State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

CHROME DESTRUCT SYSTEM

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

GENERATOR COPY

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
Torrance, CA 90502

Return to

A. State Manifest Document Number 84924161

B. State Generator's ID

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

5. Transporter 1 Company Name: OilpProcess Co.
6. US EPA ID Number: CAD050806785

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 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 - NA1719	001	TT	04500	G	123
b.					
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: 06/C

15. Special Handling Instructions and Additional Information
Guide #60
Use gloves, goggles, respirator - May cause severe irritation to skin & 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: Donald C. Gerber sb | Signature: Donald C. Gerber | Date: Month 11 Day 20 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert LAttimore | Signature: Robert Lattimore | Date: Month 11 Day 20 Year 85

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

19. Discrepancy Indication Space
14.46 tons

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. #64113 - 28,920 lbs
Printed/Typed Name: Casmalia Resources Alvin Brown Mike Brown | Signature | Date: Month 11 Day 20 Year 85

SCANNED

84924161

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

YELLOW TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89641

BOE-C6-0218088

C6-700-85-OPC-0029
22475-55500

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

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190th & Normandie
Torrance, CA 90502

A. State Manifest Document Number 84924161
B. State Generator's ID

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

5. Transporter 1 Company Name: OilpProcess Co.
6. US EPA ID Number: CAD050806795
C. State Transporter's ID 65687
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
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.
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Printed/Typed Name: Donald C. Gerber sb — Signature: Donald C. Gerber — Date (Month Day Year): 11 20 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert L. Attanasio — Signature: Robert L. Attanasio — Date (Month Day Year): 11 20 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.
Printed/Typed Name — Signature — Date (Month Day Year)

SCANNED

84924161

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

YELLOW: GENERATOR RETAINS

84 89641

BOE-C6-0218089