CHRO E DESTRUCT SYSTEM 46190

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026154

GENERATOR (Generator Must Complete)

(2) Name: DOUGLAS AIRCRAFT CO.
EPA NO. CAD065100005
Address: 19025 NORMANDIE Phone No. 533 7612
City, State, Zip: TORRANCE CA 90503

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name: BKK LANDFILL
EPA NO. CAD027786749
Address: 2210 S AZUSA AVE
City, State, Zip: WEST COVINA CA 91793

(4) Alternate TSD Facility
Name: KETTLEMEN HILLS
EPA NO. CAT000646117
Address: 4344 W. GALE
City, State, Zip: COALINGA, CA.

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE CHROMIC HYDROXIDE	CORROSIVE	NOS	2100	GALS.
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS CLEAN CHROME SLUDGE

LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS
(9) A. CHROMIC HYDROXIDE	25.0	25.0	☒ % ☐ ppm.
B. ALUMINUM	17.5	17.5	☒ % ☐ ppm.
C. WATER	57.5	57.5	☒ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 57.5 %

(10) WASTE PROPERTIES: pH 9.5 ☐ 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] Buyer — Signature of Authorized Agent and Title — 1-3-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23002
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 08/17 TLR. NO. 08/17

(15) PICK-UP DATE 1-3-83
TIME 11:30 ☐ AM ☐ PM

(16) [signature] Operator — Signature of Authorized Agent and Title — 1-3-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD027786749
PHONE NO.

18 QUANTITY (If Measured) 5.97
19 STATE FEE (If Any) 23.88

(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: Chg to Oil Proc, Hauled by Cal Pacific

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

(22) NAME
EPA NO.

(23) [signature] — Signature of Authorized Agent and Title — 1/3/83 Date Accepted

TO GENERATOR

BOE-C6-0214687

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers; PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facility operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original) - TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214688

TANK 7 + 320

CALIFORNIA HAZARDOUS WASTE MANIFEST

COPY

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 227-026155

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: KETTLEMEN HILLS
EPA NO. CAT000646117
Address: 4344 W. GALE
City, State, Zip: COALINGA, CA.

(4) Alternate TSD Facility
Name: CASMALIA
EPA NO. CAD020748125
Address: 429 SAN YSIDRO RD.
City, State, Zip: CASMALIA, CA.

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE ~~ACID LIQUID N.O.S.~~	CORROSIVE	NA1760	3110	GALS.
WASTE SULFURIC ACID SOLU.				

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

(6) WASTE CATEGORY 2 (7) EX. HAZ. WASTE PERMIT NO. 3-2745 (8) GENERATING PROCESS ANODIZE

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS
A. SULFURIC ACID	10.0		☒ % ☐ ppm.
B. CHROMIC ACID	4.1		☒ % ☐ ppm.
C. HYDROFLUORIC ACID	.8		☒ % ☐ ppm.
D. WATER	85.1		☒ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 85.1 %

(10) WASTE PROPERTIES: pH 1.0 ☐ 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 MAY CAUSE SEVERE BURNS

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 — Date Shipped 1-3-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S/DOT 25158
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 21 TLR. NO. 21

(15) PICK-UP DATE 1-4-83
TIME 230 ☒ AM ☐ PM

(16) F. Mijares driver — Signature of Authorized Agent and Title — Date 1-4-83

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME CWM I
EPA NO. CAT000646117
PHONE NO.

18 QUANTITY (If Measured) 3110 gal.
19 STATE FEE (If Any) 52.80

(20) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT: Total acid is 30%, 5% higher than manifested

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] — Signature of Authorized Agent and Title — Date Accepted 1/4/83

BOE-C6-0214689

TANKS 330 & 181

CALIFORNIA HAZ[illegible]DOUS WASTE MANIFEST

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

COPY

State Dep[illegible]ment of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

(1) Manifest Number 227-026156

[illegible] (Generator Must Complete)

(2) Name D[illegible] 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 KETTLEMEN HILLS
EPA NO. CAT000646117
Address 4344 W. GALE
City, State, Zip COALINGA, CA.

(4) Alternate TSD Facility
Name CASMALIA
EPA NO. CAD020748122
Address 429 SAN YSIDRO RD.
City, State, Zip CASMALIA, CA.

(5)

	U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE	ACID LIQUID, N.O.S.	CORROSIVE	NA1760	~~1825~~ 2600	GALS
WASTE					

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

(6) WASTE CATEGORY 2

(7) EX. HAZ. WASTE PERMIT NO. 3-2745

(8) GENERATING PROCESS ALUM. ETCH.

(9) LIST COMPONENTS:

		CONC. UPPER	RANGE LOWER	UNITS
A.	NITRIC ACID	9.3		☒ % ☐ ppm.
B.	CHROMIC ACID	4.6		☒ % ☐ ppm.
C.	HYDROFLOURIC ACID	.8		☒ % ☐ ppm.
D.	WATER	85.3		☒ % ☐ ppm.
E.				☐ % ☐ ppm
F.				☐ % ☐ ppm
G.				☐ % ☐ ppm

Non Hazardous Material 85.3 %

(10) WASTE PROPERTIES: pH 2.0 ☐ Toxic ☐ Flammable ☒ Corrosive/[redacted] ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

(11) PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

(12) SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☒ Respirator ☒ Other MAY CAUSE SEVERE BURNS

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 t 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 — 1-4-83 Date Shipped

[illegible] (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S/O# 23159
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 21 TLR. NO. 21

(15) PICK-UP DATE 1-5-83
TIME 4:00 ☒ AM ☐ PM

(16) F. Myers driver — Signature of Authorized Agent and Title — 1-5-83 Date

[illegible] (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME CWMI
EPA NO. CAT080646117
PHONE NO.

18 QUANTITY (If Measured) 2600 gal.
19 STATE FEE (If Any) 44.00

(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] — Signature of Authorized Agent and Title — 1/5/83 Date Accepted

ORIGINAL

BOE-C6-0214690

TANK #64

620/46180

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 - 02615

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE
City, State, Zip WEST COVINA, CA 91793

(4) Alternate TSD Facility
Name KETTLEMAN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA, CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE AMMONIUM NITRATE	OXIDIZER	NA 2426	200	GL
WASTE				

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

(6) WASTE CATEGORY ~~AMMONIUM NITRATE~~ 2 (7) EX. HAZ. WASTE PERMIT NO. 3-2745 (8) GENERATING PROCESS CAD STRIPPER

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS
A. AMMONIUM NITRATE	12%		☐ % ☐ ppm.
B. CADMIUM	.52		☐ % ☐ ppm.
C. WATER	87.48		☐ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 87.48 %

(10) WASTE PROPERTIES: pH 6.5 ☐ 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 AVOID PROLONGED BREATHING & SKIN CONTACT

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 — 1-5-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23112
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 22 TLR. NO.

(15) PICK-UP DATE 1-6-83
TIME 1:30 ☒ AM ☐ PM

(16) A. Torch DRIVER — Signature of Authorized Agent and Title — 1-6-83 Date

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 105
19 STATE FEE (If Any) 420

(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) 60 — Signature of Authorized Agent and Title — 1/6/83 Date Accepted

TO GENERATOR

BOE-C6-0214691

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214692

TA : 257

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 227-026158

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE
City, State, Zip WEST COVINA, CA 91793

(4) Alternate TSD Facility
Name KETTLEMAN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE Sodium Hydroxide Solu.	Corrosive	UN1824	4200	GALS
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS Chem Milling TANK

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
(9) A. SODIUM HYDROXIDE	14		☑ % ☐ ppm.	E.			☐ % ☐ ppm.
B. SODIUM ALUMINATE	5		☑ % ☐ ppm.	F.			☐ % ☐ ppm.
C. SULFUR	1		☑ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material 80 %			

(10) WASTE PROPERTIES: pH 13.0 ☐ 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 MAY CAUSE SEVERE BURNS

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 — 1-5-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23122
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 22 TLR. NO.

(15) PICK-UP DATE 1-5-83
TIME 11:45 ☑ AM ☐ PM

(16) A. [illegible] DRIVER — Signature of Authorized Agent and Title — 1-5-83 Date

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 22.93
19 STATE FEE (If Any) 89.32

(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) [illegible] — Signature of Authorized Agent and Title — 1-5-83 Date Accepted

TO GENERATOR

BOE-C6-0214693

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214694

TAM 257 + 259 4/6/80 3:21

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 - 02615Y

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO.
EPA NO. CAD086500005
Address 190 TO & 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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE
City, State, Zip WEST COVINA, CA. 91793

(4) Alternate TSD Facility
Name KETTLEMAN HILLS
EPA NO. CAT000646117
Address 4344 W. GALE
City, State, Zip CHALLENGA, CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE Sodium Hydroxide Soln	Corrosive	UN1824	100	BBLS
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS CHEM. MILLING TANK

LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS
(9) A. SODIUM HYDROXIDE	14		☑ % ☐ ppm.
B. SODIUM ALUMINATE	5		☑ % ☐ ppm.
C. SULFUR	1		☑ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 80 %

(10) WASTE PROPERTIES: pH 13.0 ☐ 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 MAY CAUSE SEVERE BURNS

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 — 1-5-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S.O. 73196
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 119

(15) PICK-UP DATE 1-5-83
TIME ☐ AM ☐ PM

(16) [illegible] — Signature of Authorized Agent and Title — 1-5-83 Date

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 23.51
19 STATE FEE (If Any) 94.04

(20) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

(21) HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☑ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Reuse ☐ Storage/Transfer

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

(22) NAME
EPA NO.

