

**SECTION 1 – GENERAL INFORMATION**

Generator Company: \_\_\_\_\_ Service Company: \_\_\_\_\_  
 Technical Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ E-mail @: \_\_\_\_\_  
 Waste Name: \_\_\_\_\_  
 Waste Description: \_\_\_\_\_  
 Primary COV Facility Destination: \_\_\_\_\_ Back-up COV Facility Destination(s): \_\_\_\_\_

**SECTION 2 – WASTE COMPOSITION**

COMPONENTS	CAS # (IF KNOWN)	CONCENTRATION

**SECTION 3 – WASTE PHYSICAL DATA**

Physical State: \_\_\_\_\_ Color/Appearance: \_\_\_\_\_ Percent (%) Solids: \_\_\_\_\_  
 Odor:  Stong  Moderate  Mild  Other: \_\_\_\_\_  
 Temperature @ arrival: \_\_\_\_\_ °F Freezing Point: \_\_\_\_\_ °F Boiling Point: \_\_\_\_\_ °F pH: \_\_\_\_\_  
 Incompatibility (materials or conditions to avoid): \_\_\_\_\_

**SECTION 4 – HEALTH HAZARD INFORMATION**

What type of irritation could reasonably be expected while unloading/processing this waste?  
 Skin  Eye  Nose  Throat  None: \_\_\_\_\_  
 What type of irritation could reasonably be expected while cleaning up a spill of this waste?  
 Skin  Eye  Nose  Throat  None: \_\_\_\_\_  
 What types of long-term effects are expected?  
 Carcinogenic Effects: \_\_\_\_\_ Reproductive Effects: \_\_\_\_\_  
 Additional Sign / Symptoms of overexposure: \_\_\_\_\_  
 Emergency / First Aid Procedures: \_\_\_\_\_

**SECTION 5 – SAFE HANDLING & SPILL CLEAN-UP PERSONAL PROTECTIVE EQUIPMENT (PPE)**

\*\*Information provided in this section should be based on the PPE required of the generator’s employees managing the waste stream. What **type** of PPE, **specifically**, should be worn when unloading/processing and in the case of a spill.  
 Eye Protection (Handling): \_\_\_\_\_ Eye Protection (Spill): \_\_\_\_\_  
 Gloves (Handling): \_\_\_\_\_ Gloves (Spill): \_\_\_\_\_  
 Respiratory (Handling): \_\_\_\_\_ Respiratory (Spill): \_\_\_\_\_  
 Other PPE (Handling): \_\_\_\_\_ Other PPE (Spill): \_\_\_\_\_  
 Special Precautions / Equipment: \_\_\_\_\_

**SECTION 6 - CERTIFICATION**

I hereby certify that the above information is true and accurate to the best of my knowledge.  

**AUTHORIZED REPRESENTATIVE**

 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

