O# 10532

WR# 12 766

Please print or type
(Form designed for use on elite (12-pitch) typewriter.)

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD086510005 | Manifest Document No. 99007 | 2. Page 1 of 2

3. Generator's Name and Mailing Address
Douglas Aircraft Co., C6, M/S D009-0020
3855 Lakewood Blvd., Long Beach, CA 90846

Non haz manifest # TNH-99007

4. Generator's Phone (562 496-6524 Attn: Marcia Sattgast

HAEF36005698

5. Transporter 1 Company Name: Ecology Control Industries
6. US EPA ID Number: CAD982030173
A. Transporter's Phone: (310) 320-2555

7. Transporter 2 Company Name: Rho-Chem Corporation
8. US EPA ID Number: CAD008364432
B. Transporter's Phone: (323) 776-6233

9. Designated Facility Name and Site Address
21st Century/EMI
2095 Newlands Drive East
Fernley, NV 89408
10. US EPA ID Number: NVD980895338
C. Facility's Phone: 800-648-9931

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. Batteries, dry, containing potassium hydroxide, solid, 8, UN3028, PGIII	001	DM	00010	P
b. Batteries, wet, filled with alkali, 8, UN2795, PGIII	001	DM	00050	P
c.				
d.				

D. Additional Descriptions for Materials Listed Above
11a. Profile number: 150334. Batteries, Alkaline
11b. Profile number: 150334. Batteries, NICAD

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
24 Hour Emergency Telephone Number (800) 424- 9300 (Chemtrec).
Site Address: 19503 South Normandie Ave, Torrance, CA 90502

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name: DAVID M. HENDRICKSON | Signature | Month 06 Day 14 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Gabriel Lopez | Signature | Month 06 Day 14 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: D S ONEAL | Signature | Month 06 Day 14 Year 99

SAFETY HEALTH AND ENVIRONMENTAL AFFAIRS
JUL 06 1999

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: DEBRA L CURRIER | Signature | Month 07 Day 01 Year 99

Printed by J. J. KELLER & ASSOCIATES, INC. Neenah, WI 54957-0368

ORIGINAL - RETURN TO GENERATOR

12-BLC-M6

BOE-C6-0200599

NON-HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12 pitch) typewriter)

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD086510005

Manifest Document No. 99007

2. Page 1 of 2

3. Generator's Name and Mailing Address
DOUGLAS AIRCRAFT CO.
3855 LAKEWOOD BLVD.
LONG BEACH, CA 90846

TNH-99007

4. Generator's Phone ( )

5. Transporter 3 Company Name: ALLWASTE TRANSPORTATION & REMEDIATION

6. US EPA ID Number: CAD041547996

A. State Transporter's ID

B. Transporter 1 Phone: 800.321.1230

7. Transporter 2 Company Name

8. US EPA ID Number

C. State Transporter's ID

D. Transporter 2 Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

E. State Facility's ID

F. Facility's Phone

11. WASTE DESCRIPTION	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.
a.				
b.				
c.				
d.				

G. Additional Descriptions for Materials Listed Above

H. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
THIS PAGE FOR TRANSPORTER USE ONLY.

GENERATOR

16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.

Printed/Typed Name | Signature | Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RON SHINN | Signature | Date: Month Day Year: 06 25 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator; Certification of receipt of the waste materials covered by this manifest, except as noted in item 19.

Printed/Typed Name | Signature | Date: Month Day Year

NON-HAZARDOUS WASTE