(23) [illegible] — Signature of Authorized Agent and Title — 1-5-83 Date Accepted

TO GENERATOR

BOE-C6-0214695

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

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2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

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TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

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Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214696

TA. K 259/338

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 02616U

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 4th 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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE
City, State, Zip WEST COVINA, CA. 91793

(4) Alternate TSD Facility
Name KETTLEMAN HILLS
EPA NO. CAT000646117
Address 4344 W. GALE
City, State, Zip COALINGA, CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE SODIUM HYDROXIDE SOLU.	CORROSIVE	UN1824	4200	GALS
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS CHEM MILLING TANK

LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS
(9) A. SODIUM HYDROXIDE	14		☑ % ☐ ppm.
B. SODIUM ALUMINATE	5		☑ % ☐ ppm.
C. SULFOR	1		☑ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 80 %

(10) WASTE PROPERTIES: pH 12 ☐ 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 MAY CAUSE SEVERE BURNS

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 Strut Buyer — Signature of Authorized Agent and Title — Date Shipped 1-5-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 24006
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 11
(15) PICK-UP DATE 1-5-83
TIME ☐ AM ☐ PM

(16) [signature] DRIVER — Signature of Authorized Agent and Title — Date 1-5-83

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 20.96
19 STATE FEE (If Any) 83.84

(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 — Date Accepted 1-5-83

TO GENERATOR

BOE-C6-0214697

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214698

TA 1K 259

CALIFORNIA HAZARDO[illegible] WASTE MANIFEST

State Department o[illegible]alth Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

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

(1) Manifest Number 227 - 026161

GENERATOR (Generator Must Complete)

(2) Name: DOUGLAS AIRCRAFT CO
EPA NO. CAD006510005
Address: 190TH & NORMANDIE Phone No. 533 761[illegible]
City, State, Zip: TORRANCE CA. 90502

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name: BKK LANDFILL
EPA NO. CAD067786749
Address: 2210 S AZUSA AVE
City, State, Zip: WEST COVINA CA 91793

(4) Alternate TSD Facility
Name: KETTLEMEN HILLS
EPA NO. CAT000646117
Address: 4344 W. GALE
City, State, Zip: CORALINGA, CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE Sodium Hydroxide Soln	Corrosive	[redacted]	[redacted]	
WASTE		UN1824	4200	GALS.

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

(6) WASTE CATEGORY: 5
(7) EX. HAZ. WASTE PERMIT NO. [redacted]
(8) GENERATING PROCESS: Chem Milling Tank

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. SODIUM HYDROXIDE	14		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. SODIUM ALUMINATE	5		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C. SULFUR	1		☒ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material	80 %		

(10) WASTE PROPERTIES: pH 12 ☐ 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 MAY CAUSE SEVERE BURNS

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) [illegible] Signature of Authorized Agent and Title — Date Shipped 1-6-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME: OIL PROCESS CO. 2 2106
EPA NO. CAD050806850
ADDRESS: 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP: Los Angeles, California 90058

TRUCK NO. 22 TLR. NO.
(15) PICK-UP DATE 1-6-83
TIME 8:30 ☒ AM ☐ PM

(16) [illegible] DRIVER Signature of Authorized Agent and Title — Date 1-6-83

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME: BKK
EPA NO. CAD067786749
PHONE NO.
18 QUANTITY (If Measured) 20.63
19 STATE FEE (If Any) 82.52

(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) [illegible] Signature of Authorized Agent and Title — Date Accepted 1-6-83

60

TO GENERATOR

BOE-C6-0214699

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge	16. Capacitors, PCB	31. Fly ash	46. Oil	61. Scrubber solution
2. Acid solution	17. Catalyst	32. Gasoline and water	47. Oil sludge	62. Soap
3. Adhesive	18. Chemicals, unused	33. Glaze sludge	48. Oil and water	63. Solvent, chlorinated
4. Alkaline sludge	19. Containers, empty	34. Glue	49. Paint sludge	64. Solvent, hydrocarbon
5. Alkaline solution	20. Contaminated equipment	35. Hair pulp	50. Pesticides	65. Solvent, oxygenated
6. Alkali solids	21. Contaminated soil	36. Heavy metal solution	51. Pesticide containers	66. Solvent, mixed
7. Alum sludge	22. Cyanides	37. Heavy metal sludge	52. Pesticide rinse water	67. Spill cleanup residue
8. API separator sludge	23. Detergent	38. Ink and solvent	53. Phenolic waste	68. Stretford solution
9. Asbestos solids	24. Distillation bottoms	39. Ink sludge	54. Photoprocessing waste	69. Sulfide sludge
10. Asbestos sludge	25. Drilling mud	40. Ink waste water	55. Plating sludge	70. Sump or lagoon sediment
11. Ashes	26. Drugs	41. Laboratory chemicals	56. Plating solution, acid	71. Tank bottom sediment
12. ASD filter cake	27. FCC waste	42. Lime sludge	57. Plating solution, alkaline	72. Tanning sludge
13. Baghouse waste	28. Filter cake	43. Machine tool coolant	58. Polychlorinated biphenyls	73. Tetraethyl lead sludge
14. Bilge water	29. Filters, spent	44. Machining waste	59. Resin waste	74. Transformers, PCB
15. Blasting sand	30. Flux	45. Metal dust	60. Scrubber sludge	75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214700

TI K 259

CALIFORNIA HAZARDO[illegible] WASTE MANIFEST

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

State Department of [illegible]alth Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

(1) Manifest Number 227 - 026162

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE
City, State, Zip WEST COVINA CA 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE SODIUM HYDROXIDE SOLU	CORROSIVE	UN1824	4200	GALS
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 32745
(8) GENERATING PROCESS CHEM. MILLING TANK

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
(9) A. SODIUM HYDROXIDE	14		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. SODIUM ALUMINATE	5		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C. SULFUR	1		☒ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material 80 %			

(10) WASTE PROPERTIES: pH 12 ☐ 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 MAY CAUSE SEVERE BURNS

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] General Foreman — Signature of Authorized Agent and Title — Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 50-23149
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 119

(15) PICK-UP DATE 1-6-83
TIME 11:30 ☒ AM ☐ PM

(16) [signature] — Signature of Authorized Agent and Title — 1-6-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 24.53
19 STATE FEE (If Any) 98.12

(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 — 1-6-83 Date Accepted

TO GENERATOR

BOE-C6-0214701

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

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Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214702

TR 'K 259

CALIFORNIA HAZARDO[illegible] WASTE MANIFEST

State Department of [illegible]alth Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

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

(1) Manifest Number 227 - 026163

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE.
City, State, Zip WEST COVINA CA. 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE SODIUM HYDROXIDE SOLU	CORROSIVE	[redacted]	[redacted]	GALS
WASTE		UN1042500		

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS CHEM MILLING TANK

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
(9) A. SODIUM HYDROXIDE	14		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. SODIUM ALUMINATE	5		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C. SULFUR	1		☒ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material 80 %			

(10) WASTE PROPERTIES: pH 12 ☐ 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 MAY CAUSE SEVERE BURNS

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 — 1-6-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23108
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 22 TLR. NO.

