature] | 040690 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| Sigit Singh | Sigit Singh | 040690 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| | | |

RECEIVED
MAY 14 1990
PURCHASING

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 | Signature | Month Day Year |
|---|---|---|
| | | |

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041116[illegible] — Manifest Document No.: 0[illegible]

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address: HR Textron, 1041 Glenoaks Blvd, Pacoima, CA 91331

4. Generator's Phone (818) 896-2441

A. State Manifest Document Number: 90028586

B. State Generator's ID: H[illegible]

5. Transporter 1 Company Name: [illegible] Ind Pumping

6. US EPA ID Number: CAD[illegible]

C. State Transporter's ID: [illegible]

D. Transporter's Phone: (800) [illegible]

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: [illegible] Chem Inc, 1[illegible] E. [illegible], Wilmington CA 90744

10. US EPA ID Number: CAD[illegible]

G. State Facility's ID:

H. Facility's Phone: (213) 834-3131

| 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 Flammable Liquid NOS Flammable Liquid NA 1993 | 0011 | DM | 00006 | G | State: SSI; EPA/Other: D001 |
| b. | | | | | State: ; EPA/Other: |
| c. | | | | | State: ; EPA/Other: |
| d. | | | | | State: ; EPA/Other: |

J. Additional Descriptions for Materials Listed Above: 11A) 9 gallon container Lab Pack, see Attached Inventory 0-287

K. Handling Codes for Wastes Listed Above: a. 15 b. c. d.

15. Special Handling Instructions and Additional Information: Gloves, goggles and [illegible]

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: CHUCK YOUNGJOHN — Signature: [illegible] — Month Day Year: 03 27 90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year: 03 27 90

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: JOHN ACKERMAN — Signature: [illegible] — Month Day Year: 03 27 90

Do Not Write Below This Line

A-0327005

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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

90028586

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9 88) Previous editions are obsolete.

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

16 5430

**See Instructions on Back of Page 6 and Front of Page 7**

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD041162330 — Manifest Document No.: 77269
2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818-890-9380

A. State Manifest Document Number: 88377269

B. State Generator's ID: HYHQ360008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628633

C. State Transporter's ID: 011868

D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID:

H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 02100 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

REJECTED LOAD
DOES NOT CONFORM TO GIBSON OIL'S ACCEPTANCE CRITERIA

J. Additional Descriptions for Materials Listed Above
WATER----------86%---82%
SOLUBLE CUTTING OIL 10%---17%
STODDARD SOLVENT---- 1%--- 1%

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

15. Special Handling Instructions and Additional Information
THIS MANIFEST REPLACED BY # 88377205
USE GLOVES AND GOGGLES WHEN HANDLING
5033-2

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: B L JONES — Signature: B L Jones — Month Day Year: 03 26 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CALL M. POPP — Signature: [signature] — Month Day Year: 03 26 90

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: — Signature: — Month Day Year:

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

88377269

DHS 8022 A (1 88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) WT 26474
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.: CA 0041162330 — Manifest Document No.: 77205
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: H.R. TEXTRON, 10445 GLENOAKS BLVD, PACOIMA, CA 91331
4. Generator's Phone (818) 890-1380
A. State Manifest Document Number: 88377205
B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN IND PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011868
D. Transporter's Phone: 805-251-3737

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: DEMENNO-KERDOON, 2100 ALAMEDA, COMPTON, CA 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID: CAT080013352
H. Facility's Phone: (214) 547-7100

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 02100 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER 86-82%
SOLVABLE 10-17%
STODDARD SOLVENT 1-1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES + GOGGLES.
THIS MANIFEST REPLACES # 88377269

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: [illegible] — Signature: [illegible] — Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL POPP — Signature: [signature] — Month Day Year: 03 27 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space

RECEIVED
APR - 4 1990
PURCHASING

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item
Printed/Typed Name: Curtis Killings — Signature: [signature] — Month Day Year: 03 27 90

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

88377205

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

O/W 04342

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) 144289
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377212

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162337 — Manifest Document No. 77212
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) 890-9380

A. State Manifest Document Number: 88377212
B. State Generator's ID: HYH0360869 5

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING — 6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 011863
D. Transporter's Phone: 805-251-3737
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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CALIFORNIA 93308
10. US EPA ID Number: CAD980883177
G. State Facility's ID: CA0132177
H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 02000 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. 8033-D | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——————86%—82%
SOLUBLE CUTTING OIL 10% - 17%
STODDARD SOLVENT —— 1%—— 1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature — Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ARMANDO RIVERA — Signature — Month Day Year: 10 12 10 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

**FACILITY**

19. Discrepancy Indication Space
ACTUAL GALLONS RECEIVED 2,280.13

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: MIKE FOSTER — Signature — Month Day Year: 10 12 10 90

RECEIVED
FEB 23 1990

Write Below This Line

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 77217

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377217

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 011868

D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DRIVE
BAKERSFIELD, CA. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD980883177

H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 02200 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. 8033-2 | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER----------86%--82%
SOLUBLE CUTTING OIL 10%--17%
STODDARD SOLVENT--- 1%-- 1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: | Signature: | Month Day Year:

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID SUTHERLAND | Signature: [signature] | Month Day Year: 020790

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Month Day Year:

19. Discrepancy Indication Space

RECEIVED
FEB 12 1990
PURCHASING

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [signature] | Signature: [signature] | Month Day Year: 020790

GENERATOR — TRANSPORTER — FACILITY

88377217

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

PO# 32926

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

89413722

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD941162330 — Manifest Document No.: 913722

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: HR TEXTRON, 10445 GLENOAKS BLVD, PACOIMA, CA 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 89413722

B. State Generator's ID: HYHQ36-998695

5. Transporter 1 Company Name: MARTIN IND. PUMPING INC. — 6. US EPA ID Number: CAD099628636

C. State Transporter's ID: 01187

D. Transporter's Phone: (805) 251-3737

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: AMERICHEM, 1737 E. DENNI ST, WILMINGTON, CA 10744 — 10. US EPA ID Number: CAD044429835

G. State Facility's ID:

H. Facility's Phone: 213-834-5131

| 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 SODIUM HYDROXIDE SOLUTION CORROSIVE MATERIAL UN 1824 | 001 | DM | 99950 | G | State 122; EPA/Other D002 |
| b. WASTE NITRIC ACID MIXTURE < 40% CORROSIVE MATERIAL NA 1760 | 996 | DM | 99300 | G | State 792; EPA/Other D002 |
| c. WASTE SODIUM BISULFATE SOLUTION CORROSIVE MATERIAL UN 2837 | 001 | DM | 99950 | G | State D002/D007; EPA/Other 792 |
| d. WASTE SODIUM BISULFATE MIXTURE CORROSIVE MATERIAL UN 2837 | 002 | DM | 00200 | P | State D002/D007; EPA/Other 181 |

J. Additional Descriptions for Materials Listed Above
a. OAKITE 126 FILE # 0-169
b. NITRIC ACID FILE # 0-168 + 0-166 (TNC 102)
c. SMUT 60 LIQUID FILE # 0-167
d. SMUT 60 SOLID FILE # 0-167

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

15. Special Handling Instructions and Additional Information
Wear protective clothing, gloves and coggles.

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: [illegible] — Signature: [illegible] — Month Day Year: 02 15 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year: 02 16 90

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: — Signature: — Month Day Year:

GENERATOR — TRANSPORTER — FACILITY

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377222

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77222

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818--890-9380

A. State Manifest Document Number: 88377222

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628633

C. State Transporter's ID: 011880

D. Transporter's Phone: 805-251-3737

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
GIBSON OIL AND REFINING CO., INC.
COMMERCIAL DR.
BAKERSFIELD, CA. 93308

10. US EPA ID Number: CAD980883177

G. State Facility's ID: CAD980883177

H. Facility's Phone: 805-327-0413

| 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. CALIFORNIA REGULATED WASTE ONLY | 001 | TT | 02500 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

8033-2

J. Additional Descriptions for Materials Listed Above
WATER ---------- 86% --- 82%
SOLUBLE CUTTING OIL 10%-- 17%
STODDARD SOLVENT--- <1%-- <1%

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

RECEIVED JAN 18 1990 PURCHASING

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGSMAN — Signature: Chuck Youngsman — Month Day Year: 01 16 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID SUTHERLAND — Signature: [signature] — Month Day Year: 01 16 90

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: Brian Holcomb — Signature: [signature] — Month Day Year: 01 16 90

GENERATOR

TRANSPORTER

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

A (1/88)
-22
DHS) Previous editions are obsolete
EP/
(R

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) H90-0116
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377221

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 77221
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEKTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377221
B. State Generator's ID: NYE036008695
C. State Transporter's ID: 11590
D. Transporter's Phone: 805-251-3737
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address
PACIFIC TREATMENT - 2190 MAIN ST.
SAN DIEGO, CA. 92113
10. US EPA ID Number: CAD095894536

G. State Facility's ID: CAD045894536
H. Facility's Phone: 619-233-0424

| 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 NA9189 | 001 | TT | 01500 | G | State 223 / EPA/Other D007 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. WATER——————82%
SOLIDS——————12%
OIL——————5%
CHROMIUM——————325mg/L
TOXIC ORGANICS——200mg/L (CHLOROFORM)
COPPER——————105mg/L

K. Handling Codes for Wastes Listed Above
a. 15. b.
c. d.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: R. J. Jones — Signature: — Month Day Year: 1 1 1 7 9 0

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY KHILLER — Signature: — Month Day Year: 0 1 1 8 9 0

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — 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: JESUS VERDO. — Signature: — Month Day Year: 0 1 1 8 9 0

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

8247

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377197

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 771917

2 Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 896-9150

A. State Manifest Document Number: 88377197

B. State Generator's ID: EYH03600869 3

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 011362

D. Transporter's Phone: 805-251-3737

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
DEMENNO/KERDON
2000 NORTH ALAMEDA ST.
COMPTON, CA. 90222

10. US EPA ID Number: CALT080013352

G. State Facility's ID: CA 108041335 2

H. Facility's Phone: 213-537-7100

| 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. SOLUBLE OIL(NON RCRA HAZARDOUS WASTE) | 001 | TT | 04200 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——————86%——82%
SOLUBLE CUTTING OIL —10%——17%
STODDARD SOLVENT—— 1%—— 1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES ANG GOGGLES WHEN HANDLING

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: [illegible] JOHN — Signature — Month Day Year: 10 11 90

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY RAMIREZ — Signature: Larry Ramirez — Month Day Year: 10 11 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — 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: Curtis K. Illings — Signature: Curtis Killings — Month Day Year: 10 11 90

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete.

Do Not Write Below This Line

O/W 0-7/A

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

89951167

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] — Manifest Document No. [illegible]
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
[illegible]
[illegible] Blvd.
[illegible], CA 91331

4. Generator's Phone ([illegible]) 390-9344

A. State Manifest Document Number: 89951167

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: [illegible] INSULATION, INC.
6. US EPA ID Number: [illegible]

C. State Transporter's ID: [illegible]
D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name: [illegible] WASTE
8. US EPA ID Number: [illegible]

E. State Transporter's ID:
F. Transporter's Phone: (713) [illegible]

9. Designated Facility Name and Site Address
[illegible]
[illegible] Avenue
[illegible], CA 91761

10. US EPA ID Number: [illegible]

G. State Facility's ID:
H. Facility's Phone: (818) 965-[illegible]

| 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. [illegible] WASTE, SOLID, [illegible] (ASBESTOS) [illegible] | | | 875 | | State 151 / EPA/Other |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
BAGGED SEALED, AND LABELED

K. Handling Codes for Wastes Listed Above
a. 03
b.
c.
d.

15. Special Handling Instructions and Additional Information
STORE AND HANDLE TO AVOID AIRBORNE PARTICLES. IN CASE OF SPILL, THE APPROVED [illegible] WITH HEPA FILTERS AND DISPOSABLE CLOTHING AND LATER [illegible]. [illegible] OR USE APPROVED [illegible] WITH HEPA FILTERS.

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 | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

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 | Signature | Month Day Year

GENERATOR — TRANSPORTER — FACILITY

LHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

89727591

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD009141162 — Manifest Document No. 27313

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
M.R. TEXTRON
10445 GLEN OAKS BLVD, PACOIMA, CA 91331
4. Generator's Phone (818) 899-9280

A. State Manifest Document Number 89727591
B. State Generator's ID HYH 1 4 0 0 0 1 6 1 5

5. Transporter 1 Company Name: THOMAS GRAY & ASSOCIATES, INC. — 6. US EPA ID Number: CAD 0 9 9 4 5 3 3 4 3
C. State Transporter's ID
D. Transporter's Phone 714/997-4980

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
BROCO INC.
2610 NORTH ALDER
RIALTO, CA 92376
10. US EPA ID Number: CAD 0 0 9 4 5 3 3 4 3
G. State Facility's ID
H. Facility's Phone 714/355-4761

| 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 PICRIC ACID, WET, WITH NOT LESS THAN 10% WATER FLAMMABLE SOLID NA1344 | 0 0 1 | C A | 0 0 3 0 | P | State 331 / EPA/Other D001 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
LABPACK CONTAINING 2 X 1 LB BOTTLES OF WETTED (WITH WATER) PICRIC ACID.

BROCO JOB. NO. 41345

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

15. Special Handling Instructions and Additional Information
WEAR APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATORS.

