14722

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 227-021913

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT C-6
EPA NO. CAD086510005
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 ~~WD~~ INDUSTRIES
EPA NO. CAT080012024
Address 2425 S. GARFIELD
City, State, Zip MONTEREY PK. 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 WATER SOL. COOLANT	NON		100	BBLS
WASTE WATER				

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

(6) WASTE CATEGORY 43 (7) EX. HAZ. WASTE PERMIT NO. N/A (8) GENERATING PROCESS STEAM SLAG

(9) LIST COMPONENTS:

		CONC. UPPER	RANGE LOWER	UNITS
A.	COOLANT	2		☒ % ☐ ppm.
B.	WATER	98		☒ % ☐ ppm.
C.				☐ % ☐ ppm.
D.				☐ % ☐ ppm.
E.				☐ % ☐ ppm.
F.				☐ % ☐ ppm.
G.				☐ % ☐ ppm.

Non Hazardous Material 100 %

(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] Signature of Authorized Agent and Title — 8-22-81 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. #17-18037
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

(15) PICK-UP DATE 8-22-81
TIME ☐ AM ☐ PM

(16) [signature] Signature of Authorized Agent and Title — 8-22-81 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME OPERATING IND
EPA NO. CAT080012024
PHONE NO.

(18) QUANTITY (If Measured) 100 BBL
(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

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

(22) NAME
EPA NO.

(23) [signature] Signature of Authorized Agent and Title — 8-22-81 Date Accepted

BOE-C6-0120360