(15) PICK-UP DATE 1-6-83
TIME 12:30 ☐ AM ☒ PM

(16) A. Yiesh DRIVER — Signature of Authorized Agent and Title — 1-6-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 11.39
19 STATE FEE (If Any) 45.56

(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] (60) — Signature of Authorized Agent and Title — 1-6-83 Date Accepted

TO GENERATOR

BOE-C6-0214703

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge	16. Capacitors, PCB	31. Fly ash	46. Oil	61. Scrubber solution
2. Acid solution	17. Catalyst	32. Gasoline and water	47. Oil sludge	62. Soap
3. Adhesive	18. Chemicals, unused	33. Glaze sludge	48. Oil and water	63. Solvent, chlorinated
4. Alkaline sludge	19. Containers, empty	34. Glue	49. Paint sludge	64. Solvent, hydrocarbon
5. Alkaline solution	20. Contaminated equipment	35. Hair pulp	50. Pesticides	65. Solvent, oxygenated
6. Alkali solids	21. Contaminated soil	36. Heavy metal solution	51. Pesticide containers	66. Solvent, mixed
7. Alum sludge	22. Cyanides	37. Heavy metal sludge	52. Pesticide rinse water	67. Spill cleanup residue
8. API separator sludge	23. Detergent	38. Ink and solvent	53. Phenolic waste	68. Stretford solution
9. Asbestos solids	24. Distillation bottoms	39. Ink sludge	54. Photoprocessing waste	69. Sulfide sludge
10. Asbestos sludge	25. Drilling mud	40. Ink waste water	55. Plating sludge	70. Sump or lagoon sediment
11. Ashes	26. Drugs	41. Laboratory chemicals	56. Plating solution, acid	71. Tank bottom sediment
12. ASD filter cake	27. FCC waste	42. Lime sludge	57. Plating solution, alkaline	72. Tanning sludge
13. Baghouse waste	28. Filter cake	43. Machine tool coolant	58. Polychlorinated biphenyls	73. Tetraethyl lead sludge
14. Bilge water	29. Filters, spent	44. Machining waste	59. Resin waste	74. Transformers, PCB
15. Blasting sand	30. Flux	45. Metal dust	60. Scrubber sludge	75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facility operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214704

Steam Slab

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

(1) Manifest Number 227 - 026164

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

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 Land Fill
EPA NO.: CAD067786749
Address: 2210 S. Azusa Ave.
City, State, Zip: West Covina Calif.

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE Mud & Water	Non	N.O.S	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
(9) A.	Mud	10		☒ % ☐ ppm.
B.	Water	90		☒ % ☐ ppm.
C.				☐ % ☐ ppm.
D.				☐ % ☐ ppm.
E.				☐ % ☐ ppm.
F.				☐ % ☐ ppm.
G.				☐ % ☐ 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) R. Springer Assist. Foreman — Signature of Authorized Agent and Title — Date Shipped 1-6-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME: OIL PROCESS CO. S/O# 2200
EPA NO.: CAD050806850
ADDRESS: 5756 Alba Street PHONE NO.: (213) 585-5063
CITY, STATE, ZIP: Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 17

(15) PICK-UP DATE 1-6-83
TIME ☐ AM ☐ PM

(16) F. Mijne — Signature of Authorized Agent and Title — Date 1-6-83

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME: Operating Ind
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 of Authorized Agent and Title — Date Accepted 1-12-83

TO GENERATOR

BOE-C6-0214705

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

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TRANSPORTER:

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ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

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Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214706

2-[illegible]11 + [redacted]

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

[redacted] STEAM SLAB

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

(1) Manifest Number 227 - 026165

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 190 IH 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. CAT000012024
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 91793

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD & WATER	NON	N.O.S.	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:

(9)	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. MUD	10	5	☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. WATER	95	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 — 1-7-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S/O # 55658
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 11

(15) PICK-UP DATE 1-7-83
TIME ☐ AM ☐ PM

(16) F. Mijares driver — Signature of Authorized Agent and Title — 1-7-83 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 — 1-7-83 Date Accepted

TO GENERATOR

BOE-C6-0214707

INSTRUCTIONS FOR COMPLETING MANIFEST

Type [illegible]nt clearly. Illegible or incomplete manifests will be returned to you by the State f[illegible]ification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214708

CHROME DISTRUCT SYSTEM 46180

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026166

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S AZUSA AVE.
City, State, Zip WEST COVINA CA 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT0066 4611
Address 4344 W. GALE
City, State, Zip COALINGA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE ALKALINE SOLUTION	CORROSIVE	NOS.	2000	GALS
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS CLEAN CHROME SLUDGE

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. CHROMIC HYDROXIDE	25.0	25.0	☒ % ☐ ppm.
B. ALUMINUM	17.5	17.5	☒ % ☐ ppm.
C. WATER	57.5	57.5	☒ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ pp
F.			☐ % ☐ pp
G.			☐ % ☐ pp

Non Hazardous Material 57.5 %

(10) WASTE PROPERTIES: pH 9.5 ☐ 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) Dorothy Stout Buyer — Signature of Authorized Agent and Title — 1-10-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S/O# 23165
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 21 TLR. NO. 01

(15) PICK-UP DATE 1-10-83
TIME ☐ AM ☐ PM

(16) F. Mijares driver — Signature of Authorized Agent and Title — 1-10-83 Date

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 5.95
19 STATE FEE (If Any) 23.80

(21) HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Reuse ☐ Storage/Transf

(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] (60) — Signature of Authorized Agent and Title — 1/10/83 Date Accepted

TO GENERATOR

BOE-C6-0214709

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or [illegible] clearly. Illegible or incomplete manifests will be returned to you by the State for [illegible]ation.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste-acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

TEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., quential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

EM (14) Enter company name, EPA I.D. number, address and telephone number.

M (15) Indicate the date and exact time the waste was removed from the generator's facility.

M (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

FACILITY OPERATOR:

(17) Provide the TSD facility name and EPA I.D. number.

(18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

9) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in

) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: ges in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the nt method (Examples: neutralization, incineration, oxidation).

(22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA mber. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the ent. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

(23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

sfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

TRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214710

40180

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026360

GENERATOR (Generator Must Complete)

(2) Name Douglas Aircraft
EPA NO. CAD056510005
Address 190th & Normandie Phone No.
City, State, Zip Torrance Calif

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name BKK Landfill
EPA NO. CAD067786749
Address 2210 S. Azusa
City, State, Zip W. Covina Calif

(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 Alkaline Solution	Corrosive	1824	2500	GAL
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. N/A
(8) GENERATING PROCESS Aircraft mfg.

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. Sodium Hydroxide	10		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. Water	90		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material 0 %			

(10) WASTE PROPERTIES: pH 13.0 ☐ 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 Avoid contact with skin & eyes

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) X [signature] Signature of Authorized Agent and Title — 1-10-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23182
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 9 TLR. NO. 116

(15) PICK-UP DATE 1-10-83
TIME ☐ AM ☐ PM

(16) [signature] Driver Signature of Authorized Agent and Title — 1-10-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 9.81
19 STATE FEE (If Any) 39.24

(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 — 1-11-83 Date Accepted

TO GENERATOR

BOE-C6-0214711

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214712

BLDG 20 SUMP + TANK 1

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 227-026167

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD0865100005
Address 190TH NORMANDIE Phone No. 533-7611
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 2425 S. GARFIELD
City, State, Zip MONTEREY PARK CA

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

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE BIO-DEGRADABLE COOLANT	NON	NOS	4200	1
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 MACHINING PROCESS

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. BIO-DEGRADABLE COOLANT	4		☒ % ☐ ppm.
B. MUD	2		☒ % ☐ ppm.
C. WATER	94		☒ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 100 %

(10) WASTE PROPERTIES: pH 7.5 ☐ 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 — 1-12-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S/O# 22659
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 11

(15) PICK-UP DATE 1-12-83
TIME ☐ AM ☐ PM

(16) F. Mijares driver — Signature of Authorized Agent and Title — 1-12-83 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)

(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] — Signature of Authorized Agent and Title — 1-13-83 Date Accepted

TO GENERATOR

BOE-C6-0214713

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214714

S. EAM SLAB

913

46180

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 0261bd

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD 0 8 6 5 1 0 0 0 5
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 91793

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD + WATER	NON	N.O.S	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

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS
A. MUD	10		☒ % ☐ ppm.
B. WATER	90		☒ % ☐ ppm.
C.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ 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) [signature] Gen Supr — Signature of Authorized Agent and Title — 1-12-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 510.23202
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 119

(15) PICK-UP DATE 1-12-83
TIME ☐ AM ☐ PM

(16) [signature] Signature of Authorized Agent and Title — 1-12-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 1535
19 STATE FEE (If Any) Ø

(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 — 1-24-83 Date Accepted

TO GENERATOR

BOE-C6-0214715

INSTRUCTIONS FOR COMPLETING MANIFEST

Type int clearly. Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

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8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

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TRANSPORTER:

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ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

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ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

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Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214716

S ZAM SLAB

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 - 0261 bJ

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 190TH NORMANDIE Phone No. 533 761
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 91792

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD & WATER	NON	N.O.S	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

(9) LIST COMPONENTS:

		CONC. UPPER	RANGE LOWER	UNITS
A.	MUD	10		☒ % ☐ ppm.
B.	WATER	90		☒ % ☐ ppm.
C.				☐ % ☐ ppm.
D.				☐ % ☐ ppm.
E.				☐ % ☐ ppm.
F.				☐ % ☐ ppm.
G.				☐ % ☐ 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) Signature of Authorized Agent and Title — Date Shipped 1-13-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S.O. 33216
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 119

(15) PICK-UP DATE 1-13-83
TIME ☐ AM ☐ PM

(16) Signature of Authorized Agent and Title — Date 1-13-83

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME OPERATING INC
EPA NO. CAT080012024
PHONE NO.