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 — Signature — Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — 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 — Signature — Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) 29472
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377190

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 771190
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) 890-9380

A. State Manifest Document Number: 88377190
B. State Generator's ID: NYHQ360084953

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 6118C
D. Transporter's Phone: 805-251-3737

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
DEMENNO/KERDOON
2000 N. ALAMEDA ST.
COMPTON, CA. 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID: CAT080013352
H. Facility's Phone: 213-537-7100

| 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. SOLUBLE OIL (NON RCRA HAZARDOUS WASTE) | 001 | TT | 12175 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER————86%——82%
SOLUBLE CUTTING OIL —10%——17%
STODDARD SOLVENT———<1%——<1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK [illegible] — Signature: [signature] — Month Day Year: 06 21 90

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY KENNEDY — Signature: [signature] — Month Day Year: 06 21 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — 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: Curtis Killings — Signature: Curtis Killings — Month Day Year: 06 21 90

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

01W01722

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377188

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77188
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377188

B. State Generator's ID: HYHQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 111505

D. Transporter's Phone: 805-251-3737

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
DEMENNO/KERDOON
2000 NORTH ALAMEDA ST.
COMPTON, CA. 90222
10. US EPA ID Number: CAT080013352

G. State Facility's ID

H. Facility's Phone: 213-537-7100

| 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. SOLUBLE OIL (NON RCRA HAZARDOUS WASTE) | 001 | TT | 0[illegible]0 | G | State 223; EPA/Other NON-RCRA |
| b. | | | | | State; EPA/Other |
| c. | | | | | State; EPA/Other |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——86%——82%
SOLUBLE CUTTING OIL——10%——17%
STODDARD SOLVENT——1%——1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL DOPP — Signature: [illegible] — Month Day Year: [illegible]

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 — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377181

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 77181

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377181
B. State Generator's ID: NYN036098693

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 1113
D. Transporter's Phone: 805-251-3737

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
DEMENNO/KERDOON
2000 N. ALAMEDA ST.
COMPTON, CA. 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID
H. Facility's Phone: 213-537-7100

| 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. SOLUBLE OIL (NON RCRA HAZARDOUS WASTE) | 001 | TT | [illegible] | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——————86%——92%
SOLUBLE CUTTING OIL—10%—17%
STODDARD SOLVENT———<1%—<1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY [illegible] — Signature: [illegible] — Month Day Year: 07 17 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — 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 — Signature — Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CA1D0411162313 10 | 000013 | | |

3. Generator's Name and Mailing Address
NEUTRON
18415 Clear Creek Blvd.
Redding, CA. 96001
4. Generator's Phone ( 805 ) 253-2265

A. State Manifest Document Number: 90284100
B. State Generator's ID: HYM0136010816905

| 5. Transporter 1 Company Name | 6. US EPA ID Number | C. State Transporter's ID |
|---|---|---|
| Laidlaw Environmental Services Inc | CAD098311211 | |
| **7. Transporter 2 Company Name** | **8. US EPA ID Number** | **D. Transporter's Phone** 213-512-4750 |
| Dart Transportation Inc | TND019816515 | E. State Transporter's ID 111605 |
| | | F. Transporter's Phone 800-426-2535 |
| **9. Designated Facility Name and Site Address** | **10. US EPA ID Number** | **G. State Facility's ID** |
| GSX Services Inc<br>3515 Old Greenbrier Pk<br>Greenbrier TN 37073 | TND 980 794 715 | H. Facility's Phone 800-251-3227 |

| 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. RQ "Waste Flammable Liquid, n.o.s." (Ethanol), Flammable Liquid, UN1993, (8000 ppm TCE) | 1 | DM | 1 | P | State: EPA/Other: D001, F003, F005 |
| b. | | | | | State: EPA/Other: |
| c. | | | | | State: EPA/Other: |
| d. | | | | | State: EPA/Other: |

J. Additional Descriptions for Materials Listed Above
a) Approval #1209-01

K. Handling Codes for Wastes Listed Above
a. 14 b. c. d.

15. Special Handling Instructions and Additional Information
In case of a spill, contain with an absorbent and Contact Laidlaw Environmental Services at 213-512-4750.

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [signature] | | | |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Dean Eagler | Dean Eagler | 11 | 03 | 90 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| EDWARD J MEEHAN Jr | Edward J Meehan Jr | 11 | 03 | 90 |

**FACILITY**

19. Discrepancy Indication Space

RECEIVED
NOV 27 1990
HEALTH

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Johnny Wicker | Johnny Wicker | 11 | 08 | 90 |

Do Not Write Below This Line

DHS 8022 A
EPA 8700—22
*(Rev. 6-88) Previous editions are obsolete.*

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

GENERATOR

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

90284100

GSX Services of California, Inc.

# d.b.a. *LAIDLAW* Environmental Services

# FORM A

## CUSTOMER NOTIFICATION AND CERTIFICATION

Only Statements with Original Signature will be Accepted

Generator Name/Location: H.R. TEXTRON, 10445 Glen Oaks Blvd., Pacoima, CA 91331

EPA I.D. Number: CAD041162330

Waste Profile or ARF Number: _____

Manifest Number: 90284100

EPA Hazardous Waste Code Number(s): D001, F003, F005

Waste Analysis Available? YES _____ NO X If yes, please specify profile # _____

☐ **Unrestricted Waste Notification (Category 1)**
I notify that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is not restricted as specified in 40 CFR 268, Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d).

☒ **Restricted Waste Notification (Category 2)**
I notify that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste does not comply with the treatment standards specified in 40 CFR 268, Subpart D. Waste must be treated by the appropriate regulatory treatment standard or in such a manner which renders it non-liquid by chemical fixation or solidification prior to land disposal.
Corresponding treatment standard: See attached

☐ **Restricted Waste Variance Certification/Notification (Category 3)**
I notify pursuant to 40 CFR 268.7(a)(3) and certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268, Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d). I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
Applicable variance: _____

☐ **Treated Waste Certification (Category 4)** (Also mark either 4a and/or 4b below)

☐ **(4a)** I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268, Subpart D, and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

☐ **(4b)** I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater organic constituents have been treated by incineration in units operated in accordance with 40 CFR Part 264, Subpart O or Part 265, Subpart O, or by combustion in fuel substitution units operating in accordance with applicable technical requirements, and I have been unable to detect the nonwastewater organic constituents despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

☐ **Restricted Waste Notification (Category 5)**
I notify that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste does comply with the treatment standards specified in 40 CFR 268, Subpart D.

SIGNATURE: Chuck Youngjohn DATE: 10-31-96

PRINT NAME: CHUCK YOUNGJOHN TITLE: ENVIR. COMPLIANCE COORD.

Only Original Signatures will be Accepted
Original - must accompany manifest
Copy - to be retained by Generator

GSX Services of California, Inc.

d.b.a. **LAIDLAW Environmental Services**

**FORM A**
**continued**

Generator Name/Location: H.K. TEXTRON, 10445 Glenoaks Blvd., Pacoima, CA. 91331

EPA I.D. Number: CAD041162330 Manifest Number: 90284100

## LAB PACK CERTIFICATION

☐ **Category 6 - Lab Pack Certification** (Also mark either 6a and/or 6b below)

☐ **(6a) Organometallic** (inorganic)
I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only the wastes specified in Appendix IV to 40 CFR Part 268 or solid wastes not subject to regulation under 40 CFR Part 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.

☒ **(6b) Organic**
I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste and that the lab pack contains only organic waste specified in Appendix V to 40 CFR Part 268 or solid wastes not subject to regulation under 40 CFR Part 261. I am aware that there are significant penalties for submitting a false certification, including possibility of fine or imprisonment.

| Drum Number, Waste Profile Or ARF Number | Category Number | EPA Waste Number(s) | Corresponding Treatment Standard/ Applicable Variance/Other Information |
|---|---|---|---|
| DRUM A | 2, 6b | D001, F003, F005 | INCINERATION |
| DRUM #10 | 2, 6b | D001, F003, F005 | INCINERATION |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

SIGNATURE: Chuck Youngjohn DATE: 10-31-90

PRINT NAME: CHUCK YOUNGJOHN TITLE: HAZ. WASTE COORD

Only Original Signatures will be Accepted
Original - must accompany manifest
Copy - to be retained by Generator

PAC

...ARY, DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS. TO9 - INCINERATION

# ...ex Container Contents

ARF No. _____

☐ Bulk ☐ Mixed Lab

| Receiving | Routing | Shipping |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

| | | | |
|---|---|---|---|
| Container Number: 093890 - Hei. Drum A | | | Chemist |
| DOT Shipping Name: Waste Flammable Liquid N.O.S. | | | 596 597 598 |
| Container Type: DRUM | UN/NA Number: UN 1993 | HM | |
| Hazard Class: Flammable Liquid | | | |

| Line No. | Material Description | Material Quantity | RQ | EPA Waste Code Number |
|---|---|---|---|---|
| 01 | Butyl Alcohol < 20% | | | D001 |
| 02 | PCB contaminated oil containing | 2(1x1qt) | | D035 |
| 03 | Toluene & Dimethyl formamide | | | |
| 04 | Kappis primer coating components | 1x1G | | |
| 05 | Butyl Acetate & Butanol Naptha | | | |
| 06 | & Heptane | | | |
| 07 | Dykem staining | 1x1oz | | |
| 08 | Methyl Ethyl Ketone | 1x8oz. | | |
| 09 | Sili-Gel contains Hydroxy, | 1x8oz. | | |
| 10 | polydimethyl siloxane | | | |
| 11 | Methacrylic Epoxy Adhesive | 1x1pt. | | |
| 12 | staining wheel thinner MEK | | | |
| 13 | Epoxy Adhesive (Unknown) | 1x2oz | | D001, D035 |
| 14 | staining wheel thinner | | | |
| 15 | contact cement staining glass | 1x1oz. | | |
| 16 | Trichloroethylene | | | |
| 17 | Epoxy Adhesive | 1x1pt. | | |
| 18 | Rigid Steel Blue staining | 1x2oz | | |
| 19 | Butyl Acetate Xylene Methyl | | | |
| 20 | Isobutyl Alcohol | | | |
| 21 | Enamel paint | 1x8oz | | |
| 22 | Fine Grade Metal Wool | 1x1oz | | D035 |
| 23 | Soft Impregnated Oil | 1x2oz | | |
| 24 | Dri-Film Lubricant | | | |
| 25 | staining Methylene | 1x1pt | | |
| 26 | Enamel paint | 1x1G | | |
| 27 | ~~Ethyl Acetate~~ | | | |
| 28 | ~~Methyl Isobutyl~~ | | | |
| 29 | Methyl Ethyl Ketone | | | |
| 30 | RCRA PA | D001, D035 | | (D035) |

This Lab Pack list continues: Yes ☐ No ☐ This is page _____ of _____

ORIGINAL—FINAL GSX T.S.D. • GREEN—TRANS/CERT • YELLOW—DISPOSER • PINK—1ST GSX T.S.D. • GOLD—GENERATOR

...CONTAMINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS. TO9 - INCINERATION

# Container Contents

ARF No. _____

☐ Bulk ☒ Mixed Lab

| Container Number: 092590 HAI-DRUM10 | | | Chemist |
|---|---|---|---|
| DOT Shipping Name: Waste Flammable Liquids n.o.s. | | | 596 597 598 |
| Container Type: 17H-55 | UN/NA Number: UN1993 | HM | |
| Hazard Class: Flammable Liquid | | | |

| Receiving | Routing | Shipping |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

| Line No. | Material Description | Material Quantity | RQ | EPA Waste Code Number |
|---|---|---|---|---|
| 01 | Mineral Oil | 2(1x1(G) | | D001 |
| 02 | Micro Oil [illegible] | 1(1x1qt) | | |
| 03 | petroleum Oil) | | | |
| 04 | Lacquer thinner | 1x1pt | | |
| 05 | Toner Mix Tues Contains | 1(1x1qt) | | |
| 06 | Substantive hydrocarbon | | | |
| 07 | Copper [illegible] | 2(1/2x1G) | | F003, F005 |
| 08 | xylene, toluene alcohol ketones | | | |
| 09 | Epoxy Adhesive (with hardener) | 1x1qt | | F003, F005 |
| 10 | Epoxy Resin Adhesive with | 3(1/2x1qt) | | |
| 11 | Alkyl Enclosed [illegible] | | | |
| 12 | Lecithe glycol Coalescing | | | |
| 13 | N-butyl Alcohol | 1(1x1qt) | | |
| 14 | Lacquer thinner solvent | 2(1x1qt) | | |
| 15 | Naphthenic petroleum distillates | | | |
| 16 | Hydrocarbon Adhesive solvent | 1x1qt | | F003, F005 |
| 17 | Toluene & xylene mix | | | |
| 18 | Mineral | | | |
| 19 | Oil based paint thinner | 2(1/2x1qt) | | F003, F005 |
| 20 | Trichloroethylene glue | | | |
| 21 | Epoxy Resin [illegible] | 2x1qt | | |
| 22 | petroleum distillate toluene | | | |
| 23 | EPOS Naphthenic petroleum | 2x1qt | | |
| 24 | Distillates | | | |
| 25 | | | | |
| 26 | RCRA Haz Waste | 1(1x1) | | (F003, F005) |
| 27 | | | | |
| 28 | | | | |
| 29 | | | | |
| 30 | | | | |

This Lab Pack list continues: Yes ☐ No ☒ This is page 1 of 1

ORIGINAL—FINAL GSX T.S.D. • GREEN—TRANS/CERT • YELLOW—DISPOSER • PINK—1ST GSX T.S.D. • GOLD—GENERATOR

...INATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS. TO9 - INCINERATION

# Container Contents

ARF No. _____

☐ Bulk ☒ Mixed Lab

| Receiving | Routing | Shipping |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

Container No: 92590 HZT - DRUM A

Chemist: 0e

596 597 598

DOT Shipping Name: Waste Flammable Liquid n.o.s

Container Type: DM 55

UN/NA Number: NA1993

HM: R

Hazard Class: Flammable Liquid

| Line No. | Material Description | Material Quantity | RQ | EPA Waste Code Number |
|---|---|---|---|---|
| 01 | Zip Chem X-010 Corrosion inhibitor | 3x 60z. | | D001 |
| 02 | Lubricant containing Petroleum Solvent | | | |
| 03 | 70% + Mineral Oil Lubricating | | | |
| 04 | + 30% | | | |
| 05 | Dapratac #300 contains IPA | | | |
| 06 | (60%) Toluene (40%) | | | |
| 07 | Dapratac #300 contains xylene | | | |
| 08 | Rubber + Toluene (70%) | | | |
| 09 | Devcon Hysol epoxy resin A | | | |
| 10 | contains Butyl-Glycidyl ether | 2(1x1pt) | | |
| 11 | Devcon Hysol Epoxy PART B contains | 1x1 pt | | |
| 12 | polyamides | | | |
| 13 | Ohio coating A 4040 primer coat contains | 1x12 oz. | | |
| 14 | with Naptha (Petroleum Distillates) | | | |
| 15 | 30% Aromatic Solvents 2% Organic | | | |
| 16 | Isobutyl ester 20% | | | |
| 17 | Baking Enamel containing Organic | 1x16 | | |
| 18 | Pigments (40%) Alcohols 10% | | | |
| 19 | Butyl Acetate 15% Cellosolve | | | |
| 20 | Acetate 3% Methyl Amyl Ketone 2% | | | |
| 21 | Devcon Seal-tol catalyst Hydrocarbon | 1x16oz | | |
| 22 | Catalyst Resin in Isopropyl | | | |
| 23 | Alcohol Ester Ether 17% | | | |
| 24 | Aliphatic Naphtha 22 | 1x16oz | | D001, D003 |
| 25 | Naphtha Toluene MEK Methyl | | | |
| 26 | Isobutyl Ketone | | | |
| 27 | Resin Part A contains Polymers | 3x16oz | | |
| 28 | Methyl Isobutyl Ketone Naphthenic | | | |
| 29 | Dykem Staining Solution contains | 1x 1oz | | |
| 30 | Alcohol Ethyl Acetate 4/12, | | | |

