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 Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAC 000 286 209
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
~~THE VENTURAN CONVALESENT~~ THE VENTURA TOWNEHOUSE
4904 TELEGRAPH RD, . . , VENTURA, CA

A. State Manifest Document Number 88677217
B. State Generator's ID

4. Generator's Phone (805) ~~642-0101~~ 642-3263

5. Transporter 1 Company Name
OMEGA RECOVERY SERVICES
6. US EPA ID Number CAD 042 245 001
C. State Transporter's ID 110326
D. Transporter's Phone 213 698-0991

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number CAD 042 245 001
G. State Facility's ID CAD042245001
H. Facility's Phone 213 698-0991

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE SOLID N.O.S ORM-E NA 9189 (TAR)	033	DM	008 1/2	Y	State 252 / EPA/Other D002
b. HAZARDOUS WASTE LIQUID N.O.S ORM-E NA 9189 (H20 SOAP/TAR)	002	DM	000556		State 252 / EPA/Other D002
c. HAZARDOUS WASTE SOLID ORM-E NA 9189 (NA HS02/TAR)	007	DM	000001 1/2	Y	State 252 / EPA/Other D002
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information
PROFILE NUMBER A 16570

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 VENTURA TOWNEHOUSE, INC. FRANK J. DRABICKAS, VICE PRESIDENT
Signature
Month Day Year 07 19 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name JAVIER HERNANDEZ
Signature
Month Day Year 07 19 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 FRANK FORD
Signature
Month Day Year 07 19 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

88677217

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete

Do Not Write Below This Line

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