



925 West Esther Street
Long Beach, CA 90813

Ph: (562) 624-4120
www.ocean-blue.com

INVOICE

VIA EMAIL

NO. 39613

BILL TO: CITY OF CARSON
701 E CARSON ST
CARSON, CA 90745
ATTN: ACCOUNTS PAYABLE

INVOICE DATE: 4/2/24
INCIDENT REPORT: 924-02173-1626-471
TERMS: NET 30 DAYS

DESCRIPTION	QTY	START	STOP	BREAK	DURATION	RATE	AMOUNT
REQUESTER: KIRBY JONES (562) 446-1622							
JOB LOCATION: 23208 ALAMEDA STREET, CARSON, CA 90810							
JOB DESCRIPTION: FUEL SPILL CLEAN UP							
Wednesday, February 28, 2024							
SUPERVISOR - O/T	1	18:00	22:30	0.50	4.00	152.30	\$ 609.20
UTILITY TRUCK 4X4 W/TRAFFIC & L.G.	1	18:00	22:30	0.00	4.50	70.00	315.00
TECHNICIAN - O/T	2	18:00	22:30	0.50	4.00	112.90	903.20
EMERGENCY RESPONSE UNIT - SMALL	1	18:00	22:30	0.00	4.50	226.00	1,017.00
LEVEL "D" PPE	2	SETS				45.50	91.00
SUPERFINE (25 LBS/BAG)	6	BAG				25.80	154.80
55-GALLON DOT DRUM, STEEL	2	EACH				84.70	169.40
Friday, March 01, 2024							
TRANSPORT WASTE TO TSDF AND RETURN TO YARD							
TECHNICIAN - S/T	1	8:00	10:00	0.00	2.00	79.90	159.80
GEAR TRUCK W/LIFTGATE	1	8:00	10:00	0.00	2.00	70.00	140.00
SUBTOTAL BEFORE DISCOUNT							3,559.40
10% RATE DISCOUNT							(355.94)
DISPOSAL, CROSBY & OVERTON, INV# 346844							315.10
HANDLING FEE 20%							63.02
TOTAL							\$ 3,581.58

Exhibit 1



PERSONNEL WORK TICKET

No: 86265

BILL TO:
 COMPANY NAME: City of Carson (Public Works)
 STREET ADDRESS: 18620 S. Broadway
 CITY: Carson ST: CA ZIP: 90248
 P.O. # _____
 REQUESTER: Kirby Jones (562) 446-1622

JOB NO: 39613
 JOB NAME: Fuel Spill
 JOB DATE: February 28, 2024
 JOB DAY: M T T F S S
 PAGE 1 OF 1

JOB LOCATION: 23208 Alameda Street Carson CA 90810
 JOB DESCRIPTION: Report to above location, contain area. Place down absorbent and dry sweep intersection. Label manifest and transport waste for proper disposal in accordance with state and local regulations.

TITLE	NAME	START	STOP	DOWN
Supv	Luis Valadez	1800	2230	0.5 HR
E	Utility Truck #105	↓	↓	⊖
Tech	Ernesto Hernandez	↓	↓	0.5 HR
Tech	Marcos Alvarez	↓	↓	0.5 HR
E	Emergency Response Unit #ER-8	↓	↓	⊖
M	Level "D" PPE	X02	Sets	
M	Superfine	X06	Bags	
M	55-Gallon Steel Drums	X02	Drums	

COMMENTS: Incident Report # 924-02173-1626-471

DISPOSAL TO BILL? Y or N

FIRST DAY FOR THIS JN? Y or N

LAST DAY FOR THIS JN? Y or N

SOLID WASTE	LIQUID WASTE
TSDF: <u>Crosby & Overton</u>	TSDF: _____
MANIFEST #: <u>025152 318 2024</u>	MANIFEST #: _____
TSDF: _____	TSDF: _____
MANIFEST #: _____	MANIFEST #: _____
TSDF: _____	TSDF: _____
MANIFEST #: _____	MANIFEST #: _____

39813



CROSBY & OVERTON, INC.
ENVIRONMENTAL SERVICES

Invoice

REMIT TO:
CROSBY & OVERTON, INC.
1610 WEST 17TH STREET
LONG BEACH, CA 90813
(562) 432-5445
FAX (562) 436-7540

01-0004504

1610 WEST 17TH STREET
LONG BEACH, CA 90813
(562) 432-5445
FAX (562) 436-7540

23285 CONNECTICUT ST
HAYWARD, CA 94545
(510) 633-0336
FAX (510) 633-0759

SOLD TO:
OCEAN BLUE ENVIRONMENTAL
ACCOUNTS PAYABLE
925 WEST ESTHER STREET
LONG BEACH, CA 90813

INVOICE NO: 0346844-IN
P.O. NO:
DATE: 3/5/2024
TERMS: Net 30
SALES REP: 0000

CONTACT: MOONHO LEE
EMAIL: moonholee@ocean-blue.com; mlaforett@crosbyoverton.com

Manifest #	Line #	Description	Ship Qty	Ship UOM	Bill Qty	Bill UOM	Price	Amount
GENERATOR:		CITY OF CARSON (PUBLIC WORKS)						
RECEIVED:		3/1/2024						
m# 025152318JJK	1	55 GAL/DRM NON RCRA HW SOLID	2	DM	2.0	DRM	127.000	254.00
		EPA MANIFEST FEE	1	MFST	1.0	EACH	20.000	20.00
		15% Facility Surcharge	1		1.0	SUR	41.100	41.10



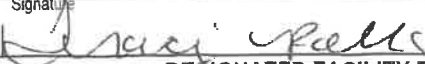
INVOICE TOTAL: \$315.10

UNPAID INVOICES MORE THAN 30 DAYS PAST DUE WILL BE SUBJECT TO A SERVICE CHARGE OF 1 1/2% PER MONTH

For your convenience we accept VISA, MASTERCARD, and AMEX. A 4% fee will apply. Please call 1-800-827-6729 X 289



Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CAS11111019	2. Page 1 of 1	3. Emergency Response Phone 800-990-9930	4. Manifest Tracking Number 025152318 JJK		
5. Generator's Name and Mailing Address City of Carson (Public Works) 18620 S. Broadway Carson, CA 90248 (310) 830-7600				Generator's Site Address (if different than mailing address) 23208 Alameda Street Carson, CA 90810			
6. Transporter 1 Company Name Ocean Blue Environmental Services INC				U.S. EPA ID Number CAD983608258			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CROSBY & OVERTON 1630 W 17TH STREET LONG BEACH CA 90813				U.S. EPA ID Number CAD028400019			
Facility's Phone: 562 432-6445							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
1.	NON-RCRA HAZARDOUS WASTE SOLID	02	DM	0400	P	352	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information WEAR PROPER PPE WHEN HANDLING WASTE EMERGENCY CONTACT: LUIS V. REQUESTER: Kirby J. 9b.1) Absorbent & Debris with Diesel fuel i2805 D255994 Job# 39613							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's Name (Printed/Typed Name) City of Carson (Public Works)				Signature 		Month Day Year 02 28 24	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Luis Valadez				Signature 		Month Day Year 02 28 24	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: _____							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	2.	3.	4.				
H411							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name Traci Polk				Signature 		Month Day Year 13 11 24	



925 West Esther Street
Long Beach, CA 90813

Ph: (562) 624-4120
www.ocean-blue.com

INVOICE

VIA EMAIL

NO. 39783

BILL TO: CITY OF CARSON
701 E CARSON ST
CARSON, CA 90745
ATTN: ACCOUNTS PAYABLE

INVOICE DATE: 4/29/24

TERMS: NET 30 DAYS

DESCRIPTION	QTY	START	STOP	BREAK	DURATION	RATE	AMOUNT
REQUESTER: ROBIN WILSON (310)702-6922							
MANIFEST#: BOL (MWS, SOUTHWEST)							
JOB LOCATION: NEAR 1325 E CARSON STREET CARSON CA 90745							
JOB DESCRIPTION: SEWAGE SPILL							
Monday, April 1, 2024							
SUPERVISOR - S/T	1	16:00	17:00	0.00	1.00	127.70	\$ 127.70
SUPERVISOR - O/T	1	17:00	20:00	0.00	3.00	152.30	456.90
UTILITY TRUCK 4X4 W/TRAFFIC & L.G.	1	16:00	20:00	0.00	4.00	70.00	280.00
TECHNICIAN - S/T	4	16:00	17:00	0.00	1.00	79.90	319.60
TECHNICIAN - O/T	4	17:00	20:00	0.00	3.00	112.90	1,354.80
EMERGENCY RESPONSE UNIT - SMALL	1	16:00	20:00	0.00	4.00	226.00	904.00
PRESSURE WASHER - 3,500 PSI	1	16:00	20:00	0.00	4.00	84.70	338.80
GEAR TRUCK W/LIFTGATE	1	16:00	20:00	0.00	4.00	70.00	280.00
VAC TRAILER 20-BBL	1	16:00	20:00	0.00	4.00	76.10	304.40
HUDSON SPRAYER	1	DAILY				28.20	28.20
LEVEL "D" PPE	4	SETS				45.50	182.00
BLEACH	1	GALLON				6.20	6.20
SAND BAGS (50 EACH PALLET)	4	EACH				4.80	19.20
30-GALLON DOT DRUM, POLY	2	EACH				95.00	190.00
Tuesday, April 2, 2024							
TRANSPORT WASTE TO TSDF AND RETURN TO YARD							
TECHNICIAN - S/T	1	8:30	11:30	0.00	3.00	79.90	239.70
GEAR TRUCK W/LIFTGATE	1	8:30	11:30	0.00	3.00	70.00	210.00
VAC TRAILER 20-BBL	1	8:30	11:30	0.00	3.00	76.10	228.30
SOUTHWEST, INV# 108774							250.00
HANDLING FEE 20%							50.00
Tuesday, April 2, 2024							
TRANSPORT WASTE TO TSDF AND RETURN TO YARD							
TECHNICIAN - S/T	1	8:00	10:00	0.00	2.00	79.90	159.80
GEAR TRUCK W/LIFTGATE	1	8:00	10:00	0.00	2.00	70.00	140.00
DISPOSAL							
MWS, INV# 50063							35.84
HANDLING FEE 20%							127.13
TOTAL						\$	6,232.57



PERSONNEL WORK TICKET

No: **79266**

BILL TO:
 COMPANY NAME: City of Carson
 STREET ADDRESS: 18620 S. Broadway
 CITY: Carson ST: CA ZIP: 90248
 P.O. # _____
 REQUESTER: Robin Wilson (310)702-6922

JOB NO: 39783
 JOB NAME: Sewage Spill
 JOB DATE: April 01, 2024
 JOB DAY: (M) T W T F S S
 PAGE 1 OF 1

JOB LOCATION: Near 1325 E Carson Street Carson CA 90745
 JOB DESCRIPTION: Report to above location, Contain area, Pressure wash Street Curb and gutter. Label manifest and transport waste for proper disposal.

TITLE	NAME	START	STOP	DOWN
Supv	Luis Valadez	1600	2000	Ø
E	Utility Truck #105	}	}	}
Tech	Dennies Acosta			
Tech	Joan Meza			
Tech	Dennies Yanez			
Tech	Roger Ramirez			
E	Emergency Response unit #ER-1			
E	Pressure washer #13			
E	Gear Truck #219			
E	20 BBL Vacuum Truck #T707			
E	Hudson Sprayer			
M	Level "D" PPE	X04	Sets	
M	Bleach	X01	GAL	
M	Sand Bags	X04	Bags	
M	30-Gallon Poly Bio Tubs	X02	Tubs	

COMMENTS: _____

DISPOSAL TO BILL? <u>(Y) or N</u>	SOLID WASTE TSDF: <u>Medical Waste Serv ✓</u> MANIFEST #: <u>B.O.L. ✓</u> TSDF: _____ MANIFEST #: _____ TSDF: _____ MANIFEST #: _____	LIQUID WASTE TSDF: <u>Southwest Processors</u> MANIFEST #: <u>39783-001 ✓</u> TSDF: _____ MANIFEST #: _____ TSDF: _____ MANIFEST #: _____
FIRST DAY FOR THIS JN? <u>(Y) or N</u>		
LAST DAY FOR THIS JN? <u>(Y) or N</u>		

[Signature] WHITE - OFFICE YELLOW - CUSTOMER



PERSONNEL WORK TICKET

No: **92344**

BILL TO:
 COMPANY NAME: City of Carson
 STREET ADDRESS: _____
 CITY: _____ ST: _____ ZIP: _____
 P.O. # _____
 REQUESTER: _____

JOB NO: 39783
 JOB NAME: _____
 JOB DATE: 4/2/24
 JOB DAY: M W T F S
 PAGE 1 OF 1

JOB LOCATION: _____
 JOB DESCRIPTION: OP work + WSH at @ Southwest + return to yard -

TITLE	NAME	START	STOP	DOWN
	<u>MIGUEL Jimenez</u>	<u>0830</u>	<u>1130</u>	<u>6</u>
	<u>Gear Truck # 308</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>
	<u>2018BL Vuc Trailer #T707</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>

COMMENTS: _____

DISPOSAL TO BILL? Y or N
 FIRST DAY FOR THIS JN? Y or N
 LAST DAY FOR THIS JN? Y or N

SOLID WASTE
 TSDF: _____
 MANIFEST #: _____
 TSDF: _____
 MANIFEST #: _____
 TSDF: _____
 MANIFEST #: _____

LIQUID WASTE
 TSDF: Salthurst
 MANIFEST #: NEW-H42 39783-01
 TSDF: _____
 MANIFEST #: _____
 TSDF: _____
 MANIFEST #: _____



Carson 39783-00

Invoice

tel. (323) 269-9876 - fax (323) 780-3170
 email: info@southwestprocessors.com
 web: www.southwestprocessors.com

Date	Invoice #
4/2/2024	108774

Bill To:
 OCEAN BLUE ENVIRO SVC INC
 ATTN ACCOUNTS PAYABLE
 925 W ESTHER STREET
 LONG BEACH CA 90813

Service Location:

Qty	Description	Weight Ticket #	Terms	P.O. No.
			NET 10 DAYS	
			Rate	Amount
17.26	KITCHEN & FOOD WASTEWATER	70503	70.32	1,213.72
5.00	MINUTES WASHOUT FEE	70503	0.00	0.00
	FIRST 15 MINUTES (NO CHARGE)			
	EACH ADDITIONAL 15 MINUTES (\$60.00)			
0.37	NON HAZARDOUS WASTEWATER	70510	675.67568	250.00
5.00	MINUTES WASHOUT FEE	70510	0.00	0.00
	FIRST 15 MINUTES (NO CHARGE)			
	EACH ADDITIONAL 15 MINUTES (\$60.00)			
5.74	NON HAZARDOUS WASTEWATER	70024	70.32	403.64
5.00	MINUTES WASHOUT FEE	70024	0.00	0.00
	FIRST 15 MINUTES (NO CHARGE)			
	EACH ADDITIONAL 15 MINUTES (\$60.00)			
*If you have any questions or objections to this invoice, please contact us immediately.			Total	\$1,867.36
WE ACCEPT VISA, MASTERCARD, AMERICAN EXPRESS & DISCOVER CARDS.			Payments/Credits	\$0.00
			Balance Due	\$1,867.36

NON-HAZARDOUS
WASTE MANIFEST

1. Generator ID Number
EXEMPT

2. Page 1 of
1

3. Emergency Response Phone
800-950-9950

4. Waste Tracking Number
39783-001

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

City of Carson
18620 S. Broadway
Carson, CA 90248
Generator's Phone: (310) 702-6922

1325 E Carson Street
Carson, CA 90745

6. Transporter 1 Company Name

U.S. EPA ID Number

Ocean Blue Environmental Services INC

CAD983608258

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

SOUTHWEST TREATMENT SYSTEM
4120 BANDINI BLVD
LOS ANGELES CA 90008

Facility's Phone: 323 269-9567

9. Waste Shipping Name and Description

10. Containers

11. Total
Quantity

12. Unit
Wt./Vol.

No. Type

1 NON-HAZARDOUS LIQUID WASTE

01 TT 0300 G

2.

3.

4.

13. Special Handling Instructions and Additional Information

BEAR PROPER PPE WHEN HANDLING EMERGENCY CONTACT: LUIS V. REQUESTER: Robin Wilson
9.1) Water with traces of sewage JN: 39783

D.HUTTON@CARSON.CA.GOV

14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offlor's Printed/Typed Name

Signature

Month Day Year

DAVID HUTTON

[Signature]

04 | 01 | 24

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Luis Valadez

[Signature]

04 | 01 | 24

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

Tammie Bridge

[Signature]

4 | 2 | 24

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

Calsay 39783

MWS
7321 Quimby Street
Paramount, CA 90723
Phone: (888) 610-1311
Fax: (562) 529-3717

CUSTOMER NO	001038
INVOICE DATE	4/6/24
INVOICE NO	0000050063
CUSTOMER PO	
DUE DATE	5/6/24
BALANCE FWD	\$10,239.44
PAYMENTS	\$-7,197.32
CREDITS	\$0.00
CHARGES	\$2,541.60
BALANCE DUE	\$5,583.72

CURRENT	1-30 DAYS	31-60 DAYS	61-90 DAYS	OVER 90 DAYS	BALANCE DUE
\$2,914.00	\$0.00	\$0.00	\$245.98	\$2,423.74	\$5,583.72

SERVICE DATE	DESCRIPTION	COUNT	WEIGHT	UNIT PRICE	AMOUNT
--------------	-------------	-------	--------	------------	--------

New Charges

Site: 001038-0001 - Ocean Blue ENV. Services - 925 W Esther St. Long Beach

4/2/24	Manifest # 0000196538 20 Gallon-Bio (Round) PER NET POUND Misc - BIO- PER GROSS POUND	4	45.00	\$0.49	22.05
		34	1,345.00	\$0.49	659.05
		Total for Manifest # 0000196538:			\$681.10
4/2/24	Manifest # 0000220002 Misc - APHIS - PER GROSS POUND	26	2,294.00	\$0.61	1,399.34
		Total for Manifest # 0000220002:			\$1,399.34
4/5/24	Manifest # 0000220228 Misc - APHIS - PER GROSS POUND	25	756.00	\$0.61	461.16
		Total for Manifest # 0000220228:			\$461.16

$681.10 \div 38 = 17.92$
 $17.92 \times 2 = 35.84$

Total New Charges: \$2,541.60

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT

MWS
7321 Quimby Street
Paramount, CA 90723
Phone: (888) 610-1311

CUSTOMER NO	INVOICE DATE	INVOICE NO	BALANCE DUE
001038	4/6/24	0000050063	\$5,583.72
CHECK NO		AMOUNT ENCLOSED	
		\$	

Be sure to write your customer number on your check

Ocean Blue ENV. Services
925 W Esther St
Long Beach, CA 90813-1423



BIO HAZARDOUS WASTE SHIPPING DOCUMENT

925 WEST ESTHER STREET • LONG BEACH, CA 90813

Generator's Name and Mailing Address City of Carson 18600 S. Broadway Carson, CA 90248		JOB # 39783 PHONE (800) 990-9930		
Transporter 1 Company Name OCEAN BLUE ENVIRONMENTAL SERVICES, INC. 925 WEST ESTHER STREET LONG BEACH, CA 90813		DR # MWMP PERMIT # 3354 PHONE: 562-624-4120		
Disposal Facility Name and Site Address MEDICAL WASTE SERVICES 7321 QUIMBY STREET PARAMOUNT, CA 90723		MWTS PERMIT # 19-6-P MWTF PERMIT # 19-115-P PHONE: 888-610-1311		
WASTE DESCRIPTION	Containers No.	Type	Total Quantity	Unit Wt. Vol.
a. REGULATED MEDICAL WASTE, 6.2, UN3291, PGII	02	DF	020	P
b.				
c.				
d.				
Additional Descriptions for Materials Listed Above & Size of Container a) Bio-waste (human waste)				
Special Handling Instructions and Additional Information WEAR GLOVES AND GOGGLES WHEN HANDLING EMERGENCY PHONE NUMBER (562) 624-4120		Site Location: Near 1325 E Carson Street Carson, CA 90745		
GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport according to the applicable regulations of the Department of Transportation.				
Printed / Typed Name DAVID HUTTON		Signature 		Date Month Day Year 04 01 24
Transporter 1 Acknowledgement of Receipt of Materials Printed / Typed Name Luis Valadez		Signature 		Date Month Day Year 04 01 24
DISCREPANCY INDICATION SPACE				
Facility Owner or Operator; Certification of receipt of the materials covered in this document. Printed / Typed Name Alan Allman				Date Month Day Year 04 12 24



925 West Esther Street
Long Beach, CA 90813

Ph: (562) 624-4120
www.ocean-blue.com

INVOICE

VIA EMAIL

NO. 39832

BILL TO: CITY OF CARSON
701 E CARSON ST
CARSON, CA 90745
ATTN: ACCOUNTS PAYABLE

INVOICE DATE: 5/9/24

TERMS: NET 30 DAYS

DESCRIPTION	QTY	START	STOP	BREAK	DURATION	RATE	AMOUNT
REQUESTER: KIRBY JONES (562)446-1622							
MANIFEST#: BOL (I.S.O, CHILL TEK, ACRYLATEX COATING), 025147513JJK							
JOB LOCATION: ON SITE							
JOB DESCRIPTION: WASTE MANAGEMENT							
Thursday, April 11, 2024							
SUPERVISOR - S/T	1	10:30	16:00	0.50	5.00	109.40	\$ 547.00
SUPERVISOR - O/T	1	16:00	19:30	0.00	3.50	130.50	456.75
UTILITY TRUCK 4X4 W/TRAFFIC & L.G.	1	10:30	19:30	0.00	9.00	60.00	540.00
TECHNICIAN - S/T	4	10:30	16:00	0.50	5.00	68.50	1,370.00
TECHNICIAN - O/T	4	16:00	19:30	0.00	3.50	96.80	1,355.20
GEAR TRUCK W/LIFTGATE	1	10:30	19:30	0.00	9.00	60.00	540.00
VAC TRAILER 20-BBL	1	10:30	19:30	0.00	9.00	65.30	587.70
LEVEL "D" PPE	4	SETS				39.00	156.00
TRI WALL BOXES	5	EACH				186.20	931.00
55-GALLON DOT DRUM, STEEL	6	EACH				72.60	435.60
SUPERFINE (25 LBS/BAG)	6	BAG				22.10	132.60
Friday, April 12, 2024							
TRANSPORT WASTE TO TSDF AND RETURN TO YARD							
CROSBY & OVERTON, INV#348555							278.30
SAFETY-KLEEN, INV# 1005005523							20.00
HANDLING FEE 20%							59.66
TECHNICIAN - S/T	1	6:30	10:30	0.00	4.00	68.50	274.00
GEAR TRUCK W/LIFTGATE	1	6:30	10:30	0.00	4.00	60.00	240.00
VAC TRAILER 20-BBL	1	6:30	10:30	0.00	4.00	65.30	261.20
Tuesday, April 16, 2024							
TRANSPORT WASTE TO TSDF AND RETURN TO YARD							
TECHNICIAN - S/T	1	8:00	12:00	0.00	4.00	68.50	274.00
GEAR TRUCK W/LIFTGATE	1	8:00	12:00	0.00	4.00	60.00	240.00
DISPOSAL							
CHILL-TEK							75.00
CROSBY & OVERTON, INV# 348730							8,090.53
VISIONS, INV# INV0004311							30.00
HANDLING FEE 20%							1,639.11
TOTAL						\$	18,533.65



PERSONNEL WORK TICKET

No: **79276**

BILL TO:
 COMPANY NAME: City of Carson
 STREET ADDRESS: 18600 S Broadway
 CITY: Carson ST: CA ZIP: 90248
 P.O. # _____
 REQUESTER: Kirby Jones (562) 446-1622


JOB NO: 39832
 JOB NAME: Waste Pickup
 JOB DATE: April 11, 2024
 JOB DAY: M T W ① F S S
 PAGE 1 OF 1

JOB LOCATION: Same
 JOB DESCRIPTION: Report to above location pump waste oil. Package, pickup and dispose of hazardous waste items from storage containers label manifest and transport waste for proper disposal.

TITLE	NAME	START	STOP	DOWN
Supv	Luis Valadez	1030	1930	0.5 hr
E	Utility Truck # 105	↓	↓	⊖
Tech	Archie Martinez Sr.	↓	↓	0.5 hr
Tech	Ruben Martinez	↓	↓	↓
Tech	Victor Valdez	↓	↓	↓
Tech	Sergio Rodriguez	↓	↓	⊖
E	Gear Truck # 408	↓	↓	⊖
E	20 BBL Vacuum Truck # T707	↓	↓	⊖
M	Level "D" PDE	X04	Sets	
M	Triwal Boxes	X05	Boxes	
M	55-Gallon Steel Drums	X06	Drums	
M	Superfine	X06	Bags	
	<u>4/12/24 off work + wash out</u>	<u>4/12/24</u>		
	<u>Ruben Martinez</u>	<u>0630</u>	<u>1030</u>	<u>C</u>
	<u>Green truck # 408</u>	↓	↓	↓
	<u>20 BBL VAC TRUCK # 707</u>	↓	↓	↓

COMMENTS: _____

DISPOSAL TO BILL? Y or N SOLID WASTE LIQUID WASTE
 TSDF: Crosby & overton ✓ TSDF: I.S.O. ✓
 FIRST DAY FOR THIS JN? Y or N MANIFEST #: 025147513 ✓ MANIFEST #: 017193920 ✓
 TSDF: Crosby & overton ✓ TSDF: Chill-tek ✓
 LAST DAY FOR THIS JN? Y or N MANIFEST #: wash-out MANIFEST #: B.O.L. ✓
 TSDF: _____ TSDF: Acrylatex coating ✓
 MANIFEST #: _____ MANIFEST #: B.O.L. ✓

 WHITE - OFFICE YELLOW - CUSTOMER



CROSBY & OVERTON, INC.
ENVIRONMENTAL SERVICES

Invoice

39832

REMIT TO:
CROSBY & OVERTON, INC.
1610 WEST 17TH STREET
LONG BEACH, CA 90813
(562) 432-5445
FAX (562) 436-7540

01-0004504

1610 WEST 17TH STREET
LONG BEACH, CA 90813
(562) 432-5445
FAX (562) 436-7540

23285 CONNECTICUT ST
HAYWARD, CA 94545
(510) 633-0336
FAX (510) 633-0759

SOLD TO:
OCEAN BLUE ENVIRONMENTAL
ACCOUNTS PAYABLE
925 WEST ESTHER STREET
LONG BEACH, CA 90813

INVOICE NO: 0348555-IN
P.O. NO:
DATE: 4/16/2024
TERMS: Net 30
SALES REP: 0000

CONTACT: MOONHO LEE
EMAIL: moonholee@ocean-blue.com; mlaforett@crosbyoverton.com

Manifest #	Line #	Description	Ship Qty	Ship UOM	Bill Qty	Bill UOM	Price	Amount
GENERATOR:		CITY OF CARSON/ OCEAN BLUE ENV.						
RECEIVED:		4/12/2024						
m# D258206		WASH OUT ONLY (BoL 39832)	1		1.0	EACH	242.000	242.00
		15% Facility Surcharge	1		1.0	SUR	36.300	36.30

INVOICE TOTAL: \$278.30

UNPAID INVOICES MORE THAN 30 DAYS PAST DUE WILL BE SUBJECT TO A SERVICE CHARGE OF 1 1/2% PER MONTH

For your convenience we accept VISA, MASTERCARD, and AMEX. A 4% fee will apply. Please call 1-800-827-6729 X 289



17010
258206

STRAIGHT BILL OF LADING

ORIGINAL - NOT NEGOTIABLE

Shipper No. _____

Carrier No. 39832

Page 1 of 1

Ocean Blue Environmental Services

(Name of carrier)

(SCAC)

Date 04/11/2024

On Collect on Delivery shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec.1.

TO: Consignee Crosby & Overton

Street 1610 W. 17th Street

City Long Beach State CA Zip Code 90813

FROM: Shipper City of Carson

Street 18620 S. Broadway

City Carson State CA Zip Code 90248

24 hr. Emergency Contact Tel. No. (800) 990-9930

Route _____ Vehicle Number _____

No. of Units & Container Type	HM	BASIC DESCRIPTION UN or NA Number, Proper Shipping Name, Hazard Class, Packing Group	TOTAL QUANTITY (Weight, Volume, Gallons, etc.)	WEIGHT (Subject to Correction)	RATE	CHARGES (For Carrier Use Only)
1 X 20	BL	Vacuum truck # T707 (wash-out only)				
		* Traei Polk Traei Polk 4-12-24				
		D258206				

PLACARDS TENDERED: YES NO

Note - (1) Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property, as follows: "The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____"

(2) Where the applicable tariff provisions specify a limitation of the carrier's liability absent release or a value declaration by the shipper and the shipper does not release carrier's liability or declare a value, the carrier's liability shall be limited to the extent provided by such provisions. See NMFC Item 172.

(3) Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation. See Section 2(e) of Item 360, Bills of Lading, Freight Bills and Statements of Charges and Section 1(a) of the Contract Terms and Conditions for a list of such articles.

I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labelled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Signature _____

REMIT C.O.D. TO: ADDRESS

COD

Amount: \$ _____

C.O.D. FEE: PREPAID COLLECT \$ _____

TOTAL CHARGES \$ _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES: FREIGHT PREPAID Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipment hereby certifies that he is familiar with all the lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

SHIPPER CITY OF CARSON

PER [Signature]

CARRIER Ocean Blue

PER [Signature]

DATE April 11, 2024

Permanent post-office address of shipper.



PRINTED ON RECYCLED PAPER USING SOY INK



STYLE F370-3 © 2012 LABELMASTER® (800) 621-5808 www.labelmaster.com

Carson 39832

42 Longwater Drive
P.O. Box 9149
Norwell, MA 02061-9149

REMIT TO:
Industrial Service Oil Company, Inc.
P. O. Box 975201
Dallas, TX 75397-5201

OFFICE:
BPS ISOC Terminal (3rd party oil)
1700 South Soto Street
Los Angeles, CA 90023
(562) 598-5577

If you have any questions regarding this invoice, please contact your customer service representative at the telephone number listed above

Sales Order	Job Description	Job Site/Generator
2401800029	1258207,Used Oil VIA Cust. TO ISF	Ocean Blue Environmental Services Inc 925 W Esther St Long Beach,CA 90813- 0000

Manifest Info	Item ID	Description	Manifest Qty	Manifest UOM	Billing Qty	Billing UOM	Unit Price	Amount
---------------	---------	-------------	--------------	--------------	-------------	-------------	------------	--------

11 Apr 2024

025147739JJK 1	DISPSL / A31RR	Used Oil Profile No: 1258207	650	G	566.000	GAL	0.0000	\$0.00
	EMANIFEST	E-Manifest Fee			1.000	EA	20.0000	\$20.00
							SUBTOTAL	\$20.00
							TAX	\$0.00
							TOTAL	\$20.00

Sales Order	Job Description	Job Site/Generator
2401955011	1258207,Used Oil VIA Cust. TO ISF	Ocean Blue Environmental Services Inc 925 W Esther St Long Beach,CA 90813- 0000

Manifest Info	Item ID	Description	Manifest Qty	Manifest UOM	Billing Qty	Billing UOM	Unit Price	Amount
---------------	---------	-------------	--------------	--------------	-------------	-------------	------------	--------

12 Apr 2024

025147729JJK 1	DISPSL / A31RR	Used Oil Profile No: 1258207	45	G	33.000	GAL	0.0000	\$0.00
	EMANIFEST	E-Manifest Fee			1.000	EA	20.0000	\$20.00
							SUBTOTAL	\$20.00
							TAX	\$0.00
							TOTAL	\$20.00

Sales Order	Job Description	Job Site/Generator
2401955032	1258207,Used Oil VIA Cust. TO ISF	Ocean Blue Environmental Services Inc 925 W Esther St Long Beach,CA 90813- 0000




Manifest Info	Item ID	Description	Manifest Qty	Manifest UOM	Billing Qty	Billing UOM	Unit Price	Amount
---------------	---------	-------------	--------------	--------------	-------------	-------------	------------	--------

12 Apr 2024

017193920JJK	DISPSL /	Used Oil	700	G	724.000	GAL	0.0000	\$0.00
--------------	----------	----------	-----	---	---------	-----	--------	--------

Interest will be charged at a rate of 1.5% per month for all past due amounts.

Carson
120
See p 2

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CAL000461856	2. Page 1 of 1	3. Emergency Response Phone (800) 990-8830	4. Manifest Tracking Number 017193920 JJK	
5. Generator's Name and Mailing Address City of Carson 18600 S. Broadway Carson, CA 90248			Generator's Site Address (if different than mailing address) Same			
6. Transporter 1 Company Name Ocean Blue Environmental Services INC			U.S. EPA ID Number CAD983608258			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address INDUSTRIAL SERVICE OIL 1700 S. SOTO LOS ANGELES CA 90023			U.S. EPA ID Number CAD099452708			
Facility's Phone: 323 269-9878						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol
			No.	Type		
	1.	NON-RCRA HAZARDOUS WASTE LIQUID	01	TT	0700	G
	2.					
	3.					
4.						
13. Waste Codes 221						
14. Special Handling Instructions and Additional Information WEAR PROPER PPE WHEN HANDLING EMERGENCY CONTACT: LUIS V. REQUESTER: Freddy L. JR. 39832 9b) Waste Oil						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Kirby Jones					Signature 	
					Month Day Year 10/11/24	
TRANSPORTER INTL	16. International Shipment: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Part of entry/exit: _____ Date leaving U.S.: _____					
	17. Transporter Acknowledgment of Receipt of Materials					
TRANSPORTER	Transporter 1 Printed/Typed Name Luis Valadez			Signature 		Month Day Year 10/11/24
	Transporter 2 Printed/Typed Name			Signature		Month Day Year
DESIGNATED FACILITY	18. Discrepancy					
	18a. Discrepancy Indication Space: <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number:					
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number		
	Facility's Phone:					
18c. Signature of Alternate Facility (or Generator)						
Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H-039		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name Stephane Moman					Signature 	
					Month Day Year 11/12/24	

STRAIGHT BILL OF LADING

ORIGINAL — NOT NEGOTIABLE

Shipper No. _____

Carrier No. 39832

Page 1 of 1

Ocean Blue Environmental Services

(Name of carrier)

(SCAC)

Date 04/11/24

On Collect on Delivery shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec.1.

TO:
 Consignee Chill - Tex
 Street 2909 Oregon Ct
 City Torrance State CA Zip Code 90503

FROM:
 Shipper City of Torrance
 Street 18620 S. Broadway
 City Carson State CA Zip Code 90248
 24 hr. Emergency Contact Tel. No. (800)990-9930

Route	Vehicle Number	BASIC DESCRIPTION	TOTAL QUANTITY (Weight, Volume, Gallons, etc.)	WEIGHT (Subject to Correction)	RATE	CHARGES (For Carrier Use Only)
		UN or NA Number, Proper Shipping Name, Hazard Class, Packing Group				
		<u>03x Cylinders UN3156 Compressed gas Oxidizing N.O.S. (Nitrous Oxide)</u>	<u>3X25</u>	<u>75</u>		

PLACARDS TENDERED: YES NO

Note — (1) Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property, as follows: "The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____."
 (2) Where the applicable tariff provisions specify a limitation of the carrier's liability absent a release or a value declaration by the shipper and the shipper does not release the carrier's liability or declare a value, the carrier's liability shall be limited to the extent provided by such provisions. See NMFC Item 172.
 (3) Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation. See Section 2(e) of item 360, Bills of Lading, Freight Bills and Statements of Charges and Section 1(a) of the Contract Terms and Conditions for a list of such articles.

I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labelled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

 Signature

REMIT C.O.D. TO: ADDRESS
COD Amt: \$ 75

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
 The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

 (Signature of Consignor)

C.O.D. FEE:
 PREPAID
 COLLECT \$

TOTAL CHARGES \$

FREIGHT CHARGES
 FREIGHT PREPAID Check box if charges are to be collect
 except when box at right is checked

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipment hereby certifies that he is familiar with all the lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

SHIPPER City of Carson
PER _____

CARRIER Ocean Blue
PER Ann Oen
DATE April 11, 2024

Permanent post-office address of shipper.  PRINTED ON RECYCLED PAPER USING SOYBEAN INK  PRINTED WITH SOY INK

STYLE F370-3 © 2012 LABELMASTER® (800) 621-5808 www.labelmaster.com

39832



CROSBY & OVERTON, INC.
ENVIRONMENTAL SERVICES

Invoice

REMIT TO:
CROSBY & OVERTON, INC.
1610 WEST 17TH STREET
LONG BEACH, CA 90813
(562) 432-5445
FAX (562) 436-7540

01-0004504

1610 WEST 17TH STREET
LONG BEACH, CA 90813
(562) 432-5445
FAX (562) 436-7540

23285 CONNECTICUT ST
HAYWARD, CA 94545
(510) 633-0336
FAX (510) 633-0759

SOLD TO:
OCEAN BLUE ENVIRONMENTAL
ACCOUNTS PAYABLE
925 WEST ESTHER STREET
LONG BEACH, CA 90813

INVOICE NO: 0348730-IN
P.O. NO:
DATE: 4/23/2024
TERMS: Net 30
SALES REP: 0000

CONTACT: MOONHO LEE
EMAIL: moonholee@ocean-blue.com; mlaforett@crosbyoverton.com

Manifest #	Line #	Description	Ship Qty	Ship UOM	Bill Qty	Bill UOM	Price	Amount
GENERATOR:		CITY OF CARSON						
RECEIVED:		4/16/2024						
mff# 025147513JJK	1	CYB/ NON RCRA SOLID	5	CF	5.0	CYB	542.000	2,710.00
	2	55 GAL/DRM WST FLAMM LIQUID	3	DM	3.0	DRM	235.000	705.00
	3	55 GAL/DRM WST FLAMM LIQUID	11	DM	11.0	DRM	235.000	2,585.00
	4A	55 GAL/DRM AEROSOLS, FLAMM	1	DM	144.0	LBS	3.960	570.24
	4B	55 GAL/DRM AEROSOLS, FLAMM	1	DM	1.0	MIN	445.000	445.00
		EPA MANIFEST FEE	1	MFST	1.0	EACH	20.000	20.00
		15% Facility Surcharge	1		1.0	SUR	1,055.290	1,055.29

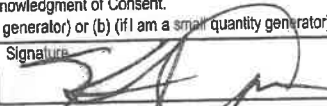


INVOICE TOTAL: \$8,090.53

UNPAID INVOICES MORE THAN 30 DAYS PAST DUE WILL BE SUBJECT TO A SERVICE CHARGE OF 1 1/2% PER MONTH

For your convenience we accept VISA, MASTERCARD, and AMEX. A 4% fee will apply. Please call 1-800-827-6729 X 289



Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CAL000461856	2. Page 1 of 1	3. Emergency Response Phone 800-980-9830	4. Manifest Tracking Number 025147513 JJK		
5. Generator's Name and Mailing Address City of Carson 18630 S. Broadway Carson, CA 90248 (310)847-3531							
Generator's Site Address (if different than mailing address) SAME							
6. Transporter 1 Company Name Ocean Blue Environmental Services INC					U.S. EPA ID Number CAD883808258		
7. Transporter 2 Company Name					U.S. EPA ID Number		
8. Designated Facility Name and Site Address CROSBY & OVERTON 1630 W 17TH STREET LONG BEACH CA 90813							
Facility's Phone: 562-432-5445 U.S. EPA ID Number CAD028409019							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
	1.	NON-RCRA HAZARDOUS WASTE SOLIDS	05	CF	02500	P	203 352
	2.	NA1993 WASTE COMBUSTIBLE LIQUID, N.O.S., COMB. LIQ, PG III	03	DM	0150	G	331
	3.	UN1993 WASTE FLAMMABLE LIQUID, N.O.S., 3, PG II	011	DM	0550	G	213 Dool
	4.	UN1950 WASTE AEROSOLS FLAMMABLE, 2.1	02	DM	0250	P	214 Dool
14. Special Handling Instructions and Additional Information NEAR PROPER PPE WHEN HANDLING EMERGENCY CONTACT: LUIS V. REQUESTER: Freddy L. 95 Dolly Debris & Empty Containers 12065 0258234 JN: 39832 953 Emulsion w/ Diesel Fuel 38975 29692 96.4 Spent AEROSOLS 255 gal 18341 953 Mixed Fuels							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's Official's Printed/Typed Name Kris Jones					Signature 		Month Day Year 04 11 24
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Part of entry/exit: _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Luis Valadez Signature  Month Day Year 04 11 24 Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____						
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input checked="" type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection 95.2 SIR UN1993 Waste flammable liquids n.o.s 311 Rd 343, Dool, D018 Manifest Reference Number: _____ U.S. EPA ID Number _____						
	18b. Alternate Facility (or Generator) Facility's Phone: _____ Month Day Year _____						
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H14 2. H14 3. H14 4. H14							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Tom Pham Signature 					Month Day Year 4 16 24		

PD

39832



Quality Coatings

Visions Quality Coatings
4105 South Market Court
Sacramento CA 95834
United States

Invoice

#INV0004311

4/17/2024

Bill To

Ocean Blue
925 W Esther St
Long Beach CA 90813
United States

Ship To

Ocean Blue
925 W Esther St
Long Beach CA 90813
United States

Terms

Due Date

4/17/2024

PO #

Quantity	Item	Rate	BOL	Container Type	Container Qty	Generator	Amount
1	Los Angeles County Handling Fee 1-5	\$30.00	39832	Boxes	1	City of Carson	\$30.00

Memo

Subtotal	\$30.00
Tax Total (0%)	\$0.00
Total	\$30.00
Payments & Credits	
Balance	\$30.00



INV0004311

STRAIGHT BILL OF LADING

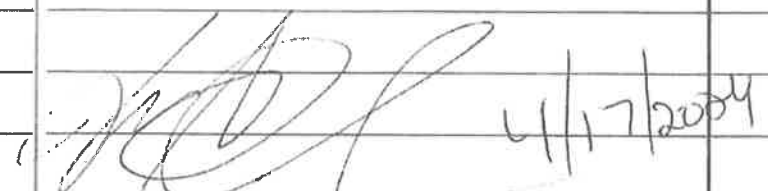
ORIGINAL — NOT NEGOTIABLE

Shipper No. X
 Carrier No. 39832
 Date 04/11/2024

Page 1 of 1 Ocean Blue Environmental Services
(Name of carrier) (SCAC)

On Collect on Delivery shipments, the letters 'COD' must appear before consignee's name or as otherwise provided in Item 430, Sec. 1.
TO: VISIONS QUALITY COATING
 Consignee Acrylaten Coating & Recycling Inc.
 Street 1000 W. Kirkwall Rd
 City Azusa State CA Zip Code 91702

FROM: Shipper City of Carson
 Street 18620 S. Broadway
 City Carson State CA Zip Code 90248
 24 hr. Emergency Contact Tel. No. (800)990-9930

No. of Units & Container Type	HM	BASIC DESCRIPTION UN or NA Number, Proper Shipping Name, Hazard Class, Packing Group	TOTAL QUANTITY (Weight, Volume, Gallons, etc.)	WEIGHT (Subject to Correction)	RATE	CHARGES (For Carrier Use Only)
<u>01 x pallet</u>		<u>Off spec Latex Paints</u>	<u>~</u>			
						

PLACARDS TENDERED: YES NO

Note — (1) Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property, as follows: "The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____."
 (2) Where the applicable tariff provisions specify a limitation of the carrier's liability absent a release or a value declaration by the shipper and the shipper does not release the carrier's liability or declare a value, the carrier's liability shall be limited to the extent provided by such provisions. See NMFC item 172.
 (3) Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation. See Section 2(a) of item 350, Bills of Lading, Freight Bills and Statements of Charges and Section 1(a) of the Contract Terms and Conditions for a list of such articles.

I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

REMIT C.O.D. TO: ADDRESS **COD** Amt: \$ _____
 Signature _____

C.O.D. FEE: PREPAID COLLECT \$ _____
 TOTAL CHARGES \$ _____
 FREIGHT CHARGES: FREIGHT PREPAID (except when box is checked) Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted hereon and condition of contents of packages unknown, marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
 Shipper hereby certifies that he is familiar with all the lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

SHIPPER City of Carson CARRIER Ocean Blue Environmental
 PER [Signature] PER [Signature]
 DATE April 11, 2024

Weight Tracking Log

Date 11.17.24	Manifest # 39832	Container Truck/Trailer	
Transporter	ACT	Clean Earth	PaintCare
# of Boxes 1 PALLET	Weight of Boxes 480		# of Drums
			Others CLEAN BLUE EQUIPMENT
			Weight of Drums

Box	Box Weight	Box	Box Weight	Drum #	Drum Weight	Drum #	Drum Weight
1	480 PALLET	29		1		29	
2		30		2		30	
3		31		3		31	
4		32		4		32	
5		33		5		33	
6		34		6		34	
7		35		7		35	
8		36		8		36	
9		37		9		37	
10		38		10		38	
11		39		11		39	
12		40		12		40	
13		41		13		41	
14		42		14		42	
15		43		15		43	
16		44		16		44	
17		45		17		45	
18		46		18		46	
19		47		19		47	
20		48		20		48	
21		49		21		49	
22		50		22		50	
23		51		23		51	
24		52		24		52	
25		53		25		53	
26		54		26		54	
27		55		27		55	
28		56		28		56	

Notes