This Lab Pack list continues: Yes ☒ No ☐ This is page 1 of _____

ORIGINAL—FINAL GSX T.S.D. • GREEN—TRANS/CERT • YELLOW—DISPOSER • PINK—1ST GSX T.S.D. • GOLD—GENERATOR

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 10269

2. Page 1 of 1

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

3. Generator's Name and Mailing Address: H.R. Textron, 10445 Blancaks Ave, Pacoima, CA 91331

4. Generator's Phone: (818) 590-9380

A. State Manifest Document Number: 90264650

B. State Generator's ID: HAHG36-008695

5. Transporter 1 Company Name: [illegible] Pumping

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 111503

D. Transporter's Phone: 813-231-3737

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: [illegible] 5215 So. [illegible] Ave, [illegible], CA 90058

10. US EPA ID Number: CAD097030993

G. State Facility's ID: [illegible]

H. Facility's Phone: 213-588-7111

| 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 Nitric Acid 40% or Less Corrosive material UN 1760 | 003 | DF | 00100 | G | State 792; EPA/Other D002/D007 |
| b. Waste Nitric Acid 40% or Less Corrosive material UN 1760 | 001 | DF | 00050 | G | State 792; EPA/Other D002/D007 |
| c. Waste Alkaline Corrosive Liquid NOS (Sodium Hydroxide) Corrosive material N/A 1719 | 002 | DF | 00075 | G | State 121; EPA/Other D002 |
| d. | | | | | State; EPA/Other |

J. Additional Descriptions for Materials Listed Above
A) Nitric Acid 40% or Less & Less than 1% Sodium Dichromate
B) Nitric Acid 40% or Less, Ferric Sulfate, Sodium Bifluoride, & Water

K. Handling Codes for Wastes Listed Above
a. 15 b. 15
c. 15 d.

15. Special Handling Instructions and Additional Information
c) Sodium Hydroxide, Water [illegible] E.R. Guide #60

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: [illegible] Signature: [illegible] Month Day Year: 10 [illegible] 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Month Day Year: 10 [illegible] 90

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: [illegible] Signature: [illegible] Month Day Year:

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

90264650

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) #3342
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. CAD041162330 — Manifest Document No. 88377175
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON
10445 GLENOAKS Blvd.
PACOIMA, CA 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377175
B. State Generator's ID: HYHQ360086955

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 111514
D. Transporter's Phone: 805-251-3737

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
DEMENNO/KERDOON
2000 N. ALAMEDA ST.
COMPTON, CA 90222
10. US EPA ID Number: CATO800133552
G. State Facility's ID: CATO800133552
H. Facility's Phone: 213-537-7100

| 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. SOLUBLE OIL (NON RCRA HAZARDOUS WASTE) | 001 | TT | 02250 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER ---- 86% - - - 82%
SOLUBLE OIL - - - 10% - - 17%
STODDARD SOLVENT - - - 4 - - - 1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

*EMERGENCY CONTACT*
*805 253-5265*

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.

GENERATOR — Printed/Typed Name: CHUCK YOUNGJIN — Signature — Month Day Year: 11 13 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAMES SMITH — Signature — Month Day Year: 11 26 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

RECEIVED
DEC - 7 1990
PURCHASING

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in
Printed/Typed Name: CHRIS SPAGGIARI — Signature — Month Day Year: 11 28 90

88377175

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 (1/88)
EPA 8700—22

Do Not Write Below This Line

State of California—Health and Welfare Agency #3034
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 77177
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
NR TEXTRON 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377177
B. State Generator's ID: NY HQ36008695

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 111514
D. Transporter's Phone: 805-231-3737

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
DEMENNO/KERDOON
2000 N. ALAMEDA ST.
COMPTON, CA. 90222
10. US EPA ID Number: CAT080013352
G. State Facility's ID: CAT080013352
H. Facility's Phone: 213-537-7100

| 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. SOLUBLE OIL (NON RCRA HAZARDOUS WASTE) | 001 | TT | 02300 | G | State 223 / EPA/Other NON-RCRA |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WATER——86%——82%
SOLUBLE CUTTING OIL——10%——17%
STODDARD SOLVENT——1%——1%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK [illegible] — Signature: [signature] — Month Day Year: 10 24 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DONALD BYER — Signature: Donald Byer — Month Day Year: 10 24 90

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: Dalemond L. Smith — Signature: [signature] — Month Day Year: 10 24 90

GENERATOR — TRANSPORTER — FACILITY

88377177

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

6447

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377172

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: 88377172

B. State Generator's ID

5. Transporter 1 Company Name | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone

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 | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone

| 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. | | | | | 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. | 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 | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | 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 | Signature | Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

, Inc.
578
, Nevada 89003
02/553-2203

**USEcology**

an *American Ecology* company

# CERTIFICATE OF DISPOSAL

## DISPOSAL FACILITY

**US Ecology, Inc.**
**P.O. Box 578**
**Highway 95, 11 Miles South of**
**Beatty, Nevada 89003**

EPA Identification No. **NVT330010000**

## WASTE IDENTIFICATION

**Manifest No.** 88377172

**Generator Name:** HR TEXTRON

**Waste Description:** 1 drum of ion exchange beads

## DISPOSAL CERTIFICATION

**I HEREBY CERTIFY THAT THE ABOVE REFERENCED WASTE WAS:**

[X] Landfilled at the US Ecology, Inc. Beatty, Nevada Facility on: 12/27/90

[ ] Stored Pending Shipment for Off-site Treatment/Incineration.

[ ] Shipped for incineration on Manifest No. _____ and Incinerated on: _____ (Certificate of Incineration attached).

[ ] Stored pending On-site Treatment.

Under civil and criminal penalties of law for making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instruction made the verification that this information is true, accurate and complete.

R L Marchand
**US ECOLOGY, INC.**

12/28/90
DATE

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377180

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77180
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377180
B. State Generator's ID: HYH036008695

5. Transporter 1 Company Name: RHO-CHEM CORP.
6. US EPA ID Number: CAD008364432
C. State Transporter's ID: 014426
D. Transporter's Phone: 213-776-6223

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
RHO-CHEM
425 ISIS AVE.
INGLEWOOD, CA. 90301
10. US EPA ID Number: CAD008364432
G. State Facility's ID: CAD008364432
H. Facility's Phone: 213-776-6223

| 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 PETROLEUM NAPTHA, COMBUSTIBLE LIQUID, UN255 | 006 | DM | 00300 | G | State 213 / EPA/Other D001 |
| b. HAZARDOUS WASTE LIQUID N.O.S. ORM-E NA9189 F001 | 014 | DM | 00700 | G | State 211 / EPA/Other F001 |
| c. HAZARDOUS WASTE LIQUID N.O.S. ORM-E NA9189 F001 | 001 | DM | 00050 | G | State 211 / EPA/Other F001 |
| d. WASTE III TRICHLOROETHANE(RQ) ORM-A ~~UN1219~~ UN2831 | 003 | DM | 0150 | G | State 211 / EPA/Other F001 |

J. Additional Descriptions for Materials Listed Above
A. STODDARD SOLVENT——85%
OIL——4242——15%
B. FREON——90%
OIL——4243——10%
C. OIL——90%
TRICHLOROETRIFLUROETHANE
IN EXCESS OF 1000 ppm
D. III TRICHLOROETHANE 85%
OIL——1263——15%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING *** EMERGENCY CONTACT***
805-253-5265

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: Chuck Young Jr. — Signature: [signature] — Month Day Year: 100 [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Gre Curt 49711 — Signature: [signature] (24) — Month Day Year: 100990

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: Tony Gaeta — Signature: [signature] — Month Day Year: 100 [illegible]

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377185

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A D 0 4 1 1 6 2 3 3 0 7 — Manifest Document No. 7 1 8 5

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377185

B. State Generator's ID: H Y H Q 3 6 0 0 8 6 9 5

5. Transporter 1 Company Name: RHO-CHEM

6. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2

C. State Transporter's ID: 014430

D. Transporter's Phone: 213-776-6233

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
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301

10. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2

G. State Facility's ID

H. Facility's Phone: 213-776-6223

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. WASTE PETROLEUM NAPTHA, COMBUSTIBLE LIQUID | 3 | DM | 00 | G | State 213 / EPA/Other D001 |
| b. HAZARDOUS WASTE LIQUID N.O.S. ORM-E NA9189 F001 | | DM | 000 | G | State 211 / EPA/Other F001 |
| c. HAZARDOUS WASTE LIQUID N.O.S. ORM-E NA9189 F001 | | DM | 000 | G | State 211 / EPA/Other F001 |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. STODDARD SOLVENT ——85%
OIL——4242————15%
B. FREON————————90%
OIL——4243————10%
C. OIL————————99%
TRICHLOROTRIFLUOROETHANE
IN EXCESS OF 1000 ppm

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature — Month Day Year

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Greg Curtis 52457 — Signature: [signature] (15) — Month Day Year: 01 09 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — 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 — Signature — Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377196

88377196

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77196
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address:
HR TEXTRON
10445 Glenoaks Blvd.
Pacoima, Ca. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377196

B. State Generator's ID: NY NO 34 008695

5. Transporter 1 Company Name: RHO-CHEM
6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 012787

D. Transporter's Phone: 213-776-6233

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:
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID:

H. Facility's Phone: 213-776-6233

| 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 PETROLEUM NAPTHA, COMBUSTIBLE LIQUID | 006 | DM | 1300 | G | State 213 / EPA/Other D001 |
| b. HAZARDOUS WASTE LIQUID N.O.S., ORM-E NA9189 F001 | 002 | DM | 1100 | G | State 211 / EPA/Other F001 |
| c. HAZARDOUS WASTE LIQUID N.O.S. ORM-E, NA9189 F001 | 002 | DM | 1100 | G | State 211 / EPA/Other F001 |
| d. WASTE III TRICHLOROETHANE (RQ) ORM-A UN2831, F002 | 002 | DM | 1150 | G | State 211 / EPA/Other F001 |

J. Additional Descriptions for Materials Listed Above
A. STODDARD SOLVENT—— 85%
OIL——4242——15%
B. FREON——90%
OIL——10%
C. OIL——99%
TRICHLOROETRIFLUROETHANE
IN EXCESS OF 1000 ppm
D. WASTE III TRICHLOROETHANE

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

15. Special Handling Instructions and Additional Information
OIL---1261-----15%

USE GLOVES AND GOGGLES WHEN HANDLING

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: [illegible] — Signature: [illegible] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Greg Curtis #49646 — Signature: [illegible] (13) — Month Day Year: 060790

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: — Signature: — Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

# UNIFORM HAZARDOUS WASTE MANIFEST

88377204

1. Generator's US EPA ID No. CAD041162334
Manifest Document No. 71304
2. Page 1 of 1
A. State Manifest Document Number 883
B. State Generator's ID EYE03688
C. State Transporter's ID 01472
D. Transporter's Phone 213-776-6233
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 213-776-6233

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 890-9380

5. Transporter 1 Company Name: RHO-CHEM
6. US EPA ID Number: CAD008164432

7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301
10. US EPA ID Number: CAD008164432

| 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 PETROLEUM NAPTHA COMBUSTIBLE LIQUID UN1,,,95 | 093 | DM | 00115 | G | State 213 EPA/Other D001 |
| b. HAZARDOUS WASTE LIQUID N.O.S. ORM-E NA9189 FOR | 002 | DM | 00110 | G | State 211 EPA/Other F001 |
| c. HAZARDOUS WASTE LIQUID N.O.S./ORM-E NA9189 FOR | 016 | DM | 00310 | G | State 211 EPA/Other F001 |
| d. | | | | | State EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. STODDARD SOLVENT——85% C. OIL——99%
OIL——4242——15% TRICHLOROETHANE
B. FREON——90% IN EXCESS OF 1000 ppm
OIL——4243——10%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | Chuck Youngjohn | 10 | 31 | 90 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Geo. Curtis #54169 | | 10 | 31 | 90 |

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 the manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377213

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C A D 0 4 1 1 6 2 3 3 0 7 — Manifest Document No.: 7 7 2 1 3
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
H R-T R X T R O N 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377213
B. State Generator's ID: H T H 0 3 6 0 0 8 6 9 5
C. State Transporter's ID: 014426
D. Transporter's Phone: 213 7666237

5. Transporter 1 Company Name: RHO-CHEM
6. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2
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
RHO-CHEM
423 ISIS
INGLEWOOD, CA. 90301
10. US EPA ID Number: C A D 0 0 8 3 6 4 4 3 2
G. State Facility's ID: C A D 0 0 8 3 6 4 4 3 2
H. Facility's Phone: 213-776-6233

| 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 PETROLEUM NAPTHA/COMBUSTIBLE LIQUID UN1255 | 01 | DM | 110 | G | State 213 / EPA/Other D001 |
| b. HAZARDOUS WASTE LIQUID N.O.S./CRM-E NA9189 | 01 | DM | 110 | G | State 211 / EPA/Other F001 |
| c. WASTE ISOPROPANOL SOLUTION/FLAMMABLE LIQUID UN1219 | 01 | DM | 110 | G | State 213 / EPA/Other D001 |
| d. WASTE ACETONE/FLAMMABLE LIQUID, UN1090 | 01 | DM | 110 | G | State 213 / EPA/Other F003 |

J. Additional Descriptions for Materials Listed Above
A. STODDARD SOLVENT —70%
OIL——30% 4242
B. OIL——90%
TRICHLOROTRIFLUOROETHANE
IN EXCESS OF 1000 ppm
C. ISOPROPYL ALCOHOL—85%
OIL - 13% - 1264
WATER 2%
D. ACETONE - 95%
WATER —— 5%

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

15. Special Handling Instructions and Additional Information
USE GLOVE AND GOGGLES WHEN H ANDLING

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 | Signature | Month Day Year: 03 16 90

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Greg Curtis #57361 | Signature | Month Day Year: 03 16 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | 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 | Signature | Month Day Year

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377223

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77223
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818 - 890-9380

A. State Manifest Document Number: 88377223
B. State Generator's ID: NYHQ36008695

5. Transporter 1 Company Name: RHO-CHEM
6. US EPA ID Number: CAD008364432
C. State Transporter's ID: 014926
D. Transporter's Phone: 213-776-6233

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
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301
10. US EPA ID Number: CAD008364432
G. State Facility's ID: CAD008364432
H. Facility's Phone: 213-776-6233

| 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 III TRICHLOROETHANE (RQ) ORM-A UN2831, F002 | 004 | DM | 200 | G | State 211 / EPA/Other F002 |
| b. WASTE PETROLEUM NAPTHA COMBUSTIBLE LIQUID UN1255 | 007 | DM | 325 | G | State 213 / EPA/Other D001 |
| c. HAZARDOUS WASTE LIQUID N.O.S. ORM-E NA9189 F001 | 004 | DM | 200 | G | State 211 / EPA/Other F001 |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. III TRICHLOROETHANE——95%
OIL 1263——5%
B. STODDARD SOLVENT——85%
OIL 4242——15%
C. FREON——90%
OIL 4243——10%

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: CHUCK YOUNGJOHN — Signature: Chuck Youngjohn — Month Day Year: 01 11 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Gregory T. Curtis #56960 — Signature: Gregory T. Curtis — Month Day Year: 01 11 90

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: Tony Gaeta — Signature: Tony Gaeta — Month Day Year: 01 11 90

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please ~~print~~ or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377220

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD041162330 — Manifest Document No. 77220

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377220
B. State Generator's ID: HTW036008693
C. State Transporter's ID: 01442
D. Transporter's Phone: 213-776-6273
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: RHO-CHEM CORP. — 6. US EPA ID Number: CAD008364432
7. Transporter 2 Company Name — 8. US EPA ID Number:

9. Designated Facility Name and Site Address
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301
10. US EPA ID Number: CAD008364432

G. State Facility's ID: CAD008364432
H. Facility's Phone: 213)776-6233

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. HAZARDOUS WASTE LIQUID N.O.S./ORM-E NA9189 | 001 | 14 DM | 000710 | G | State 211 / EPA/Other F001 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
A. OIL——————90%
TRICHLOROTRIFLUOROETHANE - IN EXCESS OF 1000 ppm

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING

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: Hermino Zamora — Signature — Month Day Year: 10 12 3 90

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: S. EVANS S1707 — Signature — Month Day Year: 01 23 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — 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: JERRY L SADLER — Signature — Month Day Year: 01 23 90

Do Not Write Below This Line

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

**Rho-Chem Corp.**
425 Isis Avenue, Inglewood, CA 90301
Phone: (213) 776-6233 • FAX: (213) 645-6379

This notification is submitted by HR TEXTRON to **Rho-Chem Corp.** in accordance with the Land Disposal Restrictions, Final Rule (effective Nov. 8, 1986) under 40 CFR 268.7(a)(1). According to this final rule, generators of EPA Hazardous Waste Numbers F001 to F005 (list definition on backside) must provide the following information:

1. EPA Hazardous Waste Number(s): F001
2. Corresponding Treatment Standard (see below).
3. Manifest number associated with this shipment: 88377220
4. Waste analysis data.

