Revised Manifest Summary Report

CONTINENTAL STORE FIXTURES
CONTINENTAL FIXTURE COMPANY

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
05/14/1991		89578493		4587	LBS		CMP		

Total Records: 1 Default Volume: 0 Total Waste Volume: 2.2935

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 Hea h Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD000002039 — 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
CONTINENTAL STORE FIXTURES 24HR.# (916) 9203030
3950 NORWOOD AVE. SACRAMENTO, CALIFORNIA 95838
4. Generator's Phone (916) 920-3030

A. State Manifest Document Number: 89578493
B. State Generator's ID:

5. Transporter 1 Company Name: BOR INDUSTRIES
6. US EPA ID Number: CAD102827599
C. State Transporter's ID: 101939
D. Transporter's Phone: (916) 72-2342

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, CALIFORNIA 90602
10. US EPA ID Number: CAD042245001
G. State Facility's ID: CAD042245001
H. Facility's Phone: (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTIBLE LIQUIDS NOS NA 1993 ACETONE LACQUER MINERAL SPIRITS PAINT	011	DM	010510	G	State 214 EPA/Other D001
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
PROFILE # B 11160
11A ACETONE, LACQUER THINNER, MINERAL SPIRITS, WASTE PAINT

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

15. Special Handling Instructions and Additional Information
WEAR GLOVES AND 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: JOHN NICHOLS — Signature: [signature] — Month Day Year: 5 14 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: B O R INDUSTRIES — Signature: [signature] — Month Day Year: 05 17 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: 05 17 91

Do Not Write Below This Line

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

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

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

89578493

0030 .0003

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.: CAD000020309 — 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: CONTINENTAL STORE FIXTURES 24HR.# (916) 9203030
3950 NORWOOD AVE. SACRAMENTO, CALIFORNIA 95838

4. Generator's Phone (916) 920-3030

A. State Manifest Document Number: 89578493

B. State Generator's ID:

5. Transporter 1 Company Name: BOR INDUSTRIES — 6. US EPA ID Number: CAD102827599

C. State Transporter's ID: 101939

D. Transporter's Phone: (916) 372-2342

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, CALIFORNIA 90602 — 10. US EPA ID Number: CAD042245001

G. State Facility's ID: CAD042245001

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste Combustible Liquids NOS NA 1993 Acetone Lacquer Mineral Spirits Paint	0111	DM	0015150	G	State: 3/X EPA/Other: D001
b.					State: EPA/Other:
c.					State: EPA/Other:
d.					State: EPA/Other:

J. Additional Descriptions for Materials Listed Above: PROFILE # B11160
11A Acetone, Lacquer Thinner, Mineral Spirits, Waste Paint

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

15. Special Handling Instructions and Additional Information

Wear gloves and 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: JOHN NICHOLS — Signature: [signature] — Month Day Year: 05 14 91

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: BOR INDUSTRIES — Signature: [signature] — Month Day Year: 05 14 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: 05 15 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

89578493

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

0030.0003

Revised Manifest Summary Report

CONTINENTAL STORE FIXTURES
CONTINENTAL FIXTURE COMPANY

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
05/14/1991		89578493		4587	LBS		CMP		

Total Records: 1 Default Volume: 0 Total Waste Volume: 2.2935

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 Hea Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD000020309 — 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
CONTINENTAL STORE FIXTURES 24HR # (916) 9203030
3950 NORWOOD AVE. SACRAMENTO, CALIFORNIA 95838

4. Generator's Phone (916) 920-3030

A. State Manifest Document Number: 89578493

B. State Generator's ID:

5. Transporter 1 Company Name: BOR INDUSTRIES

6. US EPA ID Number: CAD102827599

C. State Transporter's ID: 101939

D. Transporter's Phone: (916) 372-2342

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, CALIFORNIA 90602

10. US EPA ID Number: CAD042245001

G. State Facility's ID: CAD042245001

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTIBLE LIQUIDS NOS NA 1993 Acetone Lacquer Mineral Spirits Paint	011	DM	00550	G	State 214 EPA/Other D001
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above: PROFILE # B 11160
11A Acetone, Lacquer Thinner, Mineral Spirits, Waste Paint

K. Handling Codes for Wastes Listed Above: a. 1. b. c. d.

15. Special Handling Instructions and Additional Information
Wear gloves and 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: JOHN NICHOLS — Signature: [signature] — Month Day Year: 5 14 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: B O R INDUSTRIES — Signature: [signature] — Month Day Year: 05 14 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: 05 15 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

89578493

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

Do Not Write Below This Line

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

0038.0002

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.: CAD000020309 — 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: CONTINENTAL STORE FIXTURES 24HR.# (916) 9203030
3950 NORWOOD AVE. SACRAMENTO, CALIFORNIA 95838

4. Generator's Phone (916) 920-3030

A. State Manifest Document Number: 89578493

B. State Generator's ID:

5. Transporter 1 Company Name: BOR INDUSTRIES — 6. US EPA ID Number: CAD102827599

C. State Transporter's ID: 101939

D. Transporter's Phone: (916) 372-2342

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, CALIFORNIA 90602 — 10. US EPA ID Number: CAD042245001

G. State Facility's ID: CAD042245001

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Combustible Liquids NOS NA 1993 Acetone Lacquer Mineral Spirits Paint	0111	DM	0015150	G	State: 3 / EPA/Other: D001
b.					State: / EPA/Other:
c.					State: / EPA/Other:
d.					State: / EPA/Other:

J. Additional Descriptions for Materials Listed Above: PROFILE # B11160
11A Acetone, Lacquer Thinner, Mineral Spirits, Waste Paint

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

15. Special Handling Instructions and Additional Information

Wire gloves and 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: JOHN NICHOLS — Signature: [signature] — Month Day Year: 05 14 91

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: BOR INDUSTRIES — Signature: [signature] — Month Day Year: 05 14 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: 05 15 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

89578493

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

0030.0003