(18) QUANTITY (If Measured)
(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 1-13-83

TO GENERATOR

BOE-C6-0214717

INSTRUCTIONS FOR COMPLETING MANIFEST

Type int clearly. Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214718

ST IM SLAB

CALIFORNIA HAZARDOU WASTE MANIFEST

State Department of [illegible]th Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

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

(1) Manifest Number 227 - 026110

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 190 E 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 91793

(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:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. MUD	10		☒ % ☐ ppm.
B. WATER	90		☒ % ☐ ppm.
C.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ 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
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

(15) PICK-UP DATE 1-13-83
TIME ☐ AM ☐ PM

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

(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] — Signature of Authorized Agent and Title — 1-13-83 Date Accepted

TO GENERATOR

BOE-C6-0214719

INSTRUCTIONS FOR COMPLETING MANIFEST

Type int clearly. Illegible or incomplete manifests will be returned to you by the State rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214720

TANK #1

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 - 026111

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 PETRERO 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 91793

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE BIO DEGRADABLE COOLANT	NON	N.O.S.	4200	GALS
WASTE				

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

(6) WASTE CATEGORY 43 (7) EX. HAZ. WASTE PERMIT NO. N/A (8) GENERATING PROCESS MACHINING PROCESS

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
(9) A. BIO DEGRADABLE COOLANT		3	☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. WATER	97		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material 100 %			

(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 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. S.O. 23211
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 119

(15) PICK-UP DATE 1-13-83
TIME ☐ AM ☐ PM

(16) Mike Wagner - DRIVER — Signature of Authorized Agent and Title — 1-13-83 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 — 1-14-83 Date Accepted

TO GENERATOR

BOE-C6-0214721

INSTRUCTIONS FOR COMPLETING MANIFEST

Type int clearly. Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214722

STEEL SLAB & 2-PP-11

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 - 026174

GENERATOR (Generator Must Complete)

(2) Name: DOUGLAS AIRCRAFT CO.
EPA NO.: CAD086510005
Address: 190TH NORMANDIE Phone No.: 533 761
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.: CAT080012224
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. 91793

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

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

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
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 Burger — Signature of Authorized Agent and Title — 1-14-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME: OIL PROCESS CO. S.O. 13217
EPA NO.: CAD050806850
ADDRESS: 5756 Alba Street PHONE NO.: (213) 585-5063
CITY, STATE, ZIP: Los Angeles, California 90058
TRUCK NO.: 17 TLR. NO.: 119
(15) PICK-UP DATE: 1-14-83
TIME: 7:00 ☒ AM ☐ PM
(16) [illegible] — Signature of Authorized Agent and Title — 1-14-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME: [illegible]
EPA NO.: CAT080012024
PHONE NO.:
18 QUANTITY (If Measured)
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) [illegible] — Signature of Authorized Agent and Title — 1-14-83 Date Accepted

TO GENERATOR

BOE-C6-0214723

INSTRUCTIONS FOR COMPLETING MANIFEST

Type int clearly. Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214724

TI JK #1 + CLARIFIER

CALIFORNIA HAZARDOU WASTE MANIFEST

State Department of [illegible]th Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

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

(1) Manifest Number 227 - 026172

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT Co
EPA NO. CAD 086510005
Address 190 [illegible] 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 91793

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE BIO-DEGRADABLE COOLANT	NON	NOS	4200	GALS
WASTE				

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

(6) WASTE CATEGORY 43
(7) EX. HAZ. WASTE PERMIT NO. N/A
(8) GENERATING PROCESS MACHINING PROCESS

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. BIO-DEGRADABLE COOLANT		3	☒ % ☐ ppm.
B. WATER	97		☒ % ☐ ppm.
C.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 100 %

(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 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 — 1-14-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23226
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 110

(15) PICK-UP DATE 1-14-83
TIME 1830 ☒ AM ☐ PM

(16) [signature] DRIVER — Signature of Authorized Agent and Title — 1-14-83 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:

WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

NAME
EPA NO.

(23) [signature] — Signature of Authorized Agent and Title — 1-14-83 Date Accepted

TO GENERATOR

BOE-C6-0214725

INSTRUCTIONS FOR COMPLETING MANIFEST

Type nt clearly. Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

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12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

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TRANSPORTER:

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ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

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Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214726

TAX IS 190 + 6 708

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 - 026361

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT Co 46180
EPA NO. CAD006510005
Address 190TH NORMANDIE Phone No. 533-7611
City, State, Zip TORRANCE CA. 90502

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE
City, State, Zip WEST COVINA CA 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT000664617
Address 4344 W. GALE
City, State, Zip COALINGA CA.

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE ALKALINE LIQUID N.O.S.	CORROSIVE	NA1719	1631	GALS
WASTE				

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

(6) WASTE CATEGORY 5 (7) EX. HAZ. WASTE PERMIT NO. 3-2745 (8) GENERATING PROCESS ALKALINE CLEANER + ELECTRO CLEAN

LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS
(9) A. SODIUM HYDROXIDE	1.1		☒ % ☐ ppm.
B. SODIUM METASILICATE	.2		☒ % ☐ ppm.
C. SODIUM PHOSPHATE	2.5		☒ % ☐ ppm.
D. SODIUM BORATE	2.1		☒ % ☐ ppm.
E. WATER	94.1		☒ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 94.1 %

(10) WASTE PROPERTIES: pH 9.0 ☐ 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 MAY CAUSE IRRITATION TO SKIN + EYES

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 — Date Shipped 1-14-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23111
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 13 TLR. NO.

(15) PICK-UP DATE 1-17-83
TIME 1:30 ☑ AM ☐ PM

(16) A. Y. DRIVER — Signature of Authorized Agent and Title — Date 1-17-83

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 5.78
19 STATE FEE (If Any) 23.12

(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 — Date Accepted 1-17-83

TO GENERATOR

BOE-C6-0214727

INSTRUCTIONS FOR COMPLETING MANIFEST

Type int clearly. Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printe on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214728

T.K 190

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

46180

(1) Manifest Number 227 - 026175

GENERATOR (Generator Must Complete)

(2) Name: DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address: 190TH NORMANDIE Phone No. 533 7621
City, State, Zip: TORRANCE CA 90502

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)
Name: BKK LANDFILL
EPA NO. CAD067786749
Address: 2210 S AZUSA AVE.
City, State, Zip: WEST COVINA CA 91793

(4) Alternate TSD Facility
Name: KETTLEMEN HILLS
EPA NO. CAT000646117
Address: 4344 W. GALE
City, State, Zip: COALINGA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE: ALKALINE LIQUID, N.O.S	CORROSIVE	NA1719	5000	GALLONS
WASTE				

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

(6) WASTE CATEGORY: 5
(7) EX. HAZ. WASTE PERMIT NO. 3.2745
(8) GENERATING PROCESS: ALKALINE CLEANER

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS
A. SODIUM PHOSPHATE	3		☒ % ☐ ppm.
B. SODIUM BORATE	2.5		☒ % ☐ ppm.
C. WATER	94.5		☒ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 94.5 %

(10) WASTE PROPERTIES: pH 9.0 ☐ 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 MAY CAUSE IRRITATION TO SKIN & EYES

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: Dorothy Hart Buyer
Date Shipped: 1-14-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME: OIL PROCESS CO. S/OA 23170
EPA NO. CAD050806850
ADDRESS: 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP: Los Angeles, California 90058

TRUCK NO. 21 TLR. NO. 21
(15) PICK-UP DATE 1-17-83
TIME 2:30 ☒ AM ☐ PM

(16) Signature of Authorized Agent and Title: F. Mijares driver
Date: 1-17-83

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME: BKK
EPA NO. CAD067786749
PHONE NO.
18 QUANTITY (If Measured) 18.47
19 STATE FEE (If Any) 73.88

(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: Sep 60
Date Accepted: 1-17-83

TO GENERATOR

BOE-C6-0214729

INSTRUCTIONS F COMPLETING MANIFEST

Type int clearly. Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number..

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214730

PAINT BOOTH BLDG 61

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227-026382

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 91793

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE PAINT SLUDGE & WATER	NON	N/A	65	BBLS
WASTE				

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

(6) WASTE CATEGORY 49
(7) EX. HAZ. WASTE PERMIT NO. N/A
(8) GENERATING PROCESS PAINT BOOTHS

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. PAINT SLUDGE	10		☒ % ☐ ppm.
B. WATER	90		☒ % ☐ ppm.
C.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 100 %

(10) WASTE PROPERTIES: pH 8.0 ☐ 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) [signature] Gen Sup — Signature of Authorized Agent and Title — 1-14-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23107
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO.