## CORRESPONDING TREATMENT STANDARD

Instructions:

For each solvent waste constituent present in this waste or its extract, check the appropriate box in front of the treatment standard(s) which apply.

| Solvent Constituent | | Treatment Standard (mg/liter) Wastewaters containing spent solvents | | All other spent solvent wastes |
|---|---|---|---|---|
| Acetone | | 0.05 | | 0.59 |
| n-Butyl alcohol | | 5.0 | | 5.0 |
| Carbon disulfide | | 1.05 | | 4.81 |
| Carbon tetrachloride | | 0.05 | | 0.96 |
| Chlorobenzene | | 0.15 | | 0.05 |
| Cresols and cresylic acid | | 2.82 | | 0.75 |
| Cyclohexanone | | 0.125 | | 0.75 |
| 1,2-Dichlorobenzene | | 0.65 | | 0.125 |
| Ethyl acetate | | 0.05 | | 0.75 |
| Ethyl benzene | | 0.05 | | 0.053 |
| Ethyl ether | | 0.05 | | 0.75 |
| Isobutanol | | 5.0 | | 5.0 |
| Methanol | | 0.25 | | 0.75 |
| Methylene chloride | | 0.20 | | 0.96 |
| Methylene chloride (from the pharmaceutical industry | | 12.7 | | 0.96 |
| Methyl ethyl ketone | | 0.05 | | 0.75 |
| Methyl isobutyl ketone | | 0.05 | | 0.33 |
| Nitrobenzene | | 0.66 | | 0.125 |
| Pyridine | | 1.12 | | 0.33 |
| Tetrachloroethylene | | 0.079 | | 0.05 |
| Toluene | | 1.12 | | 0.33 |
| 1,1,1-Trichloroethane | | 1.05 | | 0.41 |
| 1,1,2-Trichloro - 1,2,2-trifluoroethane | | 1.05 | X | 0.96 |
| Trichloroethylene | | 0.062 | | 0.091 |
| Trichlorofluromethane | | 0.05 | | 0.96 |
| Xylene | | 0.05 | | 0.15 |

Chuck Youngjohn
Signature (Authorized by Generator)

CHUCK YOUNGJOHN
Name (Print or Type)

1-23-90
Date

2166-04749

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 77166
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9300

A. State Manifest Document Number: 88377166
B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: [illegible]
D. Transporter's Phone: [illegible]

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
NORRIS ENVIRONMENTAL
5215 SOUTH BOYLE AVE.
LOS ANGELES, CA. 90058
10. US EPA ID Number: CAD097030993
G. State Facility's ID: CAD097030993
H. Facility's Phone: [illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. HAZARDOUS WASTE LIQUID, N.O.S. OMM-E NA 9189 | 001 | 77 | 00280 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

[illegible] for Materials Listed Above
[illegible]

15. Special Handling Instructions and Additional Information
WEAR GLOVES AND GOGGLES WHEN HANDLING
** EMERGENCY CONTACT** 805-253-2565
APPROVAL # 90E1139CRO

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: CHUCK [illegible]JOHN — Signature: [signature] — Month Day Year: 11 17 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL POPP — Signature: [signature] — Month Day Year: 11 17 91

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space
[illegible]

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: BI TIN VELASCO — Signature: [signature] — Month Day Year: 11 17 91

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

...ith and Welfare Agency
...MB No. 2050—0039 (Expires 9-30-91)
...t 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.: CAD041162330 — Manifest Document No.: 77166
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: HR TEXTRON - 10445 GLENOAKS BLVD. PACOIMA, CA. 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377166
B. State Generator's ID: NYHQ36008[illegible]

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID: 111514
D. Transporter's Phone: [illegible]

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: [illegible] ENVIRONMENTAL, 5215 SOUTH BOYLE AVE., LOS ANGELES, CA. 90058
10. US EPA ID Number: CAD097010993
G. State Facility's ID:
H. Facility's Phone: [illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. HAZARDOUS WASTE LIQUID, N.O.S. ORM-E NA 9189 | 001 | TT | 002810 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

[illegible] Descriptions for Materials Listed Above
[illegible] 200 ppm
[illegible] 60%
[illegible] 12
[illegible] ACID [illegible] <1%

K. Handling Codes for Wastes Listed Above
a.
c.

15. Special Handling Instructions and Additional Information
WEAR GLOVES AND GOGGLES WHEN HANDLING
** EMERGENCY CONTACT** 805-253-2565
APPROVAL # 90E1139 CRO

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: CHUCK [illegible] — Signature: [illegible] — Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL [illegible] — Signature: [illegible] — Month Day Year: [illegible]

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: — Signature: — Month Day Year:

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

88377166

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

N.I. INDUSTRIES

# NORRIS Environmental Services

# *CERTIFICATE OF TREATMENT*

*Issued To*

**HR TEXTRON**

**Date(s) Received** *01-17-91* **Manifest Number(s)** *88377166*

## THIS CERTIFIES THAT:

*THE WASTE RECEIVED ON THE ABOVE MANIFEST WAS PROCESSED THROUGH NORRIS ENVIRONMENTAL SERVICE TREATMENT SYSTEM. THE NORRIS ENVIRONMENTAL SERVICE TREATMENT SYSTEM DETOXIFIED THE WASTE, AND CONVERTED THE RESIDUE INTO A RECYCLABLE MATERIAL. THESE STEPS WERE CARRIED OUT IN FULL ACCORDANCE WITH FEDERAL, STATE, AND LOCAL ENVIRONMENTAL REQUIREMENTS.*

*THIS PROCESSING OF THE WASTE BY NORRIS ENVIRONMENTAL SERVICE TREATMENT SYSTEM COMPLETES ALL OF THE CERTIFICATE HOLDER'S RESPONSIBILITIES UNDER THE UNITED STATES RESOURCE CONSERVATION AND RECOVERY ACT AND THE CALIFORNIA HAZARDOUS WASTE CONTROL ACT.*

A MASCO INDUSTRIES COMPANY

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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. CAD041162330 | Manifest Document No. 88377165 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
[redacted] - 10443 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 899-1220

A. State Manifest Document Number 88377165
B. State Generator's ID [redacted]
C. State Transporter's ID [redacted]
D. Transporter's Phone [redacted]
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone [redacted]

5. Transporter 1 Company Name: [redacted] INDUSTRIAL PUMPING | 6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name | 8. US EPA ID Number

9. Designated Facility Name and Site Address
[redacted]/TERMINIX
3800 N. ALAMEDA ST.
COMPTON, CA. 90221
10. US EPA ID Number: CAT080013332

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. OIL AND WATER MIXTURE (NON-RCRA) HAZARDOUS WASTE LIQUID | 01 | TR | 02400 | G | [redacted] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above
a.
c.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING EMERGENCY CONTACT 805-253-3245

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.

GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [signature] | 10 | 21 | 11 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| James Smith | [signature] | 10 | 21 | 91 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

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

88377165

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

[redacted]nia—Health and Welfare Agency
...ved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330
Manifest Document No.: 77165
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377165
B. State Generator's ID: RTHQ36008[illegible]
C. State Transporter's ID: 111[illegible]
D. Transporter's Phone: [redacted]
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAT080012[illegible]
H. Facility's Phone: 213-[illegible]-7100

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
[illegible]/KERDOON
[illegible] N. ALAMEDA ST.
COMPTON, CA. 90222
10. US EPA ID Number: CAT080013352

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. OIL AND WATER MIXTURE (NON-RCRA) HAZARDOUS WASTE LIQUID | 001 | TT | 02400 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

[illegible] Descriptions for Materials Listed Above
[illegible] — [illegible]
[illegible] — 10[illegible] — 1[illegible]
[illegible] SOLVENT — <1[illegible] — <1[illegible]

K. Handling Codes for [illegible]
a. [illegible]
c.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING EMERGENCY CONTACT 805-253-5265

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: CHUCK Y[illegible]
Signature: [signature]
Month Day Year: 01 21 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James Smith
Signature: [signature]
Month Day Year: 01 21 91

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: [illegible]
Signature: [signature]
Month Day Year: 01 21 91

GENERATOR
TRANSPORTER
FACILITY

88377165

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

[illegible] SDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

01W02151

# Certificate of Treatment/Recycling

ISSUED TO

HR Textron

FOR

MANIFEST NUMBER 88377165 DATE RECEIVED 1-21-91

*The aqueous waste received on the above manifest will be treated to standards mandated by the FEDERAL CLEAN WATER ACT and to effluent requirements established by the Sanitation Districts of Los Angeles County. Waste treatment and recycling is performed under permits granted to DeMENNO/KERDOON, a California corporation, by the California Department of Health Services, in coordination with the Environmental Protection Agency, in accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations including but not limited to waste discharge requirements established by the Sanitation Districts of Los Angeles County.*

*When the above described waste material is accepted by DeMENNO/KERDOON and treated/recycled and the aqueous phase discharged for further treatment by the Sanitation Districts, the certificate holder's responsibility for the waste material is eliminated under both RCRA and Proposition 65. Upon request, DeMENNO/KERDOON will issue this certificate that all waste material has been handled in accordance with applicable permits and the certificate holder's liability has been terminated.*

DeMENNO/KERDOON

"Compliance Through Recycling"

By: Casey K. Yu 1-23-91

Date

Casey K. Yu, B.S., M.S.
Environmental Compliance Mgr.
Chief Chemist

2000 NORTH ALAMEDA STREET ☐ COMPTON ☐ CALIFORNIA ☐ 90222
(213) 537-7100 ☐ FACSIMILE (213) 639-2946

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

4550

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD041162330 | 7711 | 1 of 1 | |

GENERATOR

3. Generator's Name and Mailing Address
[redacted] - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) [redacted]

A. State Manifest Document Number: 8837771
B. State Generator's ID: [redacted]
C. State Transporter's ID: [redacted]
D. Transporter's Phone: [redacted]
E. State Transporter's ID: [redacted]
F. Transporter's Phone: [redacted]
G. State Facility's ID: CAT080033352
H. Facility's Phone: [redacted]

5. Transporter 1 Company Name: [redacted] INDUSTRIAL PUMPING
6. US EPA ID Number: CAD980962836
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: [redacted]
[redacted] E. ALAMEDA ST.
[redacted] CA. 90022
10. US EPA ID Number: CAT080033352

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. [redacted] OIL ( NON RCRA ) HAZARDOUS WASTE (Non-RCRA) | 001 | T | 30100 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

12. Containers c.
13. Total Quantity
14. Unit Wt/Vol

12. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
EMERGENCY CONTACT
805-253-5265

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | [signature] | 10 | 10 | 91 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| DAVID SUTHERLAND | [signature] | 10 | 12 | 91 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Raul Galvan | [signature] | 10 | 10 | 91 |

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER (800) 424-8802, PUBLIC SAFETY OFFICIAL OR LOCAL FIRE DEPARTMENT

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

OW 01732

Welfare Agency
050—0039 (Expires 9-30-91)
Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# ORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77171

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
ER TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-0380

A. State Manifest Document Number: 88377171

B. State Generator's ID: [illegible]

C. State Transporter's ID: [illegible]

D. Transporter's Phone: [illegible]

E. State Transporter's ID:

F. Transporter's Phone:

G. State Facility's ID:

H. Facility's Phone: [illegible]

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

7. Transporter 2 Company Name:

8. US EPA ID Number:

9. Designated Facility Name and Site Address
[illegible]
2000 N. ALAMEDA ST.
COMPTON, CA. 90222

10. US EPA ID Number: CAT080023352

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. [illegible] SOLUBLE OIL ( NON RCRA ) HAZARDOUS WASTE (Liquid) | 001 | TT | 03000 | G | [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

[illegible]

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING

EMERGENCY CONTACT
805-253-5265

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 | Signature | Month Day Year |
|---|---|---|
| Chuck Y[illegible] | [signature] | 01 07 91 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| David S[illegible] | [signature] | 01 07 91 |

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 | Signature | Month Day Year |
|---|---|---|
| | | |

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

# Certificate of Treatment/Recycling

ISSUED TO

HR Textron

FOR

MANIFEST NUMBER 8837171 DATE RECEIVED 1-7-91

*The aqueous waste received on the above manifest will be treated to standards mandated by the FEDERAL CLEAN WATER ACT and to effluent requirements established by the Sanitation Districts of Los Angeles County. Waste treatment and recycling is performed under permits granted to DeMENNO/KERDOON, a California corporation, by the California Department of Health Services, in coordination with the Environmental Protection Agency, in accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations including but not limited to waste discharge requirements established by the Sanitation Districts of Los Angeles County.*

*When the above described waste material is accepted by DeMENNO/KERDOON and treated/recycled and the aqueous phase discharged for further treatment by the Sanitation Districts, the certificate holder's responsibility for the waste material is eliminated under both RCRA and Proposition 65. Upon request, DeMENNO/KERDOON will issue this certificate that all waste material has been handled in accordance with applicable permits and the certificate holder's liability has been terminated.*

DeMENNO/KERDOON

"Compliance Through Recycling"

By: Casey K. Yu 1-13-91

Date

Casey K. Yu, B.S., M.S.
Environmental Compliance Mgr.
Chief Chemist

2000 NORTH ALAMEDA STREET ☐ COMPTON ☐ CALIFORNIA ☐ 90222
(213) 537-7100 ☐ FACSIMILE (213) 639-2946

© GOES 440

LITHO IN U.S.A.

