14847

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 227-023508

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT
EPA NO. CAD086510005
Address 190TH & NORMANDIE
City, State, Zip TORRANCE CA

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name BKK CORP.
EPA NO. CAD067786719
Address 2210 S. AZUSA
City, State, Zip WEST COVINA CA

(4) Alternate TSD Facility
Name OPERATING IND.
EPA NO. CAT080012022
Address 2425 S. GARFIELD
City, State, Zip MONTEREY PARK CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD, WATER	N.H		100	BBLS
WASTE				

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

(6) WASTE CATEGORY 71 (7) EX. HAZ. WASTE PERMIT NO. N.A. (8) GENERATING PROCESS

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS
A. MUD	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 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 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

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. #17-20155
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

(15) PICK-UP DATE 1-30-82
TIME ☐ AM ☐ PM

(16) Signature of Authorized Agent and Title — Date 1-30-82

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME OPERATING INDUSTRIES
EPA NO. CAT080012022
PHONE NO.
(18) QUANTITY (If Measured) 100 BARRELS
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 1-30-82

BOE-C6-0120434