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

A. State Manifest Document Number 84924095

B. State Generator's ID

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

5. Transporter 1 Company Name: Oil Process Co.

6. US EPA ID Number: CAD050806850

C. State Transporter's ID 63687

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 CAD 020748125

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 | 4,500 | G | 221 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

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 Guide #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 sb — Signature: Donald C. Gerber — Date: Month 10 Day 04 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: S-033873 JOHN NEAL — Signature: John Neal — Date: Month 10 Day 4 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space
12.01 tons

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. #60514-24,020 lbs.

Printed/Typed Name: Casmalia Resources Carol Johnston — Signature: Carol Johnston — Date: Month 10 Day 04 Year 85

GENERATOR — TRANSPORTER — FACILITY

84924095

SCANNED

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

A (11/84)
0-22)

84 89641

BOE-C6-0217995

22475-SC016

State of California—Health and Welfare Agency

2-PP-11 STEAM SLAB

Department of Health Services
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C. State Transporter's ID 63687

D. Transporter's Phone 213-505-5063

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: CAD020747125

G. State Facility's ID

H. Facility's Phone

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Printed/Typed Name: Donald C. Gerber sb — Signature: [signature] — Date: Month 10 Day 04 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: S-033873 JOHN NEAL — Signature: [signature] — Date: Month 10 Day 4 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

84924095

SCANNED

YELLOW: GENERATOR RETAINS

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

84 89641

BOE-C6-0217996