

EXHIBIT A
Material
Profile Sheet

Global Job # _____
Sales Rep _____

Check each site you would like to utilize for this waste approval:

- | | | |
|--|--|--|
| <input type="checkbox"/> Clean Earth of Carteret
24 Middlesex Avenue
Carteret, NJ 07008
T 732-541-8909 | <input type="checkbox"/> Clean Earth of Maryland
1469 Oak Ridge Place
Hagerstown, MD 21740
T 301-791-6220 | <input type="checkbox"/> Clean Earth of Southeast Pennsylvania
7 Steel Road East
Morrisville, PA 19067
T 215-428-1700 |
| <input type="checkbox"/> Clean Earth of Philadelphia
3201 South 61st Street
Philadelphia, PA 19153
T 215-724-5520 | <input type="checkbox"/> Clean Earth of New Castle
94 Pyles Lane
New Castle, DE 19720
T 302-427-6634 | <input type="checkbox"/> Clean Earth of North Jersey
115 Jacobus Avenue
South Kearny, NJ 07032
T 973-344-4004 |

A. Waste Generator/Job Site Information

1. Generator Name: _____	9. Job Site Name: _____
2. Generator Address: _____	10. Job Site Address: _____
3. Generator City: _____	11. Job Site City: _____
4. Generator State/Zip: _____	12. Job Site State/Zip: _____
5. Generator Phone: _____	13. Job Site Phone: _____
6. Generator Contact: _____	14. Job Site Contact: _____
7. Generator Email: _____	15. Job Site Email: _____
8. Generator County: _____	16. Job Site County: _____

Billing Information

17. Customer Name: _____	21. Customer Phone: _____
18. Customer Address: _____	22. Customer Contact: _____
19. Customer City: _____	23. Customer Email: _____
20. Customer State/Zip: _____	24. Customer County: _____

B. Waste Stream Information

1. Name of Waste: _____	2. State Waste Code(s) (if applicable): _____
3. Process Generating Waste (attach separate sheet if necessary): _____ _____	
4. Estimated Quantity of Waste: _____ <input type="checkbox"/> Tons <input type="checkbox"/> Cubic Yards <input type="checkbox"/> Gallons	5. Term of Project: <input type="checkbox"/> Recurring <input type="checkbox"/> One Time

C. Waste Composition/Characteristics

1. Source of Contamination (ie. UST, AST, leak, spill, non specific): _____	2. Type of Contamination (ie. diesel, gasoline, waste oil, heating oil, MGP, etc.): _____
3. Contaminants of Concern: See Data	
4. Provide a site history detailing past and present land uses, on site storage/process information and any activities related to contaminants of concern (attach a separate sheet if necessary): _____ _____ _____	
5. Composition of Waste (clay, rock, sand, moisture, chemical, constituents, contaminants, etc.; should equal 100%): _____ % _____ % _____ % _____ %	
6. Is this site a State or Federal Superfund Site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Is laboratory report being supplied with this profile? 7a. If yes, you will need to attach a sampling plan description and diagram of sampling locations that ties to the data. Please refer to the "Site Sampling Diagram" form in your approval package for guidance.	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Is the waste represented in this waste profile classified as a radioactive material under USEPA 40CFR 191.12 or other applicable regulatory provisions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Does the waste represented contain any levels of polychlorinated biphenyls (PCBs)? 9a. If yes, list the level: _____ 9b. If yes, is the waste material TSCA regulated or defined as a PCB remediation waste under TSCA?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
10. Does the waste represented contain herbicides, pesticides, asbestos, insecticides or residues thereof at concentrations that would render it hazardous as defined by 40 CFR 261 or subject to additional state or federal regulations?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Non Hazardous
Profile Sheet**

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C. Waste Composition/Characteristics (continued)

11. The waste represented in this profile is generated as a result of the corrective response taken under the Federal Underground Storage Tank Regulation 40 CFR 280.	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Is the waste a dioxin bearing waste?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Is this waste a treatment residue from a previously listed or characteristic hazardous waste?	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Is there a nuisance level of odor associated with this waste?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Are there any special handling instructions for management of this waste?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. If yes to any of the questions numbered 6-15, please explain (attach an additional sheet if necessary): _____ _____ _____ _____	

D. Generator Certification

1. I certify that the waste represented by this profile is not a listed hazardous waste, nor does it contain a listed hazardous waste, nor does it exhibit any characteristics of a hazardous waste as defined by 40 CFR 261.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. I certify that this waste profile and all attachments contain true and accurate descriptions of the waste material.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. I certify that all relevant information in possession of the Generator pertaining to known or suspected hazards with regard to the waste has been disclosed to Clean Earth.	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. I certify that all changes that occur in the characteristics of the waste will be identified by the Generator and disclosed to Clean Earth prior to providing the waste to Clean Earth.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. I certify that the analytical data attached hereto are derived from testing representative sample(s) as referenced in 40 CFR 261.20 or an equivalent state regulatory provision.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
6. For sites that contain "clean fill," the undersigned certifies that a site investigation was conducted and that the soil was characterized according to the proposed Clean Earth facility(s) acceptance criteria for soil classification as "clean fill" and where applicable in accordance with the Pennsylvania Management of Fill Policy.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
7. The undersigned has determined the non-hazardous status of the said waste in accordance with 40 CFR 262.11. Should, at any time after delivery, the material accepted by Clean Earth be found to be non-conforming to the information certified in this profile and represented by documentation attached hereto, it becomes the responsibility of the Generator/Agent to remove the waste from the designated Clean Earth facility within five (5) days of notification. Notification is to be verbal followed by written notification, overnight receipted. It is the Generator's/ Agent's responsibility to abide by all Federal, State and Local regulations associated with the removal of their waste. If the waste is not removed within the specified time period, said disposal shall be arranged by a Clean Earth representative and billed to the Generator/Agent at cost plus basis. Furthermore, the Generator/Agent will be responsible for any and all cost for decontamination required by the Clean Earth facility that is related to the Generator's/Agent's material and all liability for such nonconforming waste shall revert to Generator/Agent.	<input type="checkbox"/> Yes <input type="checkbox"/> No

*Certification

Signature: _____ Date: _____

Name (Type or Print): _____ Company: _____

*If someone other than the Generator is signing this profile or intends to sign any paperwork (which includes, but is not limited to, additional certifications, manifests, etc.) pertaining to this waste profile, authorization from the Generator, on the Generator's letterhead, must be supplied to Clean Earth prior to acceptance of waste material.

E. Clean Earth Waste Approval Decision

1. Treatment