Health and Welfare Agency
OMB No. 2050—0039 (Expires 9-30-91)
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. CAD041162330 | Manifest Document No. 00407 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: H.K. Textron, 10445 Glencoaks Blvd., Pacoima, CA 91331

4. Generator's Phone: 818 890-9380

A. State Manifest Document Number: 90017280

B. State Generator's ID: HYHQ36-008695

5. Transporter 1 Company Name: Martin Ind. Pumping | 6. US EPA ID Number: CAD000628636

C. State Transporter's ID:

D. Transporter's Phone: 805-[illegible]

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: Norris Environmental, 5215 So. Boyle Ave., Los Angeles, CA 90058 | 10. US EPA ID Number: CAD097030993

G. State Facility's ID:

H. Facility's Phone: 213-[illegible]-7111

| 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 Alkaline (Corrosive) Liquid N.O.S. (Sodium Hydroxide) Corrosive Material NA 1719 | 001 | DF | 00055 | G | [illegible] |
| b. Waste Corrosive Liquid N.O.S. (~~Ferrous~~ Sulfate) Corrosive Material UN 1760 | 001 | DF | 00055 | G | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) Alkaline Cleaner
b) ~~Ferrous~~ Sulfate
Profile # E1139 [illegible]4

K. [illegible]

15. Special Handling Instructions and Additional Information: E.R. Guide #60 / Wear Personal Protective Clothing & Equip.
E.R. Contact Chuck Youngblood 805-253-5265

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 | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DONALD BYER | Signature: Donald Byer | Month Day Year: 02 20 91

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 | Signature | Month Day Year

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

90017280

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 02209
2. Page 1 of 1

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

3. Generator's Name and Mailing Address: H.R. Textron, 10445 Glenoaks Blvd., Pacoima, CA 91331
4. Generator's Phone: 818 890-9380

A. State Manifest Document Number: 90017280
B. State Generator's ID: HYHQ36-00868[illegible]

5. Transporter 1 Company Name: Martin IND. Pumping
6. US EPA ID Number: CAD000628636

C. State Transporter's ID: [illegible]
D. Transporter's Phone: [illegible]

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: Norris Environmental, 5215 So. Boyle Ave., Los Angeles, CA 90058
10. US EPA ID Number: CAD097030993

[illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. Waste Alkaline (Corrosive) Liquid N.O.S. (Sodium Hydroxide) Corrosive Material NA 1719 | 001 | DF | 00055[illegible] | [illegible] |
| b. Waste Corrosive Liquid N.O.S. (Sulfate) Corrosive Material UN 1760 | 001 | DF | [illegible] | [illegible] |
| c. | | | | |
| d. | | | | |

[illegible]

15. Special Handling Instructions and Additional Information: E.R. Guide #60 / Wear Personal Protective Clothing & Equip. E.R. Contact Chuck Young John 805-253-5265

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 | Signature | Month Day Year |
|---|---|---|
| CHUCK YOUNG JOHN | [signature] | 02 20 91 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| DONALD BYER | Donald Byer | 02 20 91 |

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 | Signature | Month Day Year |
|---|---|---|
| BI TIN VELASCO | Bi Tin Velasco | 02 28 91 |

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Depa
Toxic Su

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
Manifest Document No.: 77158
2. Page 1 of 1
Information in the sha is not required by Fede

3. Generator's Name and Mailing Address
[illegible] - 10445 GLENOAKS BLVD.
[illegible], CA. 91831
4. Generator's Phone (818) [illegible]

A. State Manifest Document Number: 88377158
B. State Generator's ID: [illegible]
C. State Transporter's ID: [illegible]
D. Transporter's Phone: [illegible]
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: [illegible]
H. Facility's Phone: [illegible]

5. Transporter 1 Company Name: [illegible] INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: [illegible]/[illegible] [illegible] ST. [illegible], CA. 90222
10. US EPA ID Number: CAT080013352

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. [illegible] OIL ( NON RCRA ) HAZARDOUS WASTE LIQUID | 001 | TT | 02100 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

[illegible]

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING ***EMERGENCY CONTACT 805-253-5265***

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 | Signature | Month Day Year |
|---|---|---|
| Chuck Young-John | Chuck Young | 02 25 91 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| Larry Ramirez | Larry Ramirez | 02 25 91 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| | | |

19. Discrepancy Indication Space

...ion of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| | Signature | Month Day Year |
|---|---|---|
| Spaggins | Curt Spaggins | 02 25 91 |

Do Not Write Below This Line

...ate.

Yell... TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

C/W03196

88377158

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

...elfare Agency
...0039 (Expires 9-30-91)
...m designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# ...RM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330
Manifest Document No.: 77158
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
NR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91831

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377158
B. State Generator's ID: [illegible]
C. State Transporter's ID: [illegible]
D. Transporter's Phone: [illegible]
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: [illegible]

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636

7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address
[illegible]/KERBOGN
2000 N. ALAMEDA ST.
COMPTON, CA. 90222

10. US EPA ID Number: CAT080013352

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. SOLUBLE OIL ( NON RCRA ) HAZARDOUS WASTE LIQUID | 001 | TT | 02190 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

[illegible]

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING ***EMERGENCY CONTACT 805-253-5265***

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: [illegible] Signature: [illegible] Month Day Year: 02 23 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry Ramirez Signature: Larry Ramirez Month Day Year: 04 09 91

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: Signature: Month Day Year:

GENERATOR

TRANSPORTER

FACILITY

88377158

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

# Certificate of Treatment/Recycling

ISSUED TO

H R Textron

FOR

MANIFEST NUMBER 8837758 DATE RECEIVED 2/25/91

*The aqueous waste received on the above manifest will be treated to standards mandated by the FEDERAL CLEAN WATER ACT and to effluent requirements established by the Sanitation Districts of Los Angeles County. Waste treatment and recycling is performed under permits granted to DeMENNO/KERDOON, a California corporation, by the California Department of Health Services, in coordination with the Environmental Protection Agency, in accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations including but not limited to waste discharge requirements established by the Sanitation Districts of Los Angeles County.*

*When the above described waste material is accepted by DeMENNO/KERDOON and treated/recycled and the aqueous phase discharged for further treatment by the Sanitation Districts, the certificate holder's responsibility for the waste material is eliminated under both RCRA and Proposition 65. Upon request, DeMENNO/KERDOON will issue this certificate that all waste material has been handled in accordance with applicable permits and the certificate holder's liability has been terminated.*

DeMENNO/KERDOON

"Compliance Through Recycling"

By: Casey K. Yu 3/1/91
Date

Casey K. Yu, B.S., M.S.
Environmental Compliance Mgr.
Chief Chemist

2000 NORTH ALAMEDA STREET ☐ COMPTON ☐ CALIFORNIA ☐ 90222
(213) 537-7100 ☐ FACSIMILE (213) 639-2946

© GOES 440

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 77164

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( [illegible] ) [illegible]

A. State Manifest Document Number: 88377164

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: [illegible] CORP.

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: [illegible]

D. Transporter's Phone: [illegible]

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
[illegible] CORP.
[illegible] AVE. INGLEWOOD, CA. [illegible]

10. US EPA ID Number: CAD008364432

G. State Facility's ID: [illegible]

H. Facility's Phone: [illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. WASTE PETROLEUM NAPTHA, COMBUSTIBLE LIQUID UN1255 | 006 | DM | 00300 | G |
| b. HAZARDOUS WASTE LIQUID N.O.S., ORM-E NA9189 P001 | 001 | DM | 00050 | G |
| c. HAZARDOUS WASTE LIQUID N.O.S., ORM-E NA9189 | 009 | DM | 00450 | G |
| d. [illegible] | 002 | [illegible] | [illegible] | G |

[illegible]

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
**** EMERGENCY CONTACT**** 805-253-5265

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 | Signature | Month Day Year |
|---|---|---|
| CHUCK YOUNGJOHN | Chuck Youngjohn | 02 01 91 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| Greg Curtis 58633 | [signature] (18) | 02 01 91 |

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 [illegible] materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| Tony Gaeta | Tony Gaeta | 02 01 91 |

THIS IS OUR 40th ANNIVERSARY THANKS TO YOU

[illegible] Write Below This Line

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

88377164

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

...of California—Health and Welfare Agency
...m Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377164

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77164

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( [illegible] 890-9380

A. State Manifest Document Number: 88377164

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: [illegible]-CHEM CORP.

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: 1119[illegible]

D. Transporter's Phone: [illegible]

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
[illegible]-CHEM CORP.
425 ISIS AVE. INGLEWOOD, CA. 90301

10. US EPA ID Number: CAD008364432

G. State Facility's ID

H. Facility's Phone: [illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. WASTE PETROLEUM NAPTHA, COMBUSTIBLE LIQUID UN1255 | 006 | DM | 00300 | G |
| b. HAZARDOUS WASTE LIQUID N.O.S., OHM-E HA9189 F001 | 001 | DM | 00050 | G |
| c. HAZARDOUS WASTE LIQUID N.O.S., OHM-E HA9189 | 009 | DM | 00450 | G |
| d. WASTE XXX TRICHLOROETHANE(DO)OHM-A HN2831 | 002 | [illegible] | 00100 | G |

[illegible]

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING
**** EMERGENCY CONTACT**** 805-253-5265

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 | Signature | Month Day Year |
|---|---|---|
| CHUCK Y[illegible]-JHN | [signature] | 02 01 91 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| Greg Curtis 52633 | [signature] (18) | 02 01 91 |

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 | Signature | Month Day Year |
|---|---|---|
| | | |

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88377163

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77163

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377163

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: RMO-CHEM CORP.

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: [illegible]

D. Transporter's Phone: [illegible]

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
RMO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301

10. US EPA ID Number: CAD008364432

G. [illegible]

H. Facility's Phone: [illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. WASTE ISOPROPANOL SOLUTION/FLAMMABLE LIQUID UN1219 | 001 | DM | 00050 | G |
| b. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID NA1993 | 001 | DM | 00050 30 | G |
| c. | | | | |
| d. | | | | |

[illegible]

15. Special Handling Instructions and Additional Information 7039 (JP-4)
USE GLOVES AND GOGGLES WHEN HANDLING
***EMERGENCY CONTACT**** 805-253-5265

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 | Signature | Month Day Year |
|---|---|---|
| CHUCK YUNGJOHN | Chuck Yungjohn | 02 01 91 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| Greg Curtis 58633 | [signature] (2) | 02 01 91 |

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 [illegible] dous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| Tony Gaeta | Tony Gaeta | 02 01 91 |

THIS IS OUR 40th ANNIVERSARY THANKS TO YOU

Not Write Below This Line

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

...alifornia—Health and Welfare Agency
...pproved OMB No. 2050—0039 (Expires 9-30-91)
...e 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.: CAD041162330 — Manifest Document No.: 77163
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone ( 818 890-9380

A. State Manifest Document Number: 88377163
B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: RHO-CHEM CORP.
6. US EPA ID Number: CAD008364432
C. State Transporter's ID: 111442
D. Transporter's Phone: 213-776-6233

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
RHO-CHEM CORP.
425 IRIS AVE.
INGLEWOOD, CA. 90301
10. US EPA ID Number: CAD008364432
G. State Facility's ID:
H. Facility's Phone: [illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. WASTE ISOPROPANOL SOLUTION/FLAMMABLE LIQUID UN1219 | 001 | DM | 00050 | G |
| b. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID NA1993 | 001 | DM | 00050 30 | G |
| c. | | | | |
| d. | | | | |

J. Additional Descriptions for Materials Listed Above
A. [illegible]
B. [illegible] 80%
[illegible] 20%
[illegible] 5%
[illegible] .025%

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
7039 (JP-4)
USE GLOVES AND GOGGLES WHEN HANDLING
***EMERGENCY CONTACT**** 805-253-5265

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: CHUCK [illegible] — Signature: [signature] — Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Greg Curtis 58633 — Signature: [signature] (2) — Month Day Year: 02 01 91

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: — Signature: — Month Day Year:

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

88377163

HS 8022 A (1/88)
PA 8700—22
Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD064113129 | | | |

| 3. Generator's Name and Mailing Address | A. State Manifest Document Number |
|---|---|
| HR TEXTRON - 10445 GLENOAKS BLVD. PACOIMA, CA. 91331 | 88377156 |
| 4. Generator's Phone ( 818 ) 899-9300 | B. State Generator's ID |

| 5. Transporter 1 Company Name | 6. US EPA ID Number | C. State Transporter's ID |
|---|---|---|
| MARVIN INDUSTRIAL PUMPING | CAD009822362 | D. Transporter's Phone |
| 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 | 10. US EPA ID Number | G. State Facility's ID |
|---|---|---|
| KEARFOTT/KEARFOTT 2058 E. ALAMEDA ST. COMPTON, CA. 90222 | CAT080011352 | H. Facility's Phone 310-639-0500 |

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. SOLIDS SOL. (NOS DOTA) HAZARDOUS WASTE LIQUID | 001 | DM | 02451010 | G | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING EMERGENCY CONTACT 805-253-1365

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK | | | | |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | 12 | 31 | |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

**GENERATOR**

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

88377156

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

...and Welfare Agency)
...6. 2050—0039 (Expires 9-30-91) 7620
...(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. | Manifest Document No.: CAD064113623307715 6

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
[redacted] - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone ( 818 ) [redacted]

A. State Manifest Document Number: 88377156
B. State Generator's ID: [redacted]

5. Transporter 1 Company Name | 6. US EPA ID Number: CAD009622846
[redacted]
C. State Transporter's ID: [redacted]
D. Transporter's Phone: [redacted]

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 | 10. US EPA ID Number: CAT080013352
[redacted]/KEARNEY
2000 N. ALAMEDA ST.
COMPTON, CA. 90222
G. State Facility's ID: CAT080022352
H. Facility's Phone: [redacted]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. [redacted] OIL (NON RCRA) HAZARDOUS WASTE LIQUID | 002 | | 01215100 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

E. Special Handling Instructions for Materials Listed Above
[redacted]

F. Transporter Codes for Items a & b
a. 2
b.
c.

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING EMERGENCY CONTACT 805-253-5265

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK YOUNGJOHN | [signature] | 10 | 31 | 91 |

GENERATOR

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| JAMES SMITH | [signature] | 10 | 31 | 91 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CURT SPRINGER | [signature] | 10 | 31 | 91 |

Do Not Write Below This Line

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Yellow: TS SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

CLW 04157

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

# Certificate of Treatment/Recycling

ISSUED TO

H. R. Pentron

FOR

MANIFEST NUMBER 8837154 DATE RECEIVED 3/21/91

*The aqueous waste received on the above manifest will be treated to standards mandated by the FEDERAL CLEAN WATER ACT and to effluent requirements established by the Sanitation Districts of Los Angeles County. Waste treatment and recycling is performed under permits granted to DeMENNO/KERDOON, a California corporation, by the California Department of Health Services, in coordination with the Environmental Protection Agency, in accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations including but not limited to waste discharge requirements established by the Sanitation Districts of Los Angeles County.*

*When the above described waste material is accepted by DeMENNO/KERDOON and treated/recycled and the aqueous phase discharged for further treatment by the Sanitation Districts, the certificate holder's responsibility for the waste material is eliminated under both RCRA and Proposition 65. Upon request, DeMENNO/KERDOON will issue this certificate that all waste material has been handled in accordance with applicable permits and the certificate holder's liability has been terminated.*

DeMENNO/KERDOON

"Compliance Through Recycling"

By: Casey K. Yu 4/2/91

Date

Casey K. Yu, B.S., M.S.
Environmental Compliance Mgr.
Chief Chemist

2000 NORTH ALAMEDA STREET ☐ COMPTON ☐ CALIFORNIA ☐ 90222
(213) 537-7100 ☐ FACSIMILE (213) 639-2946

2166-04749

...and Welfare Agency
...2050—0039 (Expires 9-30-91)
(Form designed for use on elite (12-pitch typewriter).

