



GENERATOR'S WASTE PROFILE SHEET

Please Print in Ink or Type

Profile Number: _____

Renewal Date: _____

Hazardous Non-Hazardous TSCA

A. Waste Generator Information

- 1. Generator Name: _____ 2. SIC Code: _____
3. Facility Street Address: _____ 4. Phone: _____
5. Facility City: _____ 6. State/Province: _____
7. Zip/Postal Code: _____ 8. Generator USEPA/FED ID #: _____
9. County: _____ 10. State/Province ID #: _____
11. Customer Name: _____ 12. Customer Phone: _____
13. Customer Contact: _____ 14. Customer Fax: _____
15. Billing Address: _____ Same as above

B. Waste Stream Information

- 1. DESCRIPTION
a. Name of Waste: _____
b. Processing Generating Waste: _____

Table with 5 columns: c. Color, d. Strong Odor (describe), e. Physically state @ 70°F (Solid, Liquid, Gas, Sludge, Other), f. Layers (Single Layer, Multi-Layer), g. Free liquid range to % and h. pH Range to.

- i. Liquid Flash Point: < 73°F 73-99°F 100-139°F 140-199°F > 200°F Not Applicable
j. Chemical Composition (List all constituents [including halogenated organics, debris, and UHCs] present in any concentration and submit representative analysis):

Table with 4 columns: Constituents, Concentration Range, Constituents, Concentration Range.

TOTAL COMPOSITION MUST EQUAL OR EXCEED 100%

- k. Oxidizer Pyrophoric Explosive Radioactive
 Carcinogen Infectious Shock Sensitive Water Reactive
l. Does the waste represented by this profile contain any of the carcinogens which require OSHA Notification? (List in Section B.1.)... Yes No
m. Does the waste represented by this profile contain dioxins? (list in B.1.j.)... Yes No
n. Does the waste represented by this profile contain asbestos? ... Yes No
If Yes, friable non-friable
o. Does the waste represented by this profile contain benzene? ... Yes No
If Yes, concentration _____ Ppm
Is the waste subject to benzene waste operations NESHAP? ... Yes No
p. Is the waste subject to RCRA Subpart CC controls? ... Yes No
If No, does the waste meet the organic LDR Exemption? ... Yes No
If No, does the waste contain 500 ppmw volatile organic (VO)? ... Yes No
Volatile organic concentration _____ Ppmw
q. Does the waste contain any Class I or Class II ozone-depleting substance? ... Yes No
r. Does the waste contain debris? (list in Section B.1.j.)... Yes No
s. Is the waste subject to controls as a Group 1 wastewater or residual under the HON? ... Yes No
If Yes, is it a Table 8 _____ or Table 9 _____ Compound?

2. QUANTITY OF WASTE
Estimated Annual Volume _____ Tons Yards Drums Other (specify) _____

3. SHIPPING INFORMATION

a. Packaging:



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- Bulk Solid; Type/Size: _____ Bulk Liquid, Type/Size: _____
- Drum; Type/Size: _____ Other: _____
- b. Shipping Frequency: Units _____ Per: Month Quarter Year One Time Other: _____
- c. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If No, skip d, e, and f) Yes No
- d. Reportable Quantity (lbs.; kgs.): _____
- e. Hazard Class/ID#: _____
- f. USDOT Shipping Name: _____
- g. Personal Protective Equipment Requirements: _____
- h. Transporter/Transfer Station: _____

C. GENERATOR'S CERTIFICATION (PLEASE CHECK APPROPRIATE RESPONSES, SIGN, AND DATE BELOW)

1. Is this a USEPA hazardous waste (40 CFR Part 261)? If the answer is No, skip to 2..... Yes No
 - a. If Yes, identify ALL USEPA listed and characteristic waste code numbers (D, F, K, P, U) _____
 - b. If a characteristic hazardous waste, do underlying hazardous constituents) (UHCs) apply? (If Yes, list in Section B.1.j.) Yes No
 - c. Does this waste contain debris? (If Yes, list size and type in Chemical Composition B.1.).... Yes No
2. Is this a state hazardous waste? Yes No
Identify ALL state hazardous waste codes _____
3. Is the waste from a CERCLA (40 CFR 300, Appendix B) or state mandated cleanup? Yes No
If Yes, attach Record of Decision (ROD), 104/106 or 122 order or court order that governs site cleanup for activity. For state mandated cleanup, provide relevant documentation.
4. Does the waste represented by this waste profile sheet contain radioactive material, or is disposal regulated by the Nuclear Regulatory Commission? Yes No
5. Does the waste represented by this waste profile sheet contain concentrations of Polychlorinated Biphenyls (PCBs) regulated by 40 CFR 761? If Yes, list in Chemical Composition B.1.j.) Yes No
 - a. If Yes, were the PCBs imported into the U.S.? Yes No
6. Do the waste profile sheet and all the attachments contain true and accurate descriptions of the waste material, and has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed to the Contractor?..... Yes No
7. Will all changes which occur in the character of the waste be identified by the Generator and disclosed to the Contractor prior to providing the waste to the Contractor? Yes No

Check here if a Certificate of Destruction or Disposal is required.

Any sample submitted is representative as defined in 40 CFR 261 – Appendix 1 or by using an equivalent method. I authorize IWS to obtain a sample from any waste shipment for purposes of recertification. If this certification is made by a broker, the undersigned signs as authorized agent of the Generator and has confirmed the information contained in this Profile Sheet form information provided by the Generator, and additional information as it has determined to be reasonably necessary. If approved by management, Contractor has all the necessary permits and licenses for the waste that has been characterized and identified by this approved profile.

