Clean Care
0551
4-29-99

WASTE RECEIPT # 96005563

SHIPPER ID # 990401-08

GENERATOR Honda Auto Center

MANIFEST # 51809

DRUM #	DESCRIPTION	% OF SOLIDS	% OF SLUDGE	% OF LIQUID	DRUM SIZE	TOTAL GALLONS	PROFILE #	STORAGE LOCATION
01	Brake Fluid	00	00	100	16	16g	12615	TF#4

DATE 4-29-99

RECEIVERS SIGNATURE Mike Olsen

USEPA SF
1487843

NONE

Emergency Contact Telephone Number

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: SQG
Manifest Document No.: 51809
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: Honda Auto Center, 13291 S.E. 36th, Bellevue, WA. 98006
4. Generator's Phone: 425 649-1431

A. State Manifest Document Number: 990251809A
B. State Generator's ID:

5. Transporter 1 Company Name: CleanCare
6. US EPA ID Number: WAD988477147
C. State Transporter's ID:
D. Transporter's Phone: (253) 627-1976

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: CleanCare Corporation, 1510 Taylor Way, Tacoma WA 98421
10. US EPA ID Number: WAD980738512
G. State Facility's ID:
H. Facility's Phone: (206) 627-1976

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	COMBUSTIBLE LIQUID, N.O.S., CO SPENT SOLVENT, PG III, NA1993,	000	00	000000	D001 D008 D018 D039 WP02
b.	X	Non RCRA waste liquid	001	DM	00016	G WT02
c.						
d.						

J. Additional Descriptions for Materials Listed Above
11a. MINERAL SPIRITS, OIL, LEAD, BENZENE
11b. Non-RCRA waste liquid
990401-08

K. Handling Codes for Wastes Listed Above
a. RORGS

15. Special Handling Instructions and Additional Information
11a. Use ERG# 128 for 11a, EMERGENCY CONTACT 1-800-282-8128, NAPHTHA FOR RECYCLE
11b. use ERG# 128 for 11b " " " "

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.

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: JASON C. SUNDET
Signature: [signature]
Month Day Year: 04 20 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Gavin W. Haugen
Signature: [signature]
Month Day Year: 04 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leroy Whalen
Signature: [signature]
Month Day Year: 04 21 99

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: Mike Deacon for cc
Signature: [signature]
Month Day Year: 04 29 99

T/S/D/F COPY

NONE

Emergency Contact Telephone Number

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: SQG
Manifest Document No.: 51809
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: Hon A. Auto Center, 13291 S.E. 30th, Bellevue, WA. 98006
4. Generator's Phone: 425 x 19-1431
A. State Manifest Document Number: 990251809A
B. State Generator's ID:
5. Transporter 1 Company Name: CleanCare
6. US EPA ID Number: WAD980477147
C. State Transporter's ID:
D. Transporter's Phone: (253) 627-1976
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: CleanCare Corporation, 1010 Taylor Way, Tacoma WA 98421
10. US EPA ID Number: WAD980738512
G. State Facility's ID:
H. Facility's Phone: (206) 627-1976

	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.	COMBUSTIBLE LIQUID, N.O.S., SPENT SOLVENT, PG III, NA1993	000	00	000000	0	[illegible]
b.	X Non RCRA waste liquid	001	DM	000166	G	WT02
c.						
d.						

J. Additional Descriptions for Materials Listed Above
11a. MINERAL SPIRITS, OIL, LEAD, BENZENE
11b. Non-RCRA waste liquid
990401-08

K. Handling Codes for Wastes Listed Above
a. RORGS

15. Special Handling Instructions and Additional Information
11a. Use ERG# 128 for 11a. EMERGENCY CONTACT 1 800-282-8120. NAPHTHA FOR RECYCLE
11b. Use ERG# 128 for 11b " " " "

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.

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: JASON C. SUNDET
Signature: [signature]
Month Day Year: 04 20 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Irvin W. Haugen
Signature: [signature]
Month Day Year: 04 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leroy Whalen
Signature: [signature]
Month Day Year: 04 21 99

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: Mike Deacon for cc
Signature: [signature]
Month Day Year: 04 29 99

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER #2

12615

CleanCare Corp.
Material Information Sheet

Profile Number: [illegible]

Cert. Date: 1/31/99
Review Date: 1/30/00

Generating Site		Mailing Address	
Name:	Honda Auto Center	Name:	
Address:	13240 S.E. 36th	Address:	
City:	Bellevue	City:	
State:	WA	State:	
Zip:	98006	Zip:	
Phone:	641-7431	Phone:	
Contact:		Contact:	
EPA ID#:	SQG		

WASTE MATERIAL
WasteName: NON CHLORINATED BRAKE FLUID
WasteProcess: VEHICLE MAINTENCE
FormCode: B210
ProcessCode: N001
SourceCode: A07
TreatmentCode:
MSDSCode:
AnalysisCode:
Generic Profile: Y
SampleNumber:

WASTE CHARACTERISTICS

WasteColor:	RED/BROWN	Percent Solids:	<5%	PCBs:	NEG
Flashpoint:	LIQUID	Specific Gravity:	0.8-1.0	Cyanide:	NEG
pH Range:	4-8	Layers:	1	Sulfides:	NEG
Flash Point:	>200	BTU Value:	>5000	Formalin:	NEG

METALS

	PPM		PPM		PPM
Arsenic:	<5	Lead:	<5	Nickel:	<134
Barium:	<100	Mercury:	<.5	Thallium:	<130
Cadmium:	<5	Selenium:	<5	Tot Chrome:	<5
Chromium:	<5	Silver:	<5		

WASTE CODES Federal
Comments
State: WT01
Designation Code: D

WASTE COMPOSITION

	Min	Max
GLYCOL ETHER BASED BRAKE FLUID	95	100
SOLIDS/SLUDGES	0	5
		100

ShipDOT_PSN: NON-RCRA WASTE, LIQUID
ShipAddlDesc:
ShipInnerPCInner:
ShipDOT_Hz:
ShipPackingGroup:

I hereby certify that as an authorized representative of the generator named above, that the above attached description is complete and accurate to the best of my knowledge and ability to determine, that no deliberate or willful omission of composition or properties exist, and that all known or suspected hazards have been disclosed. I certify that the materials tendered are representative of all materials subject to the contract.

Signature: [signature]
Date: 4/20/99
Printed Name: JASON C. SUNDET
Title: SVC. Manager
Date: 4/20/99