

regulatory solutions

Re-Certification of Generator Waste Profile

SEND TO:

40 Pascon Court
Gaston, SC 29053
Tel.: 803-926-0089
Fax: 803-926-7574
approvals@regsolutions.net

Waste Profile No.: _____

GENERATOR INFORMATION

Generator Name _____
Physical Address _____
City, State, Zip _____ County _____
Billing Address _____
City, State, Zip _____
Contact Name _____ Title _____
Telephone No. _____ Fax No. _____
Email Address _____
EPA ID Number _____ Business Type _____

RECERTIFICATION INFORMATION

Waste Name _____
Has any laboratory analysis of this waste been obtained within the past two years? Yes No
Have there been any changes in the waste generating process? Yes No
Have there been any changes in the raw materials used in the waste generating process? Yes No
Is the laboratory analysis and/or other supplemental information previously submitted still representative of the waste as currently generated? Yes No

RECERTIFICATION STATEMENT

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS DOCUMENT, THE ATTACHED GENERATOR WASTE PROFILE SHEET, AND ALL OTHER ATTACHED DOCUMENTS IS ACCURATE, COMPLETE, AND TRUE. ALL NEW INFORMATION REGARDING KNOWN OR SUSPECTED HAZARDS ASSOCIATED WITH THIS WASTE HAS BEEN DISCLOSED. THE WASTE DESCRIBED ON THIS DOCUMENT IS NOT A "HAZARDOUS WASTE" AS DEFINED BY USEPA AND/OR SC DHEC REGULATIONS AND THIS WASTE DOES NOT CONTAIN REGULATED RADIOACTIVE MATERIALS OR REGULATED CONCENTRATIONS OF PCBs. I UNDERSTAND THAT REGULATORY SOLUTIONS, INC. IS A NON-HAZARDOUS WASTE PROCESSING FACILITY AND CAN ONLY RECEIVE NON-HAZARDOUS WASTE. **THE GENERATOR AGREES TO REMOVE AND DISPOSE, IN ACCORDANCE WITH SOUTH CAROLINA HAZARDOUS WASTE MANAGEMENT REGULATIONS, ANY REGULATED HAZARDOUS WASTE THAT REGULATORY SOLUTIONS, INC. DISCOVERS WITHIN THE GENERATOR'S SHIPMENT, IMMEDIATELY UPON NOTIFICATION FROM REGULATORY SOLUTIONS, INC.**

Authorized Signature

Title

Printed Name

Date

Approval Decision Approved Not Approved

Approved By _____ Approval Date _____