



**A. GENERAL INFORMATION**

Generator Name			
Facility Address			
Authorized Representative		Job Title / Position	
Email		Tel. / Mob. No.	

**B. NAME AND SOURCE OF WASTE**

Waste Name

Describe the process how the waste is generated:

**C. PHYSICAL CHARACTERISTICS OF WASTE**

Physical state	Solid	Liquid	Gas	Sludge	Powder	Other:
Color	<input type="text"/>		Odor	<input type="text"/>		pH <input type="text"/>
Flash Point	<input type="text"/> °C		Free Liquid	<input type="text"/> % Vol.		Specific Gravity <input type="text"/>
Layers	Single layered	Bi-Layered	Multi-layered			

**D. CHEMICAL COMPOSITION**

COMPONENT(S)	RANGE	
	MIN, %	MAX, %
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>TOTAL</b>		<input type="text"/>

Note: The total chemical composition in the maximum column must be greater than or equal to 100%.

**E. METALS**

Indicate if this waste contains any of the following:

METAL	TOTAL	TCLP
Arsenic, ppm	<input type="text"/>	<input type="text"/>
Barium, ppm	<input type="text"/>	<input type="text"/>
Cadmium, ppm	<input type="text"/>	<input type="text"/>
Chromium (Total), ppm	<input type="text"/>	<input type="text"/>
Lead, ppm	<input type="text"/>	<input type="text"/>
Mercury, ppm	<input type="text"/>	<input type="text"/>
Selenium, ppm	<input type="text"/>	<input type="text"/>
Silver, ppm	<input type="text"/>	<input type="text"/>



**F. OTHER HAZARDOUS CHARACTERISTICS**

Indicate if this waste is any of the following:			Indicate if waste has any of the following:			
Ignitable	Oxidizing	Infectious	PCBs	ppm	Oil Content	%
Corrosive	Flammable	Explosive	Cyanides	ppm	Organic Solvent	%
Reactive	Pyrophoric	Other: <input type="text"/>	Sulfides	ppm	Phenol	%
Toxic	Radioactive					

**G. INCOMPATIBILITY**

What chemical is the waste incompatible with:

**H. ADDITIONAL INFORMATION**

(Provide if information is available.)

Heat Value	<input type="text"/>	BTU/lb
Chlorine (Total)	<input type="text"/>	%
Sulfur	<input type="text"/>	%
Ash	<input type="text"/>	%
Water	<input type="text"/>	%
Viscosity (cps)	<input type="text"/>	@50°C
Settleable Solids	<input type="text"/>	%

Is this waste a pumpable liquid?    Y    N

Can this waste be heated to improve flow?    Y    N

Is this waste soluble in water?    Y    N

Is certified representative sample (CRS) available?    Y    N

**I. TRANSPORTATION INFORMATION**

Transporter Name	<input type="text"/>
Shipping Name	<input type="text"/>
Anticipated Vol. / Unit	<input type="text"/>
Category	<input type="text"/>
Class	<input type="text"/>
Identification No.	<input type="text"/>
NFPA Classification	<input type="text"/> Health <input type="text"/> Flammability <input type="text"/> Reactivity <input type="text"/> Special Hazard
Shipment Method	Bulk Solid Bulk Liquid Drum (Type <input type="text"/> / Size <input type="text"/> ) IBC    Others ( <input type="text"/> )

**J. SPECIAL STORAGE AND HANDLING INFORMATION** (attach MSDS for hazardous components or analytical data if available)

**K. GENERATOR CERTIFICATION**

I hereby certify that all information submitted in this and all attached documents contain true and accurate descriptions of this waste material. All relevant information regarding known or suspected hazards in the possession of generator has been disclosed.

Name: \_\_\_\_\_ Job Title \_\_\_\_\_

Date: \_\_\_\_\_