State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
Please print or type. *(Form designed for use on elite (12-pitch typewriter).*

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Department of Health Services
Toxic Substances Control Division
Sacramento, California

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, 190th & Normandie, Torrance, CA 90502
4. Generator's Phone (533-6677)
A. State Manifest Document Number: 87108616
B. State Generator's ID: HA-HQ-36-005698 CAD086510005
C. State Transporter's ID: 709718
D. Transporter's Phone: 213 268-3137
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAT080033681
H. Facility's Phone: 213 268-3137

5. Transporter 1 Company Name: J. C. Liquid Waste Disposal
6. US EPA ID Number: CAD058018367
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: CHEM TECK SYSTEMS, INC., 3650 E. 26th St., Vernon, CA
10. US EPA ID Number: CAT080033681

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	04500 45	G	State 221 EPA/Other D002
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
Alkaine Soap 5%
Grease 2%
Oil 3%
Water 90%

K. Handling Codes for Wastes Listed Above
a. b. c. d.

15. Special Handling Instructions and Additional Information
Guide #31
Use gloves, goggles, respirator - Return to DAC if rejected

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 government regulations.*

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have *determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to* me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Donald C. Gerber sb
Signature: [signature] for J.C. Gerber
Month Day Year: 09 25 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Phillip Gallegos D2654
Signature: [signature]
Month Day Year: 09 26 87

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

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

DHS 8022 A (1/87)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

BOE-C6-0219121