State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

GENERATOR COPY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) 259

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: 84924054
B. State Generator's ID:

5. Transporter 1 Company Name: OIL PROCESS CO.
6. US EPA ID Number: C A D 0 5 0 8 0 6 8 5 0
C. State Transporter's ID: 53284
D. Transporter's Phone: 213 - 585-5063

7. Transporter 2 Company Name: Oil Process Co.
8. US EPA ID Number: C A D 0 5 0 8 0 6 8 5
E. State Transporter's ID: 63687
F. Transporter's Phone: (213) 585-5063

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: 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 SODIUM HYDROXIDE LIQUID CORROSIVE - UN 1824	0 0 1	T T	0 4 5 0 0	G	121
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Sodium Hydroxide 8% 6% P.H. 1.2
Sodium Aluminate 6% 4%
Sulfer 6% 4%
Water 80% 86%

K. Handling Codes for Wastes Listed Above: 99

15. Special Handling Instructions and Additional Information

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
Signature: Donald Gerber
Date: Month 08 Day 13 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Steve Erichson
Signature: Steve Erichson
Date: Month 8 Day 13 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Victor M. Avena
Signature: Victor M. Avena
Date: Month 08 Day 14 Year 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. # 56110 - 29,860 lbs
Printed/Typed Name: Casmalia Resources
Signature: Carol Johnston
Date: Month 8 Day 14 Year 85

GENERATOR / TRANSPORTER / FACILITY

84924054 pump to 116

SCANNED

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

YELLOW TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89641

BOE-C6-0217892

C6-700-85-OPC-0010
22475-54027

State of California — Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

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

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190th & Normandie Ave. - Torrance, CA 90502

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

A. State Manifest Document Number: 84924054

B. State Generator's ID

5. Transporter 1 Company Name: OIL PROCESS CO.

6. US EPA ID Number: C A D 0 5 9 8 0 6 8 5 0

C. State Transporter's ID: 53259

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

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Printed/Typed Name	Signature	Date Month Day Year
DONALD C. GERBER	[signature]	08 13 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
Steve Erickson	Steve Erickson	8 13 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

84924054

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

SCANNED

YELLOW: GENERATOR RETAINS

84 89641

BOE-C6-0217893