Certification Signature: _____ Title: _____

Name (Type or Print): _____ Company Name: _____ Date: _____

Check if additional information is attached. Indicate the number of attached pages: _____



D. IWS MANAGEMENT'S DECISION **FOR IWS USE ONLY**

- 1. Management Method: Landfill Nonhazardous Solidification Bioremediation Incineration
 Hazardous Stabilization Other (Specify) _____
- 2. Proposed Ultimate Management Facility: _____
- 3. Precautions, Special Handling Procedures, or Limitation on Approval _____

- 4. Waste Form _____ 5. Source _____ 6. System Type _____

Special Waste Decision.....
 Approved Disapproved

Salesperson's Signature: _____ Date: _____

Division Approval Signature (Optional): _____ Date: _____

Special Waste Approvals Person Signature: _____ Date: _____



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Instructions

Information on this form is used to determine if the waste may be transported, treated, stored or disposed in a legal, safe and environmentally sound manner. This information will be maintained in strict confidence. Answers must be provided for sections A, B, and C and must be printed in ink or typed. A response of "NONE" or "NA" (not applicable) can be made if appropriate. If additional space is needed, indicate on the form that additional information is attached, and attach the information to Generator's Waste Profile Sheet. If you have questions concerning this form, please contact the Contractor's sales representative.

A. Waste Generator Information

1. Generator Name – Enter the name of the facility where the waste is generated.
2. SIC Code – Enter the four digit Standard Industrial Classification Code for the facility where the waste is generated.
3. Facility Street Address – Enter the street address (not P.O. Box) of the facility where the waste is generated.
4. Phone – Enter Generator's area code and phone number.
5. Facility City – Enter the city where the waste is generated.
6. State/Province – Enter the state or province where the waste is generated.
7. Zip/Postal Code – Enter the generating facility's zip or postal code
8. Generator USEPA/Federal ID # – Enter the identification number issued by the USEPA, Canadian, or Mexican Federal Agency to the facility generating the waste (if applicable).
9. County – Enter the county where the waste is generated.
10. State/Province ID # – Enter the identification number issued by the state or province to the facility generating the waste (if applicable).
11. Customer Name – Entity that the Contractor is directly working with regarding the represented waste stream. If the same as the Generator, mark "Same as Above."
12. Customer Phone – Enter technical contact's area code and telephone number.
13. Customer Contact – Enter the name of the person who can answer technical questions about the waste.
14. Customer Fax - Area code and facsimile number for the customer.
15. Billing Address – Address where bill for services should be sent.

B. WASTE STREAM INFORMATION

- 1.a. Name of Waste – Enter a name generally descriptive of this waste (e.g., paint sludge, fluorescent bulbs).
- 1.b. Process Generating Waste – Describe the process generating the waste in detail. List the specific process/operation or source that generates the waste (e.g., incineration of municipal refuse, asbestos removal, wastewater treatment, building maintenance). At a minimum, the Generator should answer the following questions in determining the process generating the waste.
 - What chemicals are stored and/or used at the facility?
 - Is the waste generated from the production/manufacturing of any of the following industries: wood preservation; inorganic pigments; organic pigments; pesticides; explosives; petroleum refining; iron and steel, copper, lead or zinc production?
 - Is the waste a result from degreasing, solvent parts cleaning, recovery/reclaiming of solvents (bottoms), wastewater treatment (sludges), or electroplating?
- 1.c. Color – Describe the color of the waste (e.g., blue, transparent, varies).
- 1.d. Strong odor – **DO NOT SMELL THE WASTE!** If the waste has a known odor, then describe (e.g., acrid, pungent, solvent, sweet).
- 1.e. Physical state @ 70°F – If the four boxes provided do not apply, a descriptive phrase may be entered after "Other" (e.g., multi-phase).
- 1.f. Layers – Single Layer means the waste is homogenous. Multi-layer means the waste is comprised of two or more layers (e.g., oil/water/sludge).
- 1.g. Free liquid range – Range (in percent by volume) of free liquids in the waste.
- 1.h. pH Range – Indicate the pH range.
- 1.i. Liquid Flash Point – Indicate the flash point obtained using the appropriate test method.
- 1.j. Chemical Composition – List all organic and/or inorganic components of the waste using chemical names. If trade names are used, attach Material Safety Data Sheets or other documents that adequately describe the composition of the waste. For each component, estimate the range (in percent) in which the component is present.
- 1.k. Check all that apply.
 - 1.l. Identify any element, chemical compound, or mixture in concentration of 0.1 percent or greater that is considered a carcinogen or potential carcinogen pursuant to OSHA.
 - 1.m. Indicate if the waste contains any dioxins (list in Section B.1.j.).
 - 1.n. Indicate if the waste contains asbestos. Indicate if the asbestos is friable.
 - 1.o. Indicate if the waste contains benzene, the level in ppm, and whether it is subject to the benzene NESHAP.
 - 1.p. Indicate if the waste is subject to RCRA Subpart CC control. In addition, indicate the volatile organic concentration, if known, in parts per million weight.
 - 1.q. Indicate if the waste contains any Class I or Class II ozone-depleting controlled substances.
 - 1.r. Indicate if the waste contains debris (list size and type in B.1.j.).