(15) PICK-UP DATE 1-14-83
TIME 2:45 ☐ AM ☒ PM

(16) A. [signature] DRIVER — Signature of Authorized Agent and Title — 1-14-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME Operating Industries
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 — 1-15-83 Date Accepted

TO GENERATOR

BOE-C6-0214731

INSTRUCTIONS FOR COMPLETING MANIFEST

Type int clearly. Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214732

CHROME DESTRUCT SYSTEM

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026383

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 1904 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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE.
City, State, Zip WEST COVINA CA 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT006646117
Address 4344 W GALE
City, State, Zip COALINGA CA.

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE ALKALINE SOLUTION	CORROSIVE	N.O.S	TPLS	35
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS CLEANE CHROME SLUDGE

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. CHROMIC HYDROXIDE	25.0	25.0	☒ % ☐ ppm.
B. ALUMINUM	17.5	17.5	☒ % ☐ ppm.
C. WATER	57.5	57.5	☒ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 57.5 %

(10) WASTE PROPERTIES: pH 9.5 ☐ 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 — 1-17-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 22227
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058
TRUCK NO. 9 TLR. NO. 9

(15) PICK-UP DATE 1-17-83
TIME 5:30 ☐ AM ☐ PM

(16) [signature] DRIVER — Signature of Authorized Agent and Title — 1-17-83 Date

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 6.17
19 STATE FEE (If Any) 24.68

(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] (6) — Signature of Authorized Agent and Title — 1-17-83 Date Accepted

TO GENERATOR

BOE-C6-0214733

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for rectification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge	16. Capacitors, PCB	31. Fly ash	46. Oil	61. Scrubber solution
2. Acid solution	17. Catalyst	32. Gasoline and water	47. Oil sludge	62. Soap
3. Adhesive	18. Chemicals, unused	33. Glaze sludge	48. Oil and water	63. Solvent, chlorinated
4. Alkaline sludge	19. Containers, empty	34. Glue	49. Paint sludge	64. Solvent, hydrocarbon
5. Alkaline solution	20. Contaminated equipment	35. Hair pulp	50. Pesticides	65. Solvent, oxygenated
6. Alkali solids	21. Contaminated soil	36. Heavy metal solution	51. Pesticide containers	66. Solvent, mixed
7. Alum sludge	22. Cyanides	37. Heavy metal sludge	52. Pesticide rinse water	67. Spill cleanup residue
8. API separator sludge	23. Detergent	38. Ink and solvent	53. Phenolic waste	68. Stretford solution
9. Asbestos solids	24. Distillation bottoms	39. Ink sludge	54. Photoprocessing waste	69. Sulfide sludge
10. Asbestos sludge	25. Drilling mud	40. Ink waste water	55. Plating sludge	70. Sump or lagoon sediment
11. Ashes	26. Drugs	41. Laboratory chemicals	56. Plating solution, acid	71. Tank bottom sediment
12. ASD filter cake	27. FCC waste	42. Lime sludge	57. Plating solution, alkaline	72. Tanning sludge
13. Baghouse waste	28. Filter cake	43. Machine tool coolant	58. Polychlorinated biphenyls	73. Tetraethyl lead sludge
14. Bilge water	29. Filters, spent	44. Machining waste	59. Resin waste	74. Transformers, PCB
15. Blasting sand	30. Flux	45. Metal dust	60. Scrubber sludge	75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214734

STEAM SLAB & 2-PP-11

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026364

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 190TH & NORMANDIE Phone No. 533 7.1
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 91793

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

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

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
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 — 1-21-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. SO # 22661
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 110

(15) PICK-UP DATE 1-21-83
TIME ☐ AM ☐ PM

(16) P. Owens (DRIVER) — Signature of Authorized Agent and Title — 1-21-83 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 — 1-21-83 Date Accepted

TO GENERATOR

BOE-C6-0214735

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for verification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

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TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

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Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214736

CHROME DESTRUCT SYSTEM 46186

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

1:30

(1) Manifest Number 227 - 026385

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE
City, State, Zip WEST COVINA CA 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA CA.

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE CHROMIC HYDROXIDE	CORROSIVE	N.O.S	2100	GALS.
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS CLEAN CHROME SLUDGE

LIST COMPONENTS:

(9)		CONC. UPPER	RANGE LOWER	UNITS
A.	CHROMIC HYDROXIDE	25.0	25.0	☒ % ☐ ppm.
B.	ALUMINUM	17.5	17.5	☒ % ☐ ppm.
C.	WATER	57.5	57.5	☐ % ☐ ppm.
D.				☐ % ☐ ppm.
E.				☐ % ☐ ppm.
F.				☐ % ☐ ppm.
G.				☐ % ☐ ppm.

Non Hazardous Material 57.5 %

(10) WASTE PROPERTIES: pH 9.5 ☐ 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) Sarathy Stout Berger — Signature of Authorized Agent and Title — 1-24-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23235
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 110

(15) PICK-UP DATE 1-24-83
TIME 1200 ☒ PM

(16) [signature] DRIVER — Signature of Authorized Agent and Title — 1-24-83 Date

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 574
19 STATE FEE (If Any) 2296

(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 — 1-24-83 Date Accepted

TO GENERATOR

BOE-C6-0214737

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for rectification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214738

SALVAGE YARD

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026387

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 190th & NORMANDIE Phone No. 533 761
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 2425 S. GARFIELD
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

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD & WATER	NON	N/A	100	BB'S
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
(9) A.	MUD	10		☒ % ☐ ppm.
B.	WATER	90		☒ % ☐ 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 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 — 1-24-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S.O. 23291
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 119

(15) PICK-UP DATE 1-24-83
TIME ☐ AM ☐ PM

(16) Mike Wagner — Signature of Authorized Agent and Title — 1-24-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 13.61
19 STATE FEE (If Any) 0

(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] SO — Signature of Authorized Agent and Title — 1-25-83 Date Accepted

TO GENERATOR

BOE-C6-0214739

INSTRUCTIONS F[illegible] COMPLETING MANIFEST

Typ[illegible] rint clearly. Illegible or incomplete manifests will be returned to you by the State [illegible] arification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge	16. Capacitors, PCB	31. Fly ash	46. Oil	61. Scrubber solution
2. Acid solution	17. Catalyst	32. Gasoline and water	47. Oil sludge	62. Soap
3. Adhesive	18. Chemicals, unused	33. Glaze sludge	48. Oil and water	63. Solvent, chlorinated
4. Alkaline sludge	19. Containers, empty	34. Glue	49. Paint sludge	64. Solvent, hydrocarbon
5. Alkaline solution	20. Contaminated equipment	35. Hair pulp	50. Pesticides	65. Solvent, oxygenated
6. Alkali solids	21. Contaminated soil	36. Heavy metal solution	51. Pesticide containers	66. Solvent, mixed
7. Alum sludge	22. Cyanides	37. Heavy metal sludge	52. Pesticide rinse water	67. Spill cleanup residue
8. API separator sludge	23. Detergent	38. Ink and solvent	53. Phenolic waste	68. Stretford solution
9. Asbestos solids	24. Distillation bottoms	39. Ink sludge	54. Photoprocessing waste	69. Sulfide sludge
10. Asbestos sludge	25. Drilling mud	40. Ink waste water	55. Plating sludge	70. Sump or lagoon sediment
11. Ashes	26. Drugs	41. Laboratory chemicals	56. Plating solution, acid	71. Tank bottom sediment
12. ASD filter cake	27. FCC waste	42. Lime sludge	57. Plating solution, alkaline	72. Tanning sludge
13. Baghouse waste	28. Filter cake	43. Machine tool coolant	58. Polychlorinated biphenyls	73. Tetraethyl lead sludge
14. Bilge water	29. Filters, spent	44. Machining waste	59. Resin waste	74. Transformers, PCB
15. Blasting sand	30. Flux	45. Metal dust	60. Scrubber sludge	75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Genereror from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214740

STEAM SLAB 46180

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026391

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 91793

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD + WATER	NON	N/A	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

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
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 — 1-24-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23236
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 110
(15) PICK-UP DATE 1-24-83
TIME 3:45 ☐ AM ☒ PM

(16) [signature] DRIVER — Signature of Authorized Agent and Title — 1-24-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 15.12
19 STATE FEE (If Any) 0

(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: HAULED BY CAL-PACIFIC

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

(22) NAME
EPA NO.

(23) [signature] 50 — Signature of Authorized Agent and Title — 1-28-83 Date Accepted

TO GENERATOR

BOE-C6-0214741

INSTRUCTIONS FOR COMPLETING MANIFEST

T[illegible] print clearly. Illegible or incomplete manifests will be returned to you by the Sta[illegible] clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214742

SALVAGE YARD

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026386

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD098101005
Address 19028 NORMANDIE Phone No. 533-7122
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 2425 S. GARFIELD
City, State, Zip MONTEREY PARK CA.

