State of California Health and Welfare Agency

HAZARDOUS WASTE MANAGEMENT BRANCH
44 P Street
Sacramento, CA 95814

Please print or type with ELITE type (12 characters per inch)

UNIFORM HAZARDOUS WASTE MANIFEST

GENERATOR COPY

Return to Generator

STATE ID NUMBER 83019928

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
J.C. INCORPORATED LIQUID WASTE DISPOSAL
3650 East 26th Street
Vernon, California 90023
(213) 268-3137

VEH./CONTAINER NO. 01013172

EPA ID NUMBER CAD058018367

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
BKK
1700 Maxwell Road
Chula Vista, CA 92011

VEH./CONTAINER NO.

EPA ID NUMBER CAT080010101

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
CASMALIA
P.O. Box E. NTU Road
Casmalia, CA.
AREA CODE/PHONE NUMBER

EPA ID NUMBER CAD020748125

TO BE FILLED IN BY GENERATOR

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	04500	G	001	DT	121	06

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

SPECIAL HANDLING INSTRUCTIONS
Potential Hazards Guide #: 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 [signature] sb — MO. 06 DAY 07 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
Stan Cantrell [signature] T-30 — DATE REC'D & ACCEPTED MO. 06 DAY 15 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.

22272- 31,220 lbs.

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

EPA ID NUMBER — DATE RECEIVED & ACCEPTED MO. DAY YR.

BOE-C6-0216656