#6963

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77157
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: [illegible] - 10445 GLENOAKS BLVD. PACOIMA, CA. 91332
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 88377157
B. State Generator's ID: [illegible]
C. State Transporter's ID: [illegible]
D. Transporter's Phone: [illegible]
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAT080013352
H. Facility's Phone: [illegible]

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: [illegible]/KERBOON, [illegible] N. ALAMEDA ST., [illegible], CA. 90222
10. US EPA ID Number: CAT080013352

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. [illegible] OIL (NON RCRA) HAZARDOUS WASTE LIQUID | 001 | TT | 3099 | [illegible] |
| b. | | | | |
| c. | | | | |
| d. | | | | |

[illegible] Descriptions for Materials Listed Above
[illegible]
[illegible] OIL — [illegible]
[illegible] SOLVENT — <1% — <1%

[illegible]

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING  EMERGENCY CONTACT [illegible]

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: [illegible] Russell JR — Signature: [illegible] — Month Day Year: 03 05 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: David Sutherland — Signature: [illegible] — Month Day Year: 03 05 91

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: James P. Ates — Signature: [illegible] — Month Day Year: 03 05 91

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

88377157

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yes TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

C1W03513

Welfare Agency
0—0039 (Expires 9-30-91)
orm designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# ORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77157

2. Page 1 of 1

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

3. Generator's Name and Mailing Address: [illegible] - 10445 GLENOAKS BLVD. PACOIMA, CA. 91332

4. Generator's Phone (818) 890-9300

A. State Manifest Document Number: 88377157

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: [illegible]

D. Transporter's Phone: [illegible]

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: [illegible]/[illegible] 2000 N. ALAMEDA ST. [illegible], CA. [illegible]

10. US EPA ID Number: CAT080013352

G. State Facility's ID: [illegible]

H. Facility's Phone: [illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. SOLUBLE OIL (NON RCRA) HAZARDOUS WASTE LIQUID | 001 | TT | 3000 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING  EMERGENCY CONTACT 805-253-5265

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: [illegible] Russell [illegible] — Signature: [illegible] — Month Day Year: 03 05 91

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: David Sullivan — Signature: [illegible] — Month Day Year: 03 05 91

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: — Signature: — Month Day Year:

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

# Certificate of Treatment/Recycling

ISSUED TO

H R Textron

FOR

MANIFEST NUMBER 8837157 DATE RECEIVED 3/8/91

*The aqueous waste received on the above manifest will be treated to standards mandated by the FEDERAL CLEAN WATER ACT and to effluent requirements established by the Sanitation Districts of Los Angeles County. Waste treatment and recycling is performed under permits granted to DeMENNO/KERDOON, a California corporation, by the California Department of Health Services, in coordination with the Environmental Protection Agency, in accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations including but not limited to waste discharge requirements established by the Sanitation Districts of Los Angeles County.*

*When the above described waste material is accepted by DeMENNO/KERDOON and treated/recycled and the aqueous phase discharged for further treatment by the Sanitation Districts, the certificate holder's responsibility for the waste material is eliminated under both RCRA and Proposition 65. Upon request, DeMENNO/KERDOON will issue this certificate that all waste material has been handled in accordance with applicable permits and the certificate holder's liability has been terminated.*

DeMENNO/KERDOON

"Compliance Through Recycling"

By: Casey K. Yu 3/14/91
Date

Casey K. Yu, B.S., M.S.
Environmental Compliance Mgr.
Chief Chemist

2000 NORTH ALAMEDA STREET ☐ COMPTON ☐ CALIFORNIA ☐ 90222
(213) 537-7100 ☐ FACSIMILE (213) 639-2946

2166-04749

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) #7907
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.: CAD041162330
Manifest Document No.: 77153
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
ER TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331
4. Generator's Phone: 818 - 890-0300

A. State Manifest Document Number: 88377153
B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING
6. US EPA ID Number: CAD000628636
C. State Transporter's ID:
D. Transporter's Phone: [illegible]

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
[illegible]/KERDOON
[illegible] N. ALAMEDA ST.
[illegible], CA. 90222
10. US EPA ID Number: CAT080012352
G. State Facility's ID: [illegible]
H. Facility's Phone: [illegible]

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. [illegible] OIL (NON RCRA) HAZARDOUS WASTE LIQUID | 001 | TT | 2900 | [illegible] |
| b. | | | | |
| c. | | | | |
| d. | | | | |

[illegible]

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING EMERGENCY CONTACT 805-253-5265

RECEIVED 15 1991 PURCHASING

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: CHUCK YONGJOHN
Signature: [signature]
Month Day Year: 03 29 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: BONNIE REINA
Signature: [signature]
Month Day Year: 03 28 91

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: [signature]
Signature: [signature]
Month Day Year: 03 29 91

GENERATOR — TRANSPORTER — FACILITY

88377153

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 (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

01W04429

Department of Health Services
Toxic Substances Control Division
Sacramento, California

(12-pitch typewriter).

# ...DOUS MANIFEST

1. Generator's US EPA ID No.: CAD041162330 — Manifest Document No.: 77153

2. Page 1 of 1

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

...tor's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 899-9380

A. State Manifest Document Number: 88377153

B. State Generator's ID: [illegible]

C. State Transporter's ID:

D. Transporter's Phone: [illegible]

E. State Transporter's ID:

F. Transporter's Phone:

G. State Transporter's ID:

H. Transporter's Phone:

5. Transporter 1 Company Name: MARTIN INDUSTRIAL PUMPING

6. US EPA ID Number: CAD000628636

7. Transporter 2 Company Name:

8. US EPA ID Number:

9. Designated Facility Name and Site Address
[illegible]
[illegible] N. ALAMEDA ST.
COMPTON, CA. 90222

10. US EPA ID Number: CAT080013352

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol |
|---|---|---|---|---|
| a. SOLUBLE OIL (NON RCRA) HAZARDOUS WASTE LIQUID | 001 | TT | 2900 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

[illegible]

15. Special Handling Instructions and Additional Information

USE GLOVES AND GOGGLES WHEN HANDLING EMERGENCY CONTACT 805-253-5265

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: Chuck [illegible] — Signature: [illegible] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year

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: — Signature: — Month Day Year

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

88377153

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

# Certificate of Treatment/Recycling

ISSUED TO

HR Petroleum

FOR

MANIFEST NUMBER 8837153 DATE RECEIVED 3/29/91

*The aqueous waste received on the above manifest will be treated to standards mandated by the FEDERAL CLEAN WATER ACT and to effluent requirements established by the Sanitation Districts of Los Angeles County. Waste treatment and recycling is performed under permits granted to DeMENNO/KERDOON, a California corporation, by the California Department of Health Services, in coordination with the Environmental Protection Agency, in accordance with the provisions of the Resource Conservation and Recovery Act (RCRA) of 1976, together with applicable federal and state regulations including but not limited to waste discharge requirements established by the Sanitation Districts of Los Angeles County.*

*When the above described waste material is accepted by DeMENNO/KERDOON and treated/recycled and the aqueous phase discharged for further treatment by the Sanitation Districts, the certificate holder's responsibility for the waste material is eliminated under both RCRA and Proposition 65. Upon request, DeMENNO/KERDOON will issue this certificate that all waste material has been handled in accordance with applicable permits and the certificate holder's liability has been terminated.*

DeMENNO/KERDOON

"Compliance Through Recycling"

By: Casey K. Yu 4/10/91

Date

Casey K. Yu, B.S., M.S.
Environmental Compliance Mgr.
Chief Chemist

2000 NORTH ALAMEDA STREET □ COMPTON □ CALIFORNIA □ 90222
(213) 537-7100 □ FACSIMILE (213) 639-2946

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

See Instructions on Back of Page 6 and Front of Page 7

Department of Toxic Substances Control Division, Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD041116230 | 2444732 | | |

**GENERATOR**

3. Generator's Name and Mailing Address
H. R. TEXTRON
10445 GLENOAKS BLVD. - PACOIMA, CA 91331
4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 9042432
B. State Generator's ID: 4 Y W A 2 K - 0 0 2 8 0 5
C. State Transporter's ID: 415
D. Transporter's Phone: (805) 253-5265
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:

5. Transporter 1 Company Name: MARTIN INC PENSKE, INC.
6. US EPA ID Number: CAD 0 0 0 6 2 8 6 3 6
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address
APPROPRIATE TECHNOLOGY II
1700 MAXWELL RD.
CHULA VISTA, CA. 92011
10. US EPA ID Number: CAT 0 8 0 0 1 0 4 0 1

| 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. (111 TRICHLOROETHANE) ORM-E, NA 9189 (F002) | 001 | TT | 00400 | G | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
SOIL CONTAMINATED WITH HALOGENATED ORGANICS.
CERCLA # 2500

16. Special Handling Instructions and Additional Information
WEAR GLOVES, GOGGLES, PROTECTIVE CLOTHING & AIR PURIFIED RESPIRATORY GEAR.
EMERGENCY CONTACT #31/24 HR. EMERGENCY CONTACT #(805) 253-5265.

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| CHUCK [illegible] | [signature] | 06 | 14 | 91 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| JAMES [illegible] | [signature] | 06 | 18 | 91 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | | | |

**FACILITY**

19. Discrepancy Indication Space
211 FCCI 1.67

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| PAUL P. JOHNSON | [signature] | 06 | 19 | 91 |

Do Not Write Below This Line

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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

9042432

# APPROPRIATE TECHNOLOGIES, INC.
## CALIFORNIA LAND DISPOSAL RESTRICTION NOTIFICATION

**PART I: Generator Information.**

GENERATOR NAME HR TEKTRON

~~CAT000604193~~ CAD041162330 | 9042443 2 | 2908

EPA ID # | MANIFEST # | PROFILE #

The waste(s) identified on the above referenced manifest and bearing the California waste number(s) identified below is subject to the Land Disposal Restrictions of CCR, Title 22, Chapter 30.

**PART II: Waste Identification.**

California waste number(s) 211 23 T

Check the appropriate lines. (More than one line may apply.)

X 1. RCRA regulated waste

____ 2. Non-RCRA metal-containing aqueous waste identified on CCR, Title 22, 67702(b) (1).

____ 3. PCB wastes identified in CCR, Title 22, 67702(b) (2). (Not acceptable at APTEC)

____ 4. Non-RCRA metal-containing solid waste identified in CCR, Title 22, 67702(b) (7). Prohibition effective date May 8, 1992.

____ 5. Non-RCRA aqueous and liquid waste containing any organic compound identified by EPA Test Methods 8080, 8140, 8150, 8240, and/or 8270. Prohibition effective date May 8, 1992. (Reference CCR, Title 22, 67702 (b)(10).)

____ 6. Non-RCRA solid waste containing any organic compound identified by EPA Test Methods 8080, 8140, 8150, 8240, and/or 8270. Prohibition effective date May 8, 1992. (Reference CCR, Title 22, 67702 (b)(11).)

____ 7. Other Non-RCRA, California regulated waste, category includes lab packs, California extremely small quantity generators, and household hazardous waste exempted in the Health and Safety Code Section 25179.9.

**PART III: Handling Method.**

Check the appropriate lines. (More than one line may apply.)

X 1. The RCRA waste identified above must be handled in accordance with the attached EPA LAND DISPOSAL RESTRICTION NOTIFICATION.

____ 2. The waste identified above must be treated to meet the applicable standards in CCR, Title 22, Division 4, Chapter 30, Article 41.

____ 3. The waste identified above meets the applicable treatment standard.
"I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in CCR Title 22, Division 4, Chapter 30, Article 41. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

____ 4. The waste identified above is subject to a variance. The expiration date of the variance is indicated in the WASTE IDENTIFICATION section above.

____ 5. The Non-RCRA waste identified above is not currently restricted from land disposal.

**PART IV: Generator Certification.**

I hereby certify that all information supplied above and on all associated documents is true, complete and accurate to the best of my knowledge and that no omissions or errors exist.

Signature [signature] Date: 4-8-91

Print or Type Name: CHUCK YOUNGBLOOD

Title: HAZ. WASTE COORD.

ATTACHMENT I
ADDITIONAL NOTIFICATION FOR F001-F005, AND CALIFORNIA LIST WASTES

# ATTACHMENT II
# EXTENSIONS, VARIANCES, EXCEPTIONS

**For Part II, Line B-6 of the Notification Form** This waste is (check one):

_____ A. Soil or debris contaminated with waste specified in 268.34 for which the treatment standard is based on incineration per Attachment III variance valid until June 8, 1991.

_____ B. Soil or debris contaminated with wastes specified in 268.35 for which the treatment standard is based on incineration, mercury retorting, vitrification or wet-air oxidation, per Attachment III (variance valid until May 8, 1992).

_____ C. A waste specified in 268.35 (a) — per Attachment III ____NWW____WW

_____ D. A waste specified in 268.35 (c) — per Attachment III — (variance valid until May 8, 1992) ____NWW____WW.
**NOTE:** NWW = Nonwastewater and WW = Wastewater.

**For Part II, Line B-8 of the Notification Form.** This waste is:

_____ E. Subject to a case-by-case extension, pursuant to 40 CFR 268.5, granted by_____on_____
(attach copy)

_____ F. Subject to a treatability variance, pursuant to 40 CFR 268.44, granted by_____on_____
(attach copy)

**For generators or treaters who have checked Part II, Line B-9 of the Notification Form:**

**Instructions:** Check Line 1, 2, or 3 below. If checking Line 1 or 2 below, attach supporting analytical results. If checking Line 2, and if appropriate, also check Line 4. Sign and date below.