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

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD & WATER	NON	N/A	4200	GALS.
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
(9) A. MUD	10		☒ % ☐ ppm.
B. WATER	90		☒ % ☐ 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 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] Buyer — Signature of Authorized Agent and Title — 1-24-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S/O 23473
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 01 TLR. NO. 21 (15) PICK-UP DATE 1-24-83
TIME ☐ AM ☐ PM

(16) [signature] driver — Signature of Authorized Agent and Title — 1-24-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME OPERATING INDUSTRIES
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: PH 7

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

(22) NAME
EPA NO.

(23) [signature] — Signature of Authorized Agent and Title — 23-8 Date Accep

TO GENER

BOE-C6-0214743

INSTRUCTIONS R COMPLETING MANIFEST

Ty print clearly. Illegible or incomplete manifests will be returned to you by the Stat larification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit-board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214744

206, 207 & 212

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026388

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE.
City, State, Zip WEST COVINA CA. 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE SODIUM HYDROXIDE SOLU	CORROSIVE	UN1824	4200	GALS.
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. N/A
(8) GENERATING PROCESS CHEMICAL MILL

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. SODIUM HYDROXIDE	8		☒ % ☐ ppm.
B. SODIUM ALUMINATE	6		☒ % ☐ ppm.
C. SULFUR	6		☒ % ☐ ppm.
D. WATER	80		☒ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 80 %

(10) WASTE PROPERTIES: pH 13.0 ☐ 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 MAY CAUSE SEVERE BURNS

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 — 1-24-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23082
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 110

(15) PICK-UP DATE 1-24-83
TIME 7:30 ☐ AM ☒ PM

(16) [signature] DRIVER — Signature of Authorized Agent and Title — 1-24-83 Date

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
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 — 1-25-83 Date Accepted

TO GENERATOR

BOE-C6-0214745

INSTRUCTIONS FOR COMPLETING MANIFEST

Ty, print clearly. Illegible or incomplete manifests will be returned to you by the State [illegible] clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

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TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

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The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214746

206, 207 + 212

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026389

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE.
City, State, Zip WEST COVINA CA. 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE SODIUM HYDROXIDE	CORROSIVE	UN1824	4200	GALS
WASTE SOLUTION				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. N/A
(8) GENERATING PROCESS CHEMICAL MILL

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. SODIUM HYDROXIDE	8		☒ % ☐ ppm.
B. SODIUM ALUMINATE	6		☒ % ☐ ppm.
C. SULFUR	6		☒ % ☐ ppm.
D. WATER	80		☒ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 80 %

(10) WASTE PROPERTIES: pH 13.0 ☐ 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 MAY CAUSE SEVERE BURNS

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 — 1-24-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23237
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 17

(15) PICK-UP DATE 1-24-83
TIME 800 ☐ AM ☒ PM

(16) [illegible] DRIVER — Signature of Authorized Agent and Title — 1-24-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 19.66
19 STATE FEE (If Any) $78.64

(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) [illegible] (60) — Signature of Authorized Agent and Title — 1/25/83 Date Accepted

TO GENERATOR

BOE-C6-0214747

INSTRUCTIONS FOR COMPLETING MANIFEST

Ty[illegible] print clearly. Illegible or incomplete manifests will be returned to you by the State [illegible]larification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214748

206, 207 & 212

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

46180

(1) Manifest Number 227 - 02639u

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 1904 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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 SAZUSA AVE
City, State, Zip WEST COVINA CA 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE Sodium Hydroxide Solu.	Corrosive	UN1824	2500	GAL
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. N/A
(8) GENERATING PROCESS CHEMICAL MILL

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. Sodium Hydroxide	8		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. Sodium Aluminate	6		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C. Sulfur	6		☒ % ☐ ppm.	G.			☐ % ☐ ppm.
D. Water	80		☒ % ☐ ppm.	Non Hazardous Material 80 %			

(10) WASTE PROPERTIES: pH 13.0 ☐ 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 MAY CAUSE SEVERE BURNS

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 — 1-24-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23190
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 13 TLR. NO. 113

(15) PICK-UP DATE 1-24-83
TIME ☐ AM ☐ PM

(16) P. Cuves DRIVER — Signature of Authorized Agent and Title — 1-24-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 1349
19 STATE FEE (If Any) 5396

(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] — Signature of Authorized Agent and Title — 1/25/83 Date Accepted

TO GENERATOR

BOE-C6-0214749

INSTRUCTIONS FOR COMPLETING MANIFEST

Ty[illegible] print clearly. Illegible or incomplete manifests will be returned to you by the State [illegible] larification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214750

SALVAGE YARD

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026394

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 190 N 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. CAD062786749
Address 2210 S AZUSA AVE.
City, State, Zip WEST COVINA CA.

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD & WATER	NON	N/A	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

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
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 — 1-27-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23140
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 11 TLR. NO. 110

(15) PICK-UP DATE 1-27-83
TIME 1:45 ☐ AM ☒ PM

(16) [signature] DRIVER — Signature of Authorized Agent and Title — 1-27-83 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 — 1-28-83 Date Accepted

TO GENERATOR

BOE-C6-0214751

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214752

SALVAGE YARD

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026393

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD086510005
Address 190TH NORMANDIE Phone No. 533 7612
City, State, Zip TORRANCE CA 91502

(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

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD + WATER	NON	N/A	4200	GALS
WASTE				

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

(6) WASTE CATEGORY 70
(7) EX. HAZ. WASTE PERMIT NO. ~~[illegible]~~ N/A
(8) GENERATING PROCESS PARTS CLEANING

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
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 ☐ 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] Buyer — Signature of Authorized Agent and Title — 1-27-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23368
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 9 TLR. NO. 116

(15) PICK-UP DATE 1-27-83
TIME ☐ AM ☐ PM

(16) [signature] DRIVER — Signature of Authorized Agent and Title — 1-27-83 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)

(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] — Signature of Authorized Agent and Title — 1-28-83 Date Accepted

TO GENERATOR

BOE-C6-0214753

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214754

STEAM SLAB

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026394

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO
EPA NO. CAD 0 8 6 5 1 0 0 0 5
Address 190 E 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. CAT 0 8 0 0 1 2 0 2 4
Address 900 POTRERO GRANDE
City, State, Zip MONTEREY PARK, CA.

(4) Alternate TSD Facility
Name BKK LANDFILL
EPA NO. CAD 0 6 7 7 8 6 7 4 9
Address 2210 S AZUSA AVE
City, State, Zip WEST COVINA CA

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

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
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 75 ☐ 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] Signature of Authorized Agent and Title — 1-27-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 03142
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. C/P 15 TLR. NO. C/P 15
(15) PICK-UP DATE 1-27-83
TIME 6:45 ☐ AM ☒ PM

(16) [signature] DRIVER Signature of Authorized Agent and Title — 1-27-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME
EPA NO. OPERATING INDUSTRIES
PHONE NO. CAT 0 8 0 0 1 2 0 2 4

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 — 1-28-83 Date Accepted

TO GENERATOR

BOE-C6-0214755

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

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5. Alkaline solution
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8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

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TRANSPORTER:

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ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

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ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

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Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

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TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214756

2 OP. 11 & STEAM SLAB

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026395

GENERATOR (Generator Must Complete)

(2) Name: DOUGLAS AIRCRAFT CO.
EPA NO. CAD086510005
Address: 190 LEW DORANDIC Phone No. 533-7127
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.

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

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 — Date Shipped 1-28-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23143
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 9 TLR. NO. 116

(15) PICK-UP DATE 1-28-83
TIME 11:30 ☒ AM ☐ PM

(16) [illegible] DRIVER — Signature of Authorized Agent and Title — Date 1-28-83

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME OPERATING INDUSTRIES INC
EPA NO. CAT080012024
PHONE NO.

(18) QUANTITY (If Measured)
(19) STATE FEE (If Any)

(20) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

(21) HANDLING OR DISPOSAL METHOD:
☐ Surface Impoundment ☐ Landfill
☐ Injection Well ☐ Land Treatment
☐ Treatment (Specify)
☐ Recovery or Reuse ☐ Storage/Transfer

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

(22) NAME
EPA NO.

