CALIFORNIA HAZARDOUS WASTE MANIFEST

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

14997

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

(1) Manifest Number 227-024724

GENERATOR (Generator Must Complete)

(2) Name Douglas Aircraft
EPA NO. CAD086510005
Address 190 Th & Normandie Phone No. 533 7612
City, State, Zip Torrance Cal

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name Operating Ind.
EPA NO. CAT080012024
Address 900 Potrero Grande
City, State, Zip Monterey Park

(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	None	N/A	4200	Gal
WASTE				

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

(6) WASTE CATEGORY —
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS Wash Rack

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. Water	100		☑ % ☐ ppm.	E.			☐ % ☐ ppm.
B.			☐ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material ____ %			

(10) WASTE PROPERTIES: pH 8 ☐ 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) Dorothy Stout Buyer — Signature of Authorized Agent and Title — 10-13-82 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. SO 22480
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR NO. 117
(15) PICK-UP DATE Same
TIME ____ ☐ AM ☐ PM

(16) Bill Valoff Driver — Signature of Authorized Agent and Title — 10-13-82 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME Operating Ind. Inc.
EPA 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:

(22) NAME
EPA NO.

(23) [signature] — Signature of Authorized Agent and Title — 10-14-82 Date Accepted

BOE-C6-0120531