AZARDOUS WASTE MANAGEMENT BRANCH
4 P Street
cramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

GENERATOR COPY

CHROME DESTRUCT BIN

Return to Generator

ase print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83019915

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
DOUGLAS AIRCRAFT CO.
190th & S. Normandie Ave
Torrance, CA. 90502
AREA CODE/PHONE NUMBER 213-533-6677

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD086510005

TRANSPORTER NO. 1
J.C. INCORPORATED LIQUID WASTE DISPOSAL
3650 East 26th Street
Vernon, California 90023
(213) 268-3137

VEH./CONTAINER NO.

EPA ID NUMBER
CAD058018367

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
BKK Landfill
2210 S. Azusa Ave
West Covina, CA

VEH./CONTAINER NO.

EPA ID NUMBER
CAD067786749

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
CASMALIA
PO Box E. MTU Rpad
Casmalia, CA.
AREA CODE/PHONE NUMBER

EPA ID NUMBER
CAD020748125

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	CONTAINER TYPE	WASTE CAT NO.	DISP. METH.
Waste: Alkaline Liq. N.O.S. (Corrosive)	NA1719	04900	G	001	R0	123	08

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM
Solid*	9.0	0	%	
Water	91.0	0	%	
* Chromic Hydroxide	25.0	0	%	
Aluminum Hydroxide	5.0	0	%	
Calcium Hydroxide	7.0	0	%	
Magnesium Hydroxide	2.0	0	%	
Silicon Oxide	2.0	0	%	

SPECIAL HANDLING INSTRUCTIONS

Potential Hazards Guide Number: 60

Gloves, goggles, - May cause severe irritation to skin & eyes

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature Donald C. Gerber [signature] sb

MO. 06 DAY 04 YR. 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Tony Cairo [signature] w/o 44932
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. 06 DAY 04 YR. 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
To
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE 08/14

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

21891- 20,180 LBS

Casmalia Resources
Alice Griest
Printed or typed full name and signature

EPA ID NUMBER CAD020748125

DATE RECEIVED & ACCEPTED MO. 06 DAY 06 YR. 84

BOE-C6-0216638