(23) [illegible] — Signature of Authorized Agent and Title — Date Accepted 1-28-83

TO GENERATOR

BOE-C6-0214757

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214758

T (#7

CALIFORNIA HAZARDOU(VASTE MANIFEST

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

(1) Manifest Number 227 - 026396

...or Instructions.
...type or print clearly. Press Hard

ENERATOR (Generator Must Complete)

Name [illegible]
A NO. CAD0865[illegible]005
dress [illegible] Phone No. [illegible]
y, State, Zip [illegible]

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)

Name [illegible]
EPA NO. CAD[illegible]
Address [illegible]
City, State, Zip [illegible]

(4) Alternate TSD Facility

Name [redacted]
EPA NO. CAD[illegible]
Address 429 [illegible]
City, State, Zip [illegible]

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE [illegible]	[illegible]	[illegible]	[illegible]	[illegible]
WASTE				

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

WASTE CATEGORY 2 (7) EX. HAZ. WASTE PERMIT NO. 3-2745 (8) GENERATING PROCESS [illegible]

LIST COMPONENTS	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. [illegible]	[illegible]		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. [illegible]	1.0		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C. [illegible]	1.0		☒ % ☐ ppm.	G.			☐ % ☐ ppm.
D. [illegible]	[illegible]		☒ % ☐ ppm.	Non Hazardous Material 82.5 %			

WASTE PROPERTIES: pH 1.4 ☐ Toxic ☐ Flammable ☒ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

PHYSICAL STATE: ☐ Solid ☒ Liquid ☐ Sludge ☐ Slurry ☐ Gas ☐ Other

SPECIAL HANDLING INSTRUCTIONS: ☒ Gloves ☒ Goggles ☐ Respirator ☒ Other AVOID CONTACT, MAY CAUSE [illegible]

NERATOR 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 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) A A Romano Gen Supt — Signature of Authorized Agent and Title — 31 Jan 83 — Date Shipped

ANSPORTER (HAULER MUST COMPLETE)

NAME OIL PROCESS CO. 123387
A NO. CAD050806850
DRESS 5756 Alba Street PHONE NO. (213) 585-5063
Y, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 21 TLR. NO. 21

(15) PICK-UP DATE [illegible]
TIME 3:15 ☒ AM ☐ PM

(16) [illegible] driver — Signature of Authorized Agent and Title — [illegible] — Date

D FACILITY (FACILITY-OPERATOR MUST COMPLETE)

NAME
A NO.
ONE 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

INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND
PMENT:

WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

NAME
A NO.

(23) Signature of Authorized Agent and Title — Date Accepted

BOE-C6-0214759

TK #7

CALIFORNIA HAZARDOU WASTE MANIFEST

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

(1) Manifest Number 227 - 026396

...e side for Instructions.
...pe or print clearly. Press Hard.

...ERATOR (Generator Must Complete)

Name: DOUGLAS AIRCRAFT CO INC
...PA NO.: CAD086510005
Address: 190th & NORMANDIE Phone No. 333-7612
City, State, Zip: TORRANCE, CA 90502

(3) Designated TSD Facility (Authorized to operate under an approved state program or federal program)

Name: KETTLEMEN HILLS
EPA NO.: CAD003986718
Address: 4344 W. GALE
City, State, Zip: COALINGA, CA

(4) Alternate TSD Facility

Name: [redacted] CASMALIA
EPA NO.: CAD020748125
Address: 429 SANYSIDRO RD
City, State, Zip: CASMALIA CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE ACID LIQUID, NOS	CORROSIVE	NA1760	2600	GAL
WASTE				

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

(6) WASTE CATEGORY: 2

(7) EX. HAZ. WASTE PERMIT NO.: 3-2745

(8) GENERATING PROCESS: ALUMINUM ... TK#7

LIST COMPONENTS:

(9)	CONC. UPPER	RANGE LOWER	UNITS
A. CHROMIC ACID	5.5		☒ % ☐ ppm.
B. SULFURIC ACID	11.0		☒ % ☐ ppm.
C. HYDROFLOURIC ACID	1.0		☒ % ☐ ppm.
D. WATER	82.5		☒ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 82.5 %

(10) WASTE PROPERTIES: pH 1.4 ☐ 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 AVOID CONTACT, MAY CAUSE SEVERE BURNS

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) A.A. Romano Gen Supt — Signature of Authorized Agent and Title
31 Jan 83 — Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME: OIL PROCESS CO. 23387
EPA NO.: CAD050806850
ADDRESS: 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP: Los Angeles, California 90058

TRUCK NO. 21 TLR. NO. 21

(15) PICK-UP DATE: 1-31-83
TIME: 3:15 ☒ AM ☐ PM

(16) [signature] driver — Signature of Authorized Agent and Title
1-31-83 — Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME
EPA NO.
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 — Date Accepted

GENERATOR

BOE-C6-0214760

INSTRUCTIONS F COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214761

ST 'M SLAB

CALIFORNIA HAZARDOU WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026399

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.

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

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
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) R. Kidder Mgr Eng Sa. — Signature of Authorized Agent and Title — 1/31/83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 23372
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 9 TLR. NO. 111
(15) PICK-UP DATE 1-31-83
TIME ☐ AM ☐ PM

(16) [illegible] — Signature of Authorized Agent and Title — 1-31-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME Operating Industries
EPA NO. CAT080012024
PHONE NO.
(18) QUANTITY (If Measured)
(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) [illegible] — Signature of Authorized Agent and Title — 2-1-83 Date Accepted

TO GENERATOR

BOE-C6-0214762

INSTRUCTIONS F COMPLETING MANIFEST

Type int clearly, Illegible or incomplete manifests will be returned to you by the State f rification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214763

STEAM SLAB

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026398

GENERATOR (Generator Must Complete) 46180

(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.

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD & WATER	NON	N/A	42.00	gal
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 CLEANING PARTS

(9) LIST COMPONENTS:

		CONC. UPPER	RANGE LOWER	UNITS
A.	MUD	10		☒ % ☐ ppm.
B.	WATER	90		☒ % ☐ ppm.
C.				☐ % ☐ ppm.
D.				☐ % ☐ ppm.
E.				☐ % ☐ ppm.
F.				☐ % ☐ ppm.
G.				☐ % ☐ 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) D. Kidder Haz Eng Sr. — Signature of Authorized Agent and Title — Date Shipped 1/31/83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. 22947
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 17 TLR. NO. 119

(15) PICK-UP DATE 2-1-83
TIME ☐ AM ☐ PM

(16) Bill Valoff Driver — Signature of Authorized Agent and Title — Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 13.78
19 STATE FEE (If Any) 0

(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 — Date Accepted 2-2-83

TO GENERATOR

BOE-C6-0214764

INSTRUCTIONS FOR COMPLETING MANIFEST

Typ. rint clearly. Illegible or incomplete manifests will be returned to you by the State arification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

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11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
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20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
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74. Transformers, PCB
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If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

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ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

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The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214765

CHROME DESTRUCT SYSTEM 46180

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 026391

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 BKK LANDFILL
EPA NO. CAD067786749
Address 2210 S. AZUSA AVE
City, State, Zip WEST COVINA, CA 91793

(4) Alternate TSD Facility
Name KETTLEMEN HILLS
EPA NO. CAT006646117
Address 4344 W. GALE
City, State, Zip COALINGA, CA

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE CHROMIC HYDROXIDE	CORROSIVE	N.O.S.	2000	GALS
WASTE				

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

(6) WASTE CATEGORY 5
(7) EX. HAZ. WASTE PERMIT NO. 3-2745
(8) GENERATING PROCESS CLEAN CHROME SLUDGE

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS
A. CHROMIC HYDROXIDE	25.0	25.0	☒ % ☐ ppm.
B. ALUMINUM	17.5	17.5	☒ % ☐ ppm.
C. WATER	57.5	57.5	☒ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 57.5 %

(10) WASTE PROPERTIES: pH 9.5 ☐ 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] Mac Eng Sr. — Signature of Authorized Agent and Title — 1-31-83 Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S/O 23354
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. 21 TLR. NO. 21

(15) PICK-UP DATE 1-31-83
TIME ☐ AM ☐ PM

(16) [signature] driver — Signature of Authorized Agent and Title — 1-31-83 Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME BKK
EPA NO. CAD067786749
PHONE NO.

