State of California—Health and Welfare Agency

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 84924088

B. State Generator's ID

5. Transporter 1 Company Name: Oil Process Co.

6. US EPA ID Number: CAD050806850

C. State Transporter's ID 6368T

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID 213-585-5063

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

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. Hazardous Waste Liquid NOS ORM-E NA9189	001	TT	4,500	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
CVI

15. Special Handling Instructions and Additional Information
Guide #31
Use gloves, goggles, repsirator - 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 09 Day 27 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: S-033872 John Neal — Signature: John Neal — Date: Month 9 Day 27 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

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. #59865 - 28,540 lbs.

Printed/Typed Name: Casmalia Resources / Edun Bautista — Signature: Edun Bautista — Date: Month 09 Day 27 Year 85

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

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89641

84924088

BOE-C6-0217974

22475-56019

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

2-PP-11 STEAM SLAB

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190th & Normandie Ave.
Torrance, CA 90502

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

A. State Manifest Document Number 84924088

B. State Generator's ID

5. Transporter 1 Company Name: Oil Process Co.

6. US EPA ID Number: CAD050806850

C. State Transporter's ID 63687

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID 213-585-5063

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

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.
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Printed/Typed Name: Donald C. Gerber sb — Signature: [signature] — Date (Month Day Year): 9 27 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: S-033872 John Neal — Signature: [signature] — Date (Month Day Year): 9 27 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: SCANNED — Signature — Date (Month Day Year)

84924088

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

YELLOW: GENERATOR RETAINS

84 89641

BOE-C6-0217975