State of California—Health and Welfare Agency

TANK #8016, #

GENERATOR COPY

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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

Return To Generator

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A D 0 8 6 5 1 0 0 0 5
Manifest Document No.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
DOUGLAS AIRCRAFT COMPANY
190th & Normandie Avenue
Torrance, CA 90502
4. Generator's Phone ( ) (213) 533-6677

A. State Manifest Document Number 84351279
B. State Generator's ID

5. Transporter 1 Company Name
J. C. Liquid Waste Disposal
6. US EPA ID Number C.A.D.0.5.8.0.1.8.3.6.

C. State Transporter's ID 55647
D. Transporter's Phone (213) 268-3137

7. Transporter 2 Company Name
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
CASMALIA
P.O. BOX E, NTU Road
Casmalia, CA 93429
10. US EPA ID Number C.A.0.0.2.0.7.4.8.1.2.5

G. State Facility's ID CAD020748125
H. Facility's Phone

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Hazardous Waste Liquid N.O.S. ORME-E UN9189	001	T T	0 4 5 0 0	G	4 6 1
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Paint Sludge 10%
Bio Degradable Coolant 3%
Water 87%

K. Handling Codes for Wastes Listed Above
06 C

15. Special Handling Instructions and Additional Information Guide No. 31
Use gloves, goggles, respirator - Do not go near open flame or inhale fumes.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name: Donald C. Gerber clt
Signature: Donald Gerber
Date: Month 02 Day 22 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jon Stormo WO# 52119
Signature: Jon Stormo
Date: Month 02 Day 22 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: C. Bitterbach
Signature: C Bitterbach
Date: Month 02 Day 25 Year 85

FACILITY

19. Discrepancy Indication Space

SCANNED

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. # 41313 - 26,760 lbs.

Printed/Typed Name: Casmalia Resources
Signature: Alice Priest
Date: Month 02 Day 25 Year 85

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

WO# 52119

84 89541

BOE-C6-0217534

State of California—Health and Welfare Agency

TANK #8016, #8017, #8018

0144
57624

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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2. Page 1 1 of 1 — Information in the shaded areas is not required by Federal law.

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190th & Normandie Avenue
Torrance, CA 90502

4. Generator's Phone ( ) (213) 533-6677

A. State Manifest Document Number: 84351279

B. State Generator's ID

5. Transporter 1 Company Name: J. C. Liquid Waste Disposal

6. US EPA ID Number: C A D 0 5 8 0 1 8 3 6 7

C. State Transporter's ID: 55647

D. Transporter's Phone: (213) 268-3137

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CASMALIA
P.O. BOX E, NTU Road
Casmalia, CA 93429

10. US EPA ID Number: C A 0 0 2 0 7 4 8 1 2 5

G. State Facility's ID

H. Facility's Phone

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Printed/Typed Name: Donald C. Gerber clt — Signature: Donald Gerber — Date: Month 02 Day 22 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jon Stormo WO# 52119 — Signature: [signature] — Date: Month 02 Day 22 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

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

19. Discrepancy Indication Space

SCANNED

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

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

GENERATOR — TRANSPORTER — FACILITY

DHS 8022 A (7/84)
(EPA 8700-22)

Yellow: GENERATOR RETAINS

84 89541

BOE-C6-0217535