State of California—Health and Welfare Agency

GENERATOR COPY
Return to Generator

2-PP-11 STEAM SLAB

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD086510005 | 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 Co. 190th & Normandie Ave Torrance, CA 90502

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

A. State Manifest Document Number: 84924011

B. State Generator's ID:

5. Transporter 1 Company Name: Oil ProcessCo.

6. US EPA ID Number: CAD050806850

C. State Transporter's ID: 53289

D. Transporter's Phone: 213-585-5063

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: CAD020748125

G. State Facility's ID: CAD020748125

H. Facility's Phone:

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. Hazardous Waste Liquid NOS ORM-E NA9189	001	TT	04500	G	221
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Alkaline Soap 5%
Grease 2%
Oil 3%
Water 90%

K. Handling Codes for Wastes Listed Above: 06/C

15. Special Handling Instructions and Additional Information #31
Use gloves, goggles, respitator - 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 sb | Signature: Donald C. Gerber | Date: Month 07 Day 05 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Patrick Owens | Signature: [signature] | Date: Month 7 Day 05 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. # 52340-24960 lbs
Printed/Typed Name: Casmalia Resources | Signature: [signature] | Date: Month 7 Day 5 Year 85

GENERATOR / TRANSPORTER / FACILITY

84924011

DHS 8022 A (11/84)
(EPA 8700-22)

YELLOW TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89641

BOE-C6-0217799

State of California—Health and Welfare Agency

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

2-PP-11 STEAM SLAB

0001
22475-53156

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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 Co.
190th & Normandie Ave
Torrance, CA 90502

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

A. State Manifest Document Number 8492401 1

B. State Generator's ID

5. Transporter 1 Company Name
Oil ProcessCo.

6. US EPA ID Number C A D 0 5 0 8 0 6 8 5 0

C. State Transporter's ID 5329

D. Transporter's Phone 213-585-5063

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 D 0 2 0 7 4 8 1 2 5

G. State Facility's ID

H. Facility's Phone

GENERATOR

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Printed/Typed Name: Donald C. Gerber sh
Signature: [signature]
Date (Month Day Year): 02 05 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Patrick Quinn
Signature: [signature]
Date (Month Day Year): 02 05 85

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date (Month Day Year)

FACI

19. Discrepancy Indication Space

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

Printed/Typed Name: SCANNED
Signature
Date (Month Day Year)

8492401 1

DHS 8022 A (11/84)
(EPA 8700-22)

YELLOW: GENERATOR RETAINS

84 89641

BOE-C6-0217800