CG-TPO-81-OPC-0051

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

(1) Manifest Number 227-021547

...verse side for Instructions.
...type or print clearly. Press Hard.

14767

GENERATOR (Generator Must Complete)

Name: Douglas Aircraft
A NO.: CAD065100085
Address: 19 Mt 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 Ind
EPA NO.:
Address: 2425 Garfield Ave
City, State, Zip: Montebello 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	N/A		40 Bbls	
WASTE				

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

WASTE CATEGORY: 70 (7) EX. HAZ. WASTE PERMIT NO.: N/A (8) GENERATING PROCESS:

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. Mud	3		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. Water	97		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material 100 %			

WASTE PROPERTIES: pH ☐ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen
PHYSICAL STATE: ☐ Solid ☐ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other
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) Suzie Letcher Buyer — Signature of Authorized Agent and Title
10-26-81 — Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

NAME: OIL PROCESS CO. 12-19213
A NO.: CAD050806850
ADDRESS: 5756 Alba Street PHONE NO.: (213) 585-5063
CITY, STATE, ZIP: Los Angeles, California 90058

(15) PICK-UP DATE: 10/26/81
TIME: 1645 ☒ AM ☐ PM

(16) J Patterson Driver — Signature of Authorized Agent and Title
10/26/81 — Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

NAME: Operating Ind Inc
A NO.: CAT080012024
PHONE NO.:

(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:

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:
NAME:
EPA NO.:

(23) [signature] 10-26-81

BOE-C6-0120390