

Regulatory Solutions

Generator Waste Profile

(PLEASE PRINT OR TYPE)

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

WASTE INFORMATION

DESCRIPTION

Waste Name _____
Process Generating Waste _____
Supplemental Information _____

CHARACTERIZATION

1. Is this waste a listed hazardous waste (F, K, P or U) as defined by 40 CFR 261 Subpart D?	Yes	No	4. Does this waste contain:	Polychlorinated Biphenyls (PCBs)?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
2. Has this waste been mixed with a hazardous waste as defined by 40 CFR 261?	<input type="checkbox"/>	<input type="checkbox"/>		Pesticides (e.g. herbicides, insecticides, fungicides)	<input type="checkbox"/>	<input type="checkbox"/>
3. Does this waste exhibit any of the following hazardous waste characteristics as defined by 40 CFR 261 Subpart C?				Dioxins?	<input type="checkbox"/>	<input type="checkbox"/>
Ignitability?	<input type="checkbox"/>	<input type="checkbox"/>		Radioactive material?	<input type="checkbox"/>	<input type="checkbox"/>
Corrosivity?	<input type="checkbox"/>	<input type="checkbox"/>		Infectious material?	<input type="checkbox"/>	<input type="checkbox"/>
Reactivity?	<input type="checkbox"/>	<input type="checkbox"/>				
Toxicity?	<input type="checkbox"/>	<input type="checkbox"/>				

CHEMICAL COMPOSITION (list all known constituents; attach MSDSs and/or Analytical Data if available)

Constituent	Range	Constituent	Range
_____	_____ - _____ %	_____	_____ - _____ %
_____	_____ - _____ %	_____	_____ - _____ %
_____	_____ - _____ %	_____	_____ - _____ %

CHEMICAL/PHYSICAL PROPERTIES

Color/Appearance: _____

Odor None Mild Strong Describe: _____

Physical State @ 70° F Liquid Semi-Solid Sludge Solid Other: _____

Free Liquids Yes No (If yes, then) % Volume: _____

Specific Gravity: _____ Density: _____ lbs./gal. or lbs./cu. ft.

Layers Single-layered Bi-layered Multi-layered

Flash Point <140°F 140° – 199°F ≥200°F N/A

PH ≤ 2 >2 - <4 4 - 10 >10 - <12.5 ≥12.5 N/A

TRANSPORTATION INFORMATION

Method of Shipment Bulk Liquid Bulk Sludge Bulk Solid Drum Other _____

Estimated Volume: _____ Per Month Per Quarter Per Year One Time

Is this a DOT hazardous Material? No Yes (If yes, complete the following information)

Proper Shipping Name: _____

Technical Constituent(s) (If applicable): _____

Hazard Class or Division: _____ Packaging Group: _____ UN/NA #: _____ RQ: _____

Emergency Response Contact: _____ 24 Hr. Emergency Phone #: _____

GENERATOR CERTIFICATION AND GUARANTEE

I, THE UNDERSIGNED DULY AUTHORIZED REPRESENTATIVE OF THE GENERATOR OF THE WASTE DESCRIBED ABOVE, DO HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS PROFILE IS ACCURATE, COMPLETE AND TRUE. ALL INFORMATION REGARDING KNOWN OR SUSPECTED HAZARDS ASSOCIATED WITH THIS WASTE HAS BEEN DISCLOSED. BASED ON KNOWLEDGE OF THE WASTE, GENERATING PROCESS KNOWLEDGE, AND/OR LABORATORY ANALYSIS, THE WASTE DESCRIBED ON THIS DOCUMENT IS NOT A "HAZARDOUS WASTE" AS DEFINED BY USEPA AND/OR SC DHEC REGULATIONS AND DOES NOT CONTAIN ANY OTHER REGULATED MATERIAL INCLUDING, WITHOUT LIMITATION, RADIOACTIVE MATERIAL, POLYCHLORINATED BIPHENYLS, PESTICIDES OR INFECTIOUS MATERIAL. IF REGULATORY SOLUTIONS ACCEPTS THE WASTE FOR PROCESSING AND THE WASTE IS LATER DETERMINED BY REGULATORY SOLUTIONS OR ANY OTHER PERSON TO BE OR CONTAIN HAZARDOUS WASTE, OR CONTAIN ANY OTHER REGULATED MATERIAL, THE GENERATOR AGREES TO PAY ALL COSTS INCURRED BY REGULATORY SOLUTIONS TO PROPERLY TREAT, STORE, DISPOSE OR OTHERWISE HANDLE THE WASTE AND ANY FINES AND PENALTIES RESULTING FROM REGULATORY SOLUTIONS' HANDLING OF GENERATOR'S WASTE. GENERATOR AGREES TO PROMPTLY NOTIFY REGULATORY SOLUTIONS OF ANY CHANGE IN THE COMPOSITION, CHARACTERISTICS OR PROCESS GENERATING THE WASTE AND AGREES TO PROVIDE REGULATORY SOLUTIONS WITH A NEW GENERATOR WASTE PROFILE PRIOR TO DELIVERING ANY WASTE TO REGULATORY SOLUTIONS THAT DOES NOT CONFORM TO THE INFORMATION CONTAINED IN THIS PROFILE.

_____ Authorized Signature _____ Printed Name

_____ Title _____ Date

Internal Use Only

Analytical Attached SDS/MSDS Attached Addendum Attached

Approval Decision Approved Non-Approved Initials _____

Date _____