14824

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

See reverse side for Instructions.
Please type or print clearly. Press Hard.

(1) Manifest Number 227-023167

GENERATOR (Generator Must Complete)

(2) Name: DOUGLAS AIRCRAFT
EPA NO.: CACO8510005
Address: PUS HOWARDE
Phone No.:
City, State, Zip: TORRANCE CA.

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name: OCEANWIND.
EPA NO.:
Address: 2425 S. CARFIELD
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 BIOCLEANT	N.N		100	GAL
WASTE WATER, OIL				

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

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

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. BIOCLEANT	1		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. OIL	1		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C. WATER		98	☒ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material	99 %		

(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 of Authorized Agent and Title — Date Shipped: 12-31-81

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME: OIL PROCESS CO. Ag-1669
EPA NO.: CAD050806850
ADDRESS: 5756 Alba Street
PHONE NO.: (213) 585-5063
CITY, STATE, ZIP: Los Angeles, California 90058

(15) PICK-UP DATE: 12/31/81
TIME: 10 ☒ AM ☐ PM

(16) Signature of Authorized Agent and Title — Date: 12/31/81

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME: Oceanwind Inc
EPA NO.: CAD981201204
PHONE NO.:
(18) QUANTITY (If Measured):
(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 of Authorized Agent and Title — Date Accepted: 12-31-81

BOE-C6-0120420