1. **For generators** who have determined that their waste meets treatment standards (268.7(a)(2)(ii):

_____I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

2. **For treatment facilities** which have treated the waste so that it meets the required numerical treatment standards (268.7(b)(5)(i):

_____I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information. I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

If the certification in Line 2 above is based in whole or part on the "analytical detection limit alternative" (268.3(c), check the following certification.

_____I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater (NWW) organic constituents have been treated by incineration in units operated in accordance with 40 CFR Part 264 Subpart 0 or Part 265 Subpart 0, or by combustion in fuel substitution units operating in accordance with applicable technical requirements, and I have been unable to detect the nonwastewater organic constituents despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

3. **For treatment facilities** which have treated the waste with the required treatment technology specified in 268.42 (certification per 268.7(b)(5)(ii):

_____I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.42. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

**AUTHORIZED REPRESENTATIVE**

Signature Chuck Youngtown Date 4-8-91

Print or Type Name CHUCK YOUNGTOWN

Title: HAZ. WASTE COORD.

... Line B-8 of the Notification Form This waste is (check one):

_____ A. Soil or debris contaminated with waste specified in 268.34 for which the treatment standard is based on incineration per Attachment III variance valid until June 8, 1991.

_____ B. Soil or debris contaminated with wastes specified in 268.35 for which the treatment standard is based on incineration, mercury retorting, vitrification or wet-air oxidation, per Attachment III (variance valid until May 8, 1992).

_____ C. A waste specified in 268.35 (a) — per Attachment III ____NWW____WW

_____ D. A waste specified in 268.35 (c) — per Attachment III — (variance valid until May 8, 1992) ____NWW____WW.
NOTE: NWW = Nonwastewater and WW = Wastewater.

**For Part II, Line B-8 of the Notification Form.** This waste is:

_____ E. Subject to a case-by-case extension, pursuant to 40 CFR 268.5, granted by_____on_____
(attach copy)

_____ F. Subject to a treatability variance, pursuant to 40 CFR 268.44, granted by_____on_____
(attach copy)

**For generators or treaters who have checked Part II, Line B-9 of the Notification Form:**

**Instructions:** Check Line 1, 2, or 3 below. If checking Line 1 or 2 below, attach supporting analytical results. If checking Line 2, and if appropriate, also check Line 4. Sign and date below.

1. For generators who have determined that their waste meets treatment standards (268.7(a)(2)(ii):

_____I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

2. For treatment facilities which have treated the waste so that it meets the required numerical treatment standards (268.7(b)(5)(i):

_____I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information. I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

If the certification in Line 2 above is based in whole or part on the "analytical detection limit alternative" (268.3(c), check the following certification.

_____I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater (NWW) organic constituents have been treated by incineration in units operated in accordance with 40 CFR Part 264 Subpart 0 or Part 265 Subpart 0, or by combustion in fuel substitution units operating in accordance with applicable technical requirements, and I have been unable to detect the nonwastewater organic constituents despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

3. For treatment facilities which have treated the waste with the required treatment technology specified in 268.42 (certification per 268.7(b)(5)(ii):

_____I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.42. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

**AUTHORIZED REPRESENTATIVE**

Signature Chuck [illegible] Date 4-9-91

Print or Type Name CHUCK [illegible]

Title: HAZ. WASTE COORD.

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

See Instructions on Back of Page 6 and Front of Page 7

2166-04749

Department of Health Services
Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD009116230 | 2166728 | | |

3. Generator's Name and Mailing Address
H. K. TEXTRON
10445 GLENOAKS BLVD. - PACOIMA, CA.

4. Generator's Phone (818) 890-8903

A. State Manifest Document Number: 8042428

B. State Generator's ID: 19VW0136-00161

5. Transporter 1 Company Name: MARTIN IND. PUMPING, INC.

6. US EPA ID Number: CAD009612836

C. State Transporter's ID: 10751

D. Transporter's Phone: (805) 922-7883

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
U. S. ECOLOGY
U. S. HWY 95 - MILE. SOUTH
BEATTY, NEVADA 89003

10. US EPA ID Number: NVT330010000

G. State Facility's ID: NV330010000

H. Facility's Phone: (702) 553-2203

| 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. (ION EXCHANGE BEADS) NON-RCRA HAZARDOUS WASTE SOLID | 001 | DM | 001.15 | Y | [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
ION EXCHANGE BEADS
Waste Description: Iron Exchange beads
WS-07-007-3226

15. Special Handling Instructions and Additional Information
WEARS GLOVES, GOGGLES, PROTECTIVE CLOTHING & APPROPRIATE RESPIRATORY GEAR
24 HOUR EMERGENCY CONTACT # (818) 890-3380

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.

| GENERATOR | Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|---|
| | CHUCK YOUNGBLOOD | [signature] | 10 | 14 | 91 |

| TRANSPORTER | 17. Transporter 1 Acknowledgement of Receipt of Materials | | | | |
|---|---|---|---|---|---|
| | Printed/Typed Name | Signature | Month | Day | Year |
| | JACK STADLER | [signature] | 10 | 14 | 91 |
| | 18. Transporter 2 Acknowledgement of Receipt of Materials | | | | |
| | Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| DAVID TOLBERT | [signature] | 10 | 14 | 91 |

Do Not Write Below This Line

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. *Form designed for use on elite (12-pitch typewriter).*

See Instructions on Back of Page 6 and Front of Page 7

2166-04749

Toxic Substances Control Division
Sacramento, California

# UNIFORM HAZARDOUS WASTE MANIFEST

| 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|---|---|---|
| CAD041116233 | 04238911 | | |

3. Generator's Name and Mailing Address
H.R. Textron
10445 Glenoaks Blvd, Pacoima, CA 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 90424494

B. State Generator's ID: 19YR826-00A495

5. Transporter 1 Company Name: Martin Ind. Pumping

6. US EPA ID Number: CAD000628636

C. State Transporter's ID: 111

D. Transporter's Phone: 805-324-3502

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
Norris Environmental
5215 S. Boyle Ave.
Los Angeles, CA 90058

10. US EPA ID Number: CAD097030993

G. State Facility's ID: CAD097030993

H. Facility's Phone: 213-588-2111

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | Total Quantity | Unit Wt/Vol | 13. Waste No. |
|---|---|---|---|---|---|
| a. Hazardous Waste Liquid N.O.S. (Chrome) ORM-E NA 9189 | 001 | DM | 00055 | | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

Alkaline Cleaner Profile # E20[illegible]
E.R. Guide # 31

14. Special Handling Instructions and Additional Information
Wear Personal Protective clothing & Equipment E.R. Guide # 31
Emergency Contact Chuck Young/HW (805) 253-5265

15. 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Chuck Young | Chuck Young | 04 | 04 | 91 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Scott Lynch | Scott Lynch | 04 | 04 | 91 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| BI TIN VELASCO | Bi Tin Velasco | 04 | 04 | 91 |

**GENERATOR**

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

90424494

DHS 8022 A
EPA 8700—22
(Rev. 6-89) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

California Health and Welfare Agency
Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

2166-04749

Department of Health Services
Toxic Substances Control Division
Sacramento, California

90119806

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD041162330 | Manifest Document No.: 19806 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA, 91331
4. Generator's Phone ( 818 ) 890-9380

A. State Manifest Document Number: 90119806
B. State Generator's ID: HRH036008695

5. Transporter 1 Company Name: WESTATE CARBON
6. US EPA ID Number: CAD982403933
C. State Transporter's ID: 11230
D. Transporter's Phone: 213-722-7500

7. Transporter 2 Company Name: U.S. SERVICES
8. US EPA ID Number: CAD052453107
E. State Transporter's ID: 773798
F. Transporter's Phone: 714-371-1461

9. Designated Facility Name and Site Address
CAMERON YAKIMA
1414 S. FIRST ST.
YAKIMA, WASHINGTON 98901
10. US EPA ID Number: WAD009477175
G. State Facility's ID:
H. Facility's Phone: 509-452-6605

| 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 SOLID N.O.S. ORM-E NA9189 | 0218 | DM | 017000 | P | State 211 / EPA/Other F002 |
| b. | | | | | State / EPA/Other |
| c. | | | | | State / EPA/Other |
| d. 1 of 1 #0529 | | | | | State / EPA/Other |

J. Additional Descriptions for Materials Listed Above
WASTE SPENT CARBON CONTAMINATED WITH HALOGENATED ORGANICS

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

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
APPROVAL NO. 10-486
****EMERGENCY CONTACT #805-253-5265***

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 | Signature | Month Day Year |
|---|---|---|
| CHUCK [illegible] | [signature] | 10 15 91 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| TONI MEDINO | [signature] | 10 15 91 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| DAVID DE JESUS | [signature] | 10 15 91 |

**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 | Signature | Month Day Year |
|---|---|---|
| RON LE PAGE | [signature] | 10 15 91 |

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

2166-04749

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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.: CAD041162330 — Manifest Document No.: 19803

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
HR TEXTRON - 10445 GLENOAKS BLVD.
PACOIMA, CA. 91331

4. Generator's Phone (818) 890-9380

A. State Manifest Document Number: 90119803

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: RHO-CHEM CORP.

6. US EPA ID Number: CAD008364432

C. State Transporter's ID: [illegible]

D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone: [illegible]

9. Designated Facility Name and Site Address
RHO-CHEM CORP.
425 ISIS AVE.
INGLEWOOD, CA. 90301

10. US EPA ID Number: CAD008364432

| 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. NA1993 WASTE COMBUSTIBLE LIQUID N.O.S./PETROLEUM NAPTHA | 007 | DM | 00350 | G | [illegible] |
| b. WASTE III TRICHLOROETHANE/ORM-A UN2831 | 002 | [illegible] | 00100 | G | [illegible] |
| c. UN1219 WASTE ISOPROPANOL SOLUTION/FLAMMABLE LIQUID | 004 | [illegible] | 00200 | G | [illegible] |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
A. [illegible] 85%
[illegible] 15%
B. III TRICHLOROETHANE 85%
[illegible] 15%
C. ISOPROPYL [illegible] 85%
[illegible] 15%

15. Special Handling Instructions and Additional Information
USE GLOVES AND GOGGLES WHEN HANDLING
****EMERGENCY CONTACT 805-253-5265****

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: Chuck Young — Signature: Chuck Young — Month Day Year: 05 06 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOHN E HARRIS, JR (13) — Signature: [signature] — Month Day Year: 05 06 91

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: Tony Gaeta — Signature: [signature] — Month Day Year: 05 06 91

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

90119803

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

# RHO-CHEM CORPORATION

## RESTRICTED WASTE NOTIFICATION and CERTIFICATION FORM

This document is submitted to Rho-Chem Corporation in compliance with 40 CFR 268.7. The information provided within this document is based upon the land disposal restrictions and prohibitions under 40 CFR 268.

### I. SHIPMENT INFORMATION

GENERATOR NAME: HR TEXTRON RHO-CHEM PROFILE # 4242

EPA ID NO.: CAD041162330 MANIFEST/LINE NO. 90119803

1. Is the waste generated by a Conditionally Exempt Small Quantity Generator as defined by 40 CFR 261.5 (40 CFR 268.1 (c) (4))? Yes ☐ No ☒
   If yes, proceed to section III(E).
2. Is this waste a Wastewater or Non-Wastewater (40CFR 268.2)?
   Wastewater (WW) ☐ Non-Wastewater (NWW) ☒
3. Is the waste a F001-F005 Spent Solvent?
   Yes (check applicable constituents within Table 1) ☐ No ☒

**TABLE I**

| Constituent | WW | NWW | Constituent | WW | NWW | Constituent | WW | NWW |
|---|---|---|---|---|---|---|---|---|
| ☐ Acetone | 0.05 | 0.59 | ☐ Ethylbenzene | 0.05 | 0.053 | ☐ Toluene | 1 12 | 0.33 |
| ☐ Benzene (pharm ind.) | 0.070 | 3.7 | ☐ Ethyl ether | 0.05 | 0.75 | ☐ 1.1.1-Trichloroethane | 1.05 | 0.41 |
| ☐ n-Butyl alcohol | 5.0 | 5.0 | ☐ Isobutanol | 5.0 | 5.0 | ☐ 1,1,2-Trichloroethane | 0.030 | 7.6 |
| ☐ Carbon disulfide | 1.05 | 4.81 | ☐ Methanol | 0.25 | 0.75 | ☐ 1.1.2-Trichloro-1.2.2-trifluorethane | 1.05 | 0.96 |
| ☐ Carbon tetrachloride | 0.05 | 0.96 | ☐ Methylene Chloride | 0.20 | 0.96 | ☐ Trichlorofluormethane | 0.05 | 0.96 |
| ☐ Chlorobenzene | 0.15 | 0.05 | ☐ Methylene Chloride (pharm ind.) | 0.44 | NA | ☐ Trichloroethylene | 0.062 | 0-091 |
| ☐ Cresole | 2.82 | 0.75 | ☐ Methyl ethyl ketone | 0.05 | 0.75 | ☐ Xylene | 0.05 | 0.15 |
| ☐ Cresylic acid | 2.82 | 0.75 | ☐ Methyl isobutyl ketone | 0.05 | 0.33 | ☐ All of the above | | |
| ☐ Cyclohexanone | 0.125 | 0.75 | ☐ Nitrobenzene | 0.66 | 0.125 | | | |
| ☐ 1.2 Dichlorobenzene | 0.65 | 0.125 | ☐ 2-Nitropropane | TECHNOLOGY STD | | | | |
| ☐ 2-Ethoxyethanol | TECHNOLOGY STD. | | ☐ Pyridine | 1.12 | 0.33 | | | |
| ☐ Ethyl acetate | 0.05 | 0.75 | ☐ Tetrachloroethylene | 0.079 | 0.05 | | | |

4. Is the waste a F039 (attach constituent list)? Yes ☐ No ☒
5. Is the waste a Lab Pack?
   Yes (attach packing list and certification) ☐ No ☒
6. Is the waste a California List Waste for the Following:
   **PCB** ≥ 50ppm ☐ **Halogenated Organic Carbon (HOC's)** ≥ 1000mg/L. ☐ **PH** ≤ 2.0 ☐
   **Cyanide** ≥ 1000ppm ☐ or a **liquid hazardous waste**, including free liquid associated with any solid or sludge, containing the following metals:

| | | | | | |
|---|---|---|---|---|---|
| **ARSENIC** | ≥ 500mg/L ☐ | **CADMIUM** | ≥ 100 mg/L ☐ | **CHROMIUM** | ≥ 500mg/L ☐ |
| **NICKEL** | ≥ 134mg/L ☐ | **THALLIUM** | ≥ 130mg/L ☐ | **LEAD** | ≥ 500mg/L ☐ |
| **MERCURY** | ≥ 20mg/L ☐ | **SELENIUM** | ≥ 100mg/L ☐ | | |

### II. WASTE IDENTIFICATION

| | US EPA HAZARDOUS WASTE NO. | SUBCATEGORY IF APPLICABLE | | TREATMENT STANDARDS | | |
|---|---|---|---|---|---|---|
| | | | | CONCENTRATION BASED | | SPECIFIED TECHNOLOGY 268.42(a) |
| | | Description | None | 268.41(a) mg/L | 268.43(a) mg/kg | |
| 1 | D001 | High Tox, Ignit | | | | DEACT |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |

**Rho-Chem Corporation**
425 Isis Avenue
Inglewood, CA 90301
Phone: 213-776-6233

## III. RESTRICTIONS AND CERTIFICATION

Please identify the following sections that apply to this waste stream by placing a ☒ or ☑ in the appropriate box.

