14826

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

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

(1) Manifest Number 227-023169

GENERATOR (Generator Must Complete)

(2) Name: DOUGLAS AIRCRAFT CO.
EPA NO.: CAD 0 8 0 5 1 0 0 0 5
Address: 1901 E. 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.: CAT 0 8 0 0 1 2 6 2 4
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 Sump SEDIMENT	NON HAZARDOUS		40	BBLS.
WASTE				

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

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

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
(9) A. MUD		2	☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. WATER	98		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material	100 %		

(10) WASTE PROPERTIES: pH 6 ☐ 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) Signature of Authorized Agent and Title: [signature] Date Shipped: 1-4-82

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME: OIL PROCESS CO. #1-19671
EPA NO.: CAD 0 5 0 8 0 6 8 5 0
ADDRESS: 5756 Alba Street PHONE NO.: (213) 585-5063
CITY, STATE, ZIP: Los Angeles, California 90058

(15) PICK-UP DATE: 1-4-82
TIME: ☐ AM ☐ PM

(16) Signature of Authorized Agent and Title: F. Myers driver Date: 1-4-82

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME: OPERATING IND. INC.
EPA NO.: CAT 0 8 0 0 1 2 6 2 4
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:

(22) NAME:
EPA NO.:

(23) Signature of Authorized Agent and Title: [signature] Date Accepted: 1-4-81

BOE-C6-0120422