18 QUANTITY (If Measured) 6.25
19 STATE FEE (If Any) 25.00

(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] 60 — Signature of Authorized Agent and Title — 1-31-83 Date Accepted

TO GENERATOR

BOE-C6-0214766

INSTRUCTIONS FOR COMPLETING MANIFEST

Ty print clearly. Illegible or incomplete manifests will be returned to you by the Stat clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

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15. Blasting sand
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17. Catalyst
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22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

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ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214767

MAR-IND SUPPLY, INC.
PIPE • VALVES • FITTINGS

1916 W. Anaheim Street
P. O. Box 2910
Long Beach, California 90801
(213) 435-8251 • (213) 775-1126

		TICKET	
-0118	2-22-83	23387	
0114	1-24-83	23158	
		23159	
-0111	1-5-83	22952	
-0110	12-20-82	22984	
0109	12-13-82	22627	
0107	11-15-82	22605	
		22609	
-0106	10-21-82	22134	
		22272	
-0105	10-14-82	22267	
		22291	
-0103	9-24-82	22042	
-0101	9-8-82	21549	
		22024	
-0100	8-2-82	21846	

CURRENT LOADS

3052361	3-1-83	23522	
3052364	3-15-83	22853	LOAD KETTLEMAN CALLED ABOUT
3052343	2-28-83	23511	

STEP 1 SLAB d 2-PP-11

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 227-026175

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. 91793

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE BIO-DEGRADABLE COOLANT	NON	N.O.S.	4200	GALS.
WASTE				

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

(6) WASTE CATEGORY 43
(7) EX. HAZ. WASTE PERMIT NO. N/A
(8) GENERATING PROCESS MACHINING PROCESS

(9) LIST COMPONENTS:	CONC. UPPER	RANGE LOWER	UNITS
A. BIO-DEGRADABLE COOLANT		3	☒ % ☐ ppm.
B. WATER	97		☒ % ☐ ppm.
C.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.
E.			☐ % ☐ ppm.
F.			☐ % ☐ ppm.
G.			☐ % ☐ ppm.

Non Hazardous Material 100 %

(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 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
1-14-83 — Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S.O. 23212
EPA NO. CAD050806850
ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063
CITY, STATE, ZIP Los Angeles, California 90058

TRUCK NO. TLR. NO.

(15) PICK-UP DATE
TIME ☐ AM ☐ PM

(16) Signature of Authorized Agent and Title — Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME
EPA NO.
PHONE NO.

18 QUANTITY (If Measured)
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

ORIGINAL

BOE-C6-0214769

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretched solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214770

S. Am SLAB

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 025854

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO-
EPA NO. CAD006510005
Address 190 E 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 WEST COVINA, CA.

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

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE				
WASTE				

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

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

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A.			☐ % ☐ ppm.	E.			☐ % ☐ ppm.
B.			☐ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material			%

(10) WASTE PROPERTIES: pH ☐ 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) Signature of Authorized Agent and Title — Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

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

TRUCK NO. TLR. NO.

(15) PICK-UP DATE
TIME ☐ AM ☐ PM

(16) Signature of Authorized Agent and Title — Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME
EPA NO.
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 — Date Accepted

ORIGINAL

BOE-C6-0214771

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge	16. Capacitors, PCB	31. Fly ash	46. Oil	61. Scrubber solution
2. Acid solution	17. Catalyst	32. Gasoline and water	47. Oil sludge	62. Soap
3. Adhesive	18. Chemicals, unused	33. Glaze sludge	48. Oil and water	63. Solvent, chlorinated
4. Alkaline sludge	19. Containers, empty	34. Glue	49. Paint sludge	64. Solvent, hydrocarbon
5. Alkaline solution	20. Contaminated equipment	35. Hair pulp	50. Pesticides	65. Solvent, oxygenated
6. Alkali solids	21. Contaminated soil	36. Heavy metal solution	51. Pesticide containers	66. Solvent, mixed
7. Alum sludge	22. Cyanides	37. Heavy metal sludge	52. Pesticide rinse water	67. Spill cleanup residue
8. API separator sludge	23. Detergent	38. Ink and solvent	53. Phenolic waste	68. Stretford solution
9. Asbestos solids	24. Distillation bottoms	39. Ink sludge	54. Photoprocessing waste	69. Sulfide sludge
10. Asbestos sludge	25. Drilling mud	40. Ink waste water	55. Plating sludge	70. Sump or lagoon sediment
11. Ashes	26. Drugs	41. Laboratory chemicals	56. Plating solution, acid	71. Tank bottom sediment
12. ASD filter cake	27. FCC waste	42. Lime sludge	57. Plating solution, alkaline	72. Tanning sludge
13. Baghouse waste	28. Filter cake	43. Machine tool coolant	58. Polychlorinated biphenyls	73. Tetraethyl lead sludge
14. Bilge water	29. Filters, spent	44. Machining waste	59. Resin waste	74. Transformers, PCB
15. Blasting sand	30. Flux	45. Metal dust	60. Scrubber sludge	75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214772

SOAM SLAB

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 025854

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO.
EPA NO. CAD086510005
Address 190 E. 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 WESTCOVINA, CA

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

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE				
WASTE				

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

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

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A.			☐ % ☐ ppm.	E.			☐ % ☐ ppm.
B.			☐ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material			%

(10) WASTE PROPERTIES: pH ☐ 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) Signature of Authorized Agent and Title — Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

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

TRUCK NO. TLR. NO.

(15) PICK-UP DATE
TIME ☐ AM ☐ PM

(16) Signature of Authorized Agent and Title — Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME
EPA NO.
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 — Date Accepted

TO TRANSPORTER

BOE-C6-0214773

INSTRUCTIONS FOR COMPLETING MANIFEST

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State for clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214774

SOAM SLAB

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 - 025854

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO.
EPA NO. CAD006510005
Address 190 E. NORMANDIE Phone No. 533-761
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 WESTCOVINA CA.

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

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE				
WASTE				

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

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

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A.			☐ % ☑ ppm.	E.			☐ % ☐ ppm.
B.			☐ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material			%

(10) WASTE PROPERTIES: pH ☐ 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) Signature of Authorized Agent and Title — Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

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

TRUCK NO. TLR. NO.

(15) PICK-UP DATE
TIME ☐ AM ☐ PM

(16) Signature of Authorized Agent and Title — Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME
EPA NO.
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 — Date Accepted

TO GENERATOR

BOE-C6-0214775

INSTRUCTIONS FOR COMPLETING MANIFEST

Typ[illegible] print clearly. Illegible or incomplete manifests will be returned to you by the State [illegible] clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

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2. Acid solution
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5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bilge water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

ITEM (12) Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214776

SOM SCNB

CALIFORNIA HAZARDOUS WASTE MANIFEST

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

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

(1) Manifest Number 227 - 025854

GENERATOR (Generator Must Complete)

(2) Name DOUGLAS AIRCRAFT CO.
EPA NO. CAD041710005
Address 19400 Normandie Phone No. 5332
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 Fairway Drive
City, State, Zip West Covina CA

(4) Alternate TSD Facility
Name BKK LANDFILL
EPA NO. CAD097786749
Address 2210 S Azusa Ave
City, State, Zip

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE				
WASTE				

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

(6) WASTE CATEGORY ____ (7) EX. HAZ. WASTE PERMIT NO. ____ (8) GENERATING PROCESS ____

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A.			☐ % ☐ ppm.	E.			☐ % ☐ ppm.
B.			☐ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material ____ %			

(10) WASTE PROPERTIES: pH ____ ☐ 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) ____ Signature of Authorized Agent and Title ____ Date Shipped

TRANSPORTER (HAULER MUST COMPLETE)

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

TRUCK NO. ____ TLR. NO. ____

(15) PICK-UP DATE ____
TIME ____ ☐ AM ☐ PM

(16) ____ Signature of Authorized Agent and Title ____ Date

TSD FACILITY (FACILITY-OPERATOR MUST COMPLETE)

(17) NAME ____
EPA NO. ____
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 ____ Date Accepted

GENERATOR

BOE-C6-0214777

INSTRUCTIONS [illegible] COMPLETING MANIFEST

Typ[illegible] print clearly. Illegible or incomplete manifests will be returned to you by the State [illegible] clarification.

GENERATOR:

ITEM (1) Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)

ITEMS (2)(3)(4) Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.

ITEM (5) Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in Item 5.

ITEM (6) Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Acid solution" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in Item 6.)

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15. Blasting sand
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21. Contaminated soil
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25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glaze sludge
34. Glue
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acid
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Stretford solution
69. Sulfide sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB
75. Waste water treatment sludge

If waste not listed above, specify in Item 6 on manifest.

ITEM (7) If the waste is extremely hazardous, provide the State extremely hazardous permit number.

ITEM (8) Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM (9) INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEMS (10) (11) Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive) check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in Item 11.

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ITEM (13) Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing Item 13 shall be knowledgeable about the chemical and physical properties of the waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM (1) Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or chronological). For example, if your registration number is 899, the number of your one thousandth load would be 899-001000. The complete nine digit manifest number shall be unique for any five year period (Example: If you use manifest number 899-001000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM (14) Enter company name, EPA I.D. number, address and telephone number.

ITEM (15) Indicate the date and exact time the waste was removed from the generator's facility.

ITEM (16) Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM (17) Provide the TSD facility name and EPA I.D. number.

ITEM (18) If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM (19) If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in Item 19.

ITEM (20) Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM (21) Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to, or instead of, land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM (22) If the waste is held at the TSD facility prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM (23) Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility.

The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. If wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facilitity operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.

BOE-C6-0214778