STEAM SLAB

CALIFORNIA HAZARDOUS WASTE MANIFEST

See reverse side for Instructions.
Please type or print clearly. Press Hard. 15063

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

(1) Manifest Number 227-026170

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO.
EPA NO. CAD086510005
Address 190TH NORMANDIE Phone No. 533-7612
City, State, Zip TORRANCE, CA. 90502

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name OPERATING INDUSTRIES
EPA NO. CAT080012024
Address 900 POTRERO GRANDE
City, State, Zip MONTEREY PARK CA.

(4) Alternate TSD Facility
Name BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE.
City, State, Zip WEST COVINA, CA. 91795

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD & WATER	NON	NOS.	4200	GALS
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 PARTS CLEANING

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
(9) A. MUD	10		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. WATER	90		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material 100 %			

(10) WASTE PROPERTIES: pH 7.0 ☐ 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) Dorothy Stout Buyer — Signature of Authorized Agent and Title — 1-13-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 22662 TRUCK NO. 11 TLR. NO. 110 (15) PICK-UP DATE 1-13-83
EPA NO. CAD050806850 TIME ☐ AM ☐ PM
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

(16) [signature] (Driver) — Signature of Authorized Agent and Title — 1-13-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME OPERATING IND. INC. 18 QUANTITY (If Measured)
EPA NO. CAT080012024 19 STATE FEE (If Any)
PHONE NO.

(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 — 1-13-83 Date Accepted

ORIGINAL

BOE-C6-0120569