☒ A. **RESTRICTED WASTE EXCEEDS TREATMENT STANDARDS OR PROHIBITION LEVELS** (40 CFR 268.7(a) (1))

The restricted waste identified above must be treated to meet the applicable 40 CFR 268 Subpart D treatment standards or treated to comply with applicable prohibitions setforth in Part 268.32 or RCRA 3004(d). I have indicated the corresponding treatment standard(s) or prohibitions in this document and have attached all supporting data where available.

☐ B. **RESTRICTED WASTE TREATED TO MEET TREATMENT STANDARDS OR PROHIBITION LEVELS** (40 CFR 268.7 (b) (5) (i))

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that based on my inquiry of those individuals immediately responsible for obtaining this information. I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268, Subpart D, and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment."

☐ C. **RESTRICTED WASTE MEETS TREATMENT STANDARDS OR PROHIBITION LEVELS WITHOUT TREATMENT** (40 CFR 268.7 (a) (2))

"I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA 3004(d). I believe that the information I submitted is true, accurate, and complete. I am aware there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment."

☐ D. **RESTRICTED WASTE TREATED TO MEET A TREATMENT STANDARD EXPRESSED AS A TECHNOLOGY** (40 CFR 268.7(b) (5) (ii))

"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.42. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

☐ E. **RESTRICTED WASTE SUBJECT TO A VARIANCE**

This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. The date the waste is subject to the prohibition is _____.

## IV. GENERATOR CERTIFICATION

I hereby certify that all information provided in this and all associated documents is complete and accurate to the best of my knowledge and ability to determine. All waste analysis data, if available, has been previously submitted or is attached.

Name (Please Print) CHUCK YOUNGJOHN Signature Chuck Youngjohn

Title HAZARDOUS WASTE C[illegible] Date: 5

**REFERENCE AGENCIES:**

RCRA HOTLINE: 1-800-424-9346
CALIFORNIA DEPARTMENT of HEALTH SERVICES, TOXIC SUBSTANCES
CONTROL DIVISION: 818-567-3000; 916-324-1781
DEPARTMENT of TRANSPORTATION (DOT) HOTLINE: 202-366-4488
TSCA HOTLINE: 202-554-1404

# RHO-CHEM CORPORATION

## RESTRICTED WASTE NOTIFICATION and CERTIFICATION FORM

This document is submitted to Rho-Chem Corporation in compliance with 40 CFR 268.7. The information provided within this document is based upon the land disposal restrictions and prohibitions under 40 CFR 268.

### I. SHIPMENT INFORMATION

GENERATOR NAME: HR TEXTRON RHO-CHEM PROFILE # 1264

EPA ID NO.: CAD041162330 MANIFEST/LINE NO. 9011980 3

1. Is the waste generated by a Conditionally Exempt Small Quantity Generator as defined by 40 CFR 261.5 (40 CFR 268.1 (c) (4))? Yes ☐ No ☒
   If yes, proceed to section III(E).
2. Is this waste a Wastewater or Non-Wastewater (40CFR 268.2)?
   Wastewater (WW) ☐ Non-Wastewater (NWW) ☒
3. Is the waste a F001-F005 Spent Solvent?
   Yes (check applicable constituents within Table 1) ☐ No ☒

**TABLE I**

| Constituent | WW | NWW |
|---|---|---|
| ☐ Acetone | 0.05 | 0.59 |
| ☐ Benzene (pharm ind.) | 0.070 | 3.7 |
| ☐ n-Butyl alcohol | 5.0 | 5.0 |
| ☐ Carbon disulfide | 1.05 | 4.81 |
| ☐ Carbon tetrachloride | 0.05 | 0.96 |
| ☐ Chlorobenzene | 0.15 | 0.05 |
| ☐ Cresole | 2.82 | 0.75 |
| ☐ Cresylic acid | 2.82 | 0.75 |
| ☐ Cyclohexanone | 0.125 | 0.75 |
| ☐ 1.2 Dichlorobenzene | 0.65 | 0.125 |
| ☐ 2-Ethoxyethanol | TECHNOLOGY STD. | |
| ☐ Ethyl acetate | 0.05 | 0.75 |
| ☐ Ethylbenzene | 0.05 | 0.053 |
| ☐ Ethyl ether | 0.05 | 0.75 |
| ☐ Isobutanol | 5.0 | 5.0 |
| ☐ Methanol | 0.25 | 0.75 |
| ☐ Methylene Chloride | 0.20 | 0.96 |
| ☐ Methylene Chloride (pharm ind.) | 0.44 | NA |
| ☐ Methyl ethyl ketone | 0.05 | 0.75 |
| ☐ Methyl isobutyl ketone | 0.05 | 0.33 |
| ☐ Nitrobenzene | 0.66 | 0.125 |
| ☐ 2-Nitropropane | TECHNOLOGY STD | |
| ☐ Pyridine | 1.12 | 0.33 |
| ☐ Tetrachloroethylene | 0.079 | 0.05 |
| ☐ Toluene | 1.12 | 0.33 |
| ☐ 1.1.1-Trichloroethane | 1.05 | 0.41 |
| ☐ 1,1,2-Trichloroethane | 0.030 | 7.6 |
| ☐ 1.1.2-Trichloro-1.2.2-trifluorethane | 1.05 | 0.96 |
| ☐ Trichlorofluormethane | 0.05 | 0.96 |
| ☐ Trichloroethylene | 0.062 | 0-091 |
| ☐ Xylene | 0.05 | 0.15 |
| ☐ All of the above | | |

4. Is the waste a F039 (attach constituent list)? Yes ☐ No ☒
5. Is the waste a Lab Pack?
   Yes (attach packing list and certification) ☐ No ☒
6. Is the waste a California List Waste for the Following:
   **PCB** ≥ 50ppm ☐ **Halogenated Organic Carbon (HOC's)** ≥ 1000mg/L ☐ **PH** ≤ 2.0 ☐
   **Cyanide** ≥ 1000ppm ☐ or a **liquid hazardous waste**, including free liquid associated with any solid or sludge, containing the following metals:

| | | | | | |
|---|---|---|---|---|---|
| **ARSENIC** | ≥ 500mg/L ☐ | **CADMIUM** | ≥ 100 mg/L ☐ | **CHROMIUM** | ≥ 500mg/L ☐ |
| **NICKEL** | ≥ 134mg/L ☐ | **THALLIUM** | ≥ 130mg/L ☐ | **LEAD** | ≥ 500mg/L ☐ |
| **MERCURY** | ≥ 20mg/L ☐ | **SELENIUM** | ≥ 100mg/L ☐ | | |

### II. WASTE IDENTIFICATION

| | US EPA HAZARDOUS WASTE NO. | SUBCATEGORY IF APPLICABLE | | TREATMENT STANDARDS | | |
|---|---|---|---|---|---|---|
| | | | | CONCENTRATION BASED | | SPECIFIED TECHNOLOGY |
| | | Description | None | 268.41(a) mg/L | 268.43(a) mg/kg | 268.42(a) |
| 1 | D001 | H [illegible] | | | | DEACT |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |

**Rho-Chem Corporation**
425 Isis Avenue
Inglewood, CA 90301
Phone: 213-776-6233

## III. RESTRICTIONS AND CERTIFICATION

Please identify the following sections that apply to this waste stream by placing a ☒ or ☑ in the appropriate box.

☐ A. **RESTRICTED WASTE EXCEEDS TREATMENT STANDARDS OR PROHIBITION LEVELS** (40 CFR 268.7(a) (1))

The restricted waste identified above must be treated to meet the applicable 40 CFR 268 Subpart D treatment standards or treated to comply with applicable prohibitions setforth in Part 268.32 or RCRA 3004(d). I have indicated the corresponding treatment standard(s) or prohibitions in this document and have attached all supporting data where available.

☐ B. **RESTRICTED WASTE TREATED TO MEET TREATMENT STANDARDS OR PROHIBITION LEVELS** (40 CFR 268.7 (b) (5) (i))

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268, Subpart D, and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment."

☐ C. **RESTRICTED WASTE MEETS TREATMENT STANDARDS OR PROHIBITION LEVELS WITHOUT TREATMENT** (40 CFR 268.7 (a) (2))

"I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA 3004(d). I believe that the information I submitted is true, accurate, and complete. I am aware there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment."

☐ D. **RESTRICTED WASTE TREATED TO MEET A TREATMENT STANDARD EXPRESSED AS A TECHNOLOGY** (40 CFR 268.7(b) (5) (ii))

"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.42. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

☐ E. **RESTRICTED WASTE SUBJECT TO A VARIANCE**

This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. The date the waste is subject to the prohibition is _____.

## IV. GENERATOR CERTIFICATION

I hereby certify that all information provided in this and all associated documents is complete and accurate to the best of my knowledge and ability to determine. All waste analysis data, if available, has been previously submitted or is attached.

Name (Please Print) CHUCK [illegible] Signature [illegible]

Title HAZARDOUS WASTE [illegible] Date: [illegible]

**REFERENCE AGENCIES:**

RCRA HOTLINE: 1-800-424-9346
CALIFORNIA DEPARTMENT of HEALTH SERVICES, TOXIC SUBSTANCES CONTROL DIVISION: 818-567-3000; 916-324-1781
DEPARTMENT of TRANSPORTATION (DOT) HOTLINE: 202-366-4488
TSCA HOTLINE: 202-554-1404

# RHO-CHEM CORPORATION

## RESTRICTED WASTE NOTIFICATION and CERTIFICATION FORM

This document is submitted to Rho-Chem Corporation in compliance with 40 CFR 268.7. The information provided within this document is based upon the land disposal restrictions and prohibitions under 40 CFR 268.

### I. SHIPMENT INFORMATION

GENERATOR NAME: HR TEXTRON RHO-CHEM PROFILE # 1263

EPA ID NO.: CAD041162330 MANIFEST/LINE NO. 90119803

1. Is the waste generated by a Conditionally Exempt Small Quantity Generator as defined by 40 CFR 261.5 (40 CFR 268.1 (c) (4))? Yes ☐ No ☒
   If yes, proceed to section III(E).
2. Is this waste a Wastewater or Non-Wastewater (40CFR 268.2)?
   Wastewater (WW) ☐ Non-Wastewater (NWW) ☒
3. Is the waste a F001-F005 Spent Solvent?
   Yes (check applicable constituents within Table 1) ☒ No ☐

**TABLE I**

| Constituent | WW | NWW | Constituent | WW | NWW | Constituent | WW | NWW |
|---|---|---|---|---|---|---|---|---|
| ☐ Acetone | 0.05 | 0.59 | ☐ Ethylbenzene | 0.05 | 0.053 | ☐ Toluene | 1.12 | 0.33 |
| ☐ Benzene (pharm ind.) | 0.070 | 3.7 | ☐ Ethyl ether | 0.05 | 0.75 | ☒ 1.1.1-Trichloroethane | 1.05 | 0.41 |
| ☐ n-Butyl alcohol | 5.0 | 5.0 | ☐ Isobutanol | 5.0 | 5.0 | ☐ 1,1,2-Trichloroethane | 0.030 | 7.6 |
| ☐ Carbon disulfide | 1.05 | 4.81 | ☐ Methanol | 0.25 | 0.75 | ☐ 1.1.2-Trichloro-1.2.2-trifluorethane | 1.05 | 0.96 |
| ☐ Carbon tetrachloride | 0.05 | 0.96 | ☐ Methylene Chloride | 0.20 | 0.96 | ☐ Trichlorofluormethane | 0.05 | 0.96 |
| ☐ Chlorobenzene | 0.15 | 0.05 | ☐ Methylene Chloride (pharm ind.) | 0.44 | NA | ☐ Trichloroethylene | 0.062 | 0-091 |
| ☐ Cresole | 2.82 | 0.75 | ☐ Methyl ethyl ketone | 0.05 | 0.75 | ☐ Xylene | 0.05 | 0.15 |
| ☐ Cresylic acid | 2.82 | 0.75 | ☐ Methyl isobutyl ketone | 0.05 | 0.33 | ☐ All of the above | | |
| ☐ Cyclohexanone | 0.125 | 0.75 | ☐ Nitrobenzene | 0.66 | 0.125 | | | |
| ☐ 1.2 Dichlorobenzene | 0.65 | 0.125 | ☐ 2-Nitropropane | TECHNOLOGY STD | | | | |
| ☐ 2-Ethoxyethanol | TECHNOLOGY STD. | | ☐ Pyridine | 1.12 | 0.33 | | | |
| ☐ Ethyl acetate | 0.05 | 0.75 | ☐ Tetrachloroethylene | 0.079 | 0.05 | | | |

4. Is the waste a F039 (attach constituent list)? Yes ☐ No ☐
5. Is the waste a Lab Pack?
   Yes (attach packing list and certification) ☐ No ☒
6. Is the waste a California List Waste for the Following:
   **PCB** ⩾ 50ppm ☐ **Halogenated Organic Carbon (HOC's)** ⩾ 1000mg/L ☐ **PH** ⩽ 2.0 ☐
   **Cyanide** ⩾ 1000ppm ☐ or a **liquid hazardous waste**, including free liquid associated with any solid or sludge, containing the following metals:

| | | | | | |
|---|---|---|---|---|---|
| **ARSENIC** | ⩾ 500mg/L ☐ | **CADMIUM** | ⩾ 100 mg/L ☐ | **CHROMIUM** | ⩾ 500mg/L ☐ |
| **NICKEL** | ⩾ 134mg/L ☐ | **THALLIUM** | ⩾ 130mg/L ☐ | **LEAD** | ⩾ 500mg/L ☐ |
| **MERCURY** | ⩾ 20mg/L ☐ | **SELENIUM** | ⩾ 100mg/L ☐ | | |

### II. WASTE IDENTIFICATION

| | US EPA HAZARDOUS WASTE NO. | SUBCATEGORY IF APPLICABLE | | TREATMENT STANDARDS | | |
|---|---|---|---|---|---|---|
| | | | | CONCENTRATION BASED | | SPECIFIED TECHNOLOGY 268.42(a) |
| | | Description | None | 268.41(a) mg/L | 268.43(a) mg/kg | |
| 1 | F001 | | - | .41 | | INCIN |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |