



## NON-HAZARDOUS WASTE PROFILE

WASTE PROFILE CODE

- NEW     
  AMENDED     
  ANALYTICAL ATTACHED     
  MSDS ATTACHED

<b>PART A: GENERATOR IDENTIFICATION</b>		<b>PART B: BILLING INFORMATION</b>		
Generator _____		Name _____		
Address _____		Address _____		
City _____ State _____ Zip Code _____		City _____ State _____ Zip Code _____		
Phone _____ Fax _____		Phone _____ Fax _____		
Contact _____ Title _____		Contact _____ Title _____		
Email _____		Email _____		
EPA ID# _____		EPA ID# _____		
<b>PART C: WASTE CHARACTERIZATION</b>				
Common Name of Waste _____				
Process Generating Waste _____				
<b>PART D: PHYSICAL PROPERTIES</b>				
Color _____	<input type="checkbox"/> Liquid Phases _____	pH _____	Flashpoint _____	<b>PART E: TOXICITY CHARACTERISTICS</b>
Odor _____	<input type="checkbox"/> Solid <input type="checkbox"/> Single	<input type="checkbox"/> <2 <input type="checkbox"/> 9-12	<input type="checkbox"/> <140	
<input type="checkbox"/> Mild <input type="checkbox"/> Strong	<input type="checkbox"/> Sludge <input type="checkbox"/> Double	<input type="checkbox"/> 2-5 <input type="checkbox"/> >12.5	<input type="checkbox"/> 140-200	Metals
	<input type="checkbox"/> Powder <input type="checkbox"/> Multi	<input type="checkbox"/> 5-9	<input type="checkbox"/> >200	<input type="checkbox"/> Total <input type="checkbox"/> TCLP
<i>Specific Gravity</i> _____	Total Solids _____	% Halogens _____	BTU/# _____	<input type="checkbox"/> All levels below T.C. Toxic Limits as defined by 40 CFR 261.24
<input type="checkbox"/> <.8 <input type="checkbox"/> 1.2-1.4	<input type="checkbox"/> <.5 <input type="checkbox"/> 10-20	<input type="checkbox"/> <.1 <input type="checkbox"/> 5-10	<input type="checkbox"/> None	
<input type="checkbox"/> .8-1 <input type="checkbox"/> 1.4-1.6	<input type="checkbox"/> .5-2 <input type="checkbox"/> >20	<input type="checkbox"/> .1-1 <input type="checkbox"/> >10	<input type="checkbox"/> <5K	
<input type="checkbox"/> 1-1.2 <input type="checkbox"/> >1.6	<input type="checkbox"/> 2-5	<input type="checkbox"/> 1-3	<input type="checkbox"/> >5K	
	<input type="checkbox"/> 5-10	<input type="checkbox"/> 3-5		



Arsenic _____ Barium _____ Cadmium _____ Chromium _____ Lead _____ Mercury _____ Selenium _____ Copper _____ Zinc _____	BOD _____ Tin _____ Oil and Grease _____ COD _____ Cobalt _____ Bis (2-ethylhexyl) phthalate _____ Carbazole _____ Fluoranthene _____ n-Octadecane _____	<b>Organics</b>  1. Does this material contain TCLP Volatile Organics? <input type="checkbox"/> Yes <input type="checkbox"/> No  2. Does the material contain TCLP Semi-Volatile Organics? <input type="checkbox"/> Yes <input type="checkbox"/> No  3. Does this material contain TCLP Herbicides/Pesticides? <input type="checkbox"/> Yes <input type="checkbox"/> No
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PART F: Chemical Composition	PART G: HAZARDOUS CHARACTERISTICS												
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Component</th> <th style="width: 40%;">Percentage</th> </tr> </thead> <tbody> <tr><td>-----</td><td>-----</td></tr> <tr><td>-----</td><td>-----</td></tr> <tr><td>-----</td><td>-----</td></tr> <tr><td>-----</td><td>-----</td></tr> <tr> <td style="text-align: right;">Total (=100%)</td> <td>_____</td> </tr> </tbody> </table>	Component	Percentage	-----	-----	-----	-----	-----	-----	-----	-----	Total (=100%)	_____	<ol style="list-style-type: none"> <li>1. Is this material an EPA listed Hazardous Waste per 40 CFR Part 261?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</li> <li>2. Is this material an EPA Characteristic Hazardous Waste per 40 CFR Part 261?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</li> <li>3. Does this material contain concentrations of PCB's as defined in 40 CFR Part 761?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</li> <li>4. Does this material contain concentrations of listed Hazardous Wastes 40 CFR Part 261?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</li> <li>5. Is this material a TSCA Regulated Waste?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</li> </ol>
Component	Percentage												
-----	-----												
-----	-----												
-----	-----												
-----	-----												
Total (=100%)	_____												

PART H: SHIPPING INFORMATION
Method of Shipment: <input type="checkbox"/> Bulk <input type="checkbox"/> Tote <input type="checkbox"/> Drum <input type="checkbox"/> Other _____

PART I: GENERATOR CERTIFICATION			
I hereby certify, to the best of my knowledge, that all of the above information is correct and accurate. I further certify that US Water Recovery will be notified in writing of any process changes, which could significantly alter the composition and/or physical/chemical properties of the waste described above. By utilizing this Profile, neither myself nor any other employees will attempt to deliver any waste in which is classified a toxic, hazardous or infectious. I further certify that this material neither contains nor has been in contact with PCB's pesticides or herbicides and to the best of my knowledge is non-hazardous according to all Federal, State, and local regulations. Our Company hereby agrees to fully indemnify US Water Recovery against any damage resulting from this Certification being inaccurate or untrue. I further certify that this Company has not altered the form of contents of this Profile as provided by US Water Recovery.			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;">           Authorized Representative Name/Title         </td> <td style="width: 30%; border-bottom: 1px solid black;">           Authorized Representative Signature         </td> <td style="width: 30%; border-bottom: 1px solid black;">           Date         </td> </tr> </table>	Authorized Representative Name/Title	Authorized Representative Signature	Date
Authorized Representative Name/Title	Authorized Representative Signature	Date	

PART J: US Water Recovery Review
<input type="checkbox"/> Approved <input type="checkbox"/> Rejected