State of California—Health and Welfare Agency

CHROME DESTRUCT SYSTEM

GENERATOR COPY

Return to Generator

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. CAD086610005 | 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. 1038
190th & Normandie Avenue - Torrance, CA 90502

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

A. State Manifest Document Number: 84924037

B. State Generator's ID

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

6. US EPA ID Number: CAD058018367

C. State Transporter's ID: 53257

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

7. Transporter 2 Company Name: O.C. Vacuum Tk, Serv. Inc 3001

8. US EPA ID Number: CAT80032253

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. Waste Alkaline Liquid NOS Corrosive - NA 1719	001	TT	045.00	G	123
b. DOTE-8478					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

*Solid	9.0%	Magnesium Hydroxide	2.0%
Water	91.0%	Silicon Oxide	2.0%
*Chromic Hydroxide	25.0%	Calcium Hydroxide	7.0%
Aluminum Hydroxide	5.0%		

K. Handling Codes for Wastes Listed Above: d/c

15. Special Handling Instructions and Additional Information #60

USE GLOVES, GOGGLES - MAY CAUSE SEVERE IRRITATION TO SKING AND EYES.

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	Signature	Date Month Day Year
Donald C. Gerber TERESA M CIULTER	Teresa M Coulter	07 26 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
SANTOS YBARRA W/O 54578	Santos Ybarra	07 26 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
David Carrasco	David Carrasco	07 29 85

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. #54550 32,730 lb

Printed/Typed Name	Signature	Date Month Day Year
Casmalia Resources	Carol Sabrosky	7 29 85

clt

84924037

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

SCANNED

YELLOW TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

WO#54578

84 89641

BOE-C6-0217852

0191

State of California—Health and Welfare Agency

CHROME DESTRUCT SYSTEM

Department of Health Services
Toxic Substances Control Division
Sacramento, California

21721-53646

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

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Manifest Document No.:
2. Page 1 of 1
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B. State Generator's ID:

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6. US EPA ID Number: CAD058018367

C. State Transporter's ID: 53257

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: CAD020748125

G. State Facility's ID:

H. Facility's Phone:

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Printed/Typed Name: Donald C. Gerber TERESA M [illegible]
Signature: [illegible]
Date: Month 07 Day 26 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: SANTOS YBARRA W/054578
Signature: Santos Ybarra
Date: Month 07 Day 26 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.
Printed/Typed Name:
Signature:
Date: Month Day Year

GENERATOR

TRANSPORTER

FACILITY

84924037

clt

SCANNED

YELLOW GENERATOR RETAINS

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

84 89641

BOE-C6-0217853