AZARDOUS WASTE MANAGEMENT BRANCH
44 P Street
acramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

GENERATOR COPY

Return to Generator

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

STATE ID NUMBER 83021646

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

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD086510005

TRANSPORTER NO. 1
JC Incorporated Liquid Waste Disposal
3650 E. 26th Street
Vernon, CA 90023

VEH./CONTAINER NO. 2001431157

EPA ID NUMBER CAD059013367

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
BKK ~~Landfill~~ BKK
~~2000 E. Lambert Ave~~ 1700 Maxwell Rd
~~West Covina, CA~~ Chula Vista, CA. 92011

VEH./CONTAINER NO.

EPA ID NUMBER CAT080010101
CAD097739219

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

EPA ID NUMBER CAD020074125

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 Sodium Hydroxide Solution Corrosive	UN1824	[illegible]	G	001	CT	12	[illegible]

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM
Sodium Hydroxide	8	0	%	
Sodium Aluminate	5	0	%	
Sulfur	6	0	%	
Water	80	0	%	

SPECIAL HANDLING INSTRUCTIONS
Potential Hazards Guide NO: 60
Use gloves, goggles - may cause severe burns 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 Donald C. Gerber sb — MO. 08 DAY 14 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
HARALD BUEHLER
Printed or typed full name and signature
309 T-1
1154 LK066
DATE REC'D & ACCEPTED — MO. 08 DAY 14 YR. 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
08/14
DATE REC'D & ACCEPTED — MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

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 22268- 31,580 165-

Casmalia Resources Alice Griest Alice Griest
Printed or typed full name and signature

EPA ID NUMBER CAD020748125

DATE RECEIVED & ACCEPTED — MO. 6 DAY 14 YR. 84

TSDF SENDS THIS COPY TO GENERATOR WITHIN 15 DAYS

BOE-C6-0216654