14680

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 227-021377

GENERATOR (Generator Must Complete)

(2) Name Douglas Acft
EPA NO. CAD086510445
Address 190th & Normandie Phone No.
City, State, Zip Torrance, Ca

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name Operating Industries
EPA NO. CAT080012024
Address 2425 S. Garfield
City, State, Zip Monterey Park, Ca

(4) Alternate TSD Facility
Name
EPA NO.
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 Mud, water	non		2200	Bals
WASTE				

CONTAINERS NUMBER: 1
TYPE: ☐ DRUMS ☐ BAGS ☐ CARTONS ☒ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

(6) WASTE CATEGORY 70 (7) EX. HAZ. WASTE PERMIT NO. 21804 (8) GENERATING PROCESS deburring

LIST COMPONENTS	CONC. UPPER	RANGE LOWER	UNITS
(9) A. Mud	10	5	☒ % ☐ ppm.
B. Water	95	90	☒ % ☐ ppm.
C.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous 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 none

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) Dorothy Stout - Buyer - 7-6-81 — Signature of Authorized Agent and Title
7-6-81 — Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

SO# 17864

(14) NAME OIL PROCESS CO.
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

(15) PICK-UP DATE 7-6-81
TIME ____ ☐ AM ☐ PM

(16) J. Moussaint, Driver — Signature of Authorized Agent and Title
7-6-81 — Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME Chemical Waste Inc
EPA NO. CAT030012024
PHONE NO.

(18) QUANTITY (If Measured) 50
(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) NAME
EPA NO.

(21) HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☒ Landfill
☐ Injection Well ☒ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Reuse ☐ Storage/Transfer

(23) [signature] — Signature of Authorized Agent and Title
7-6-81 — Date Accepted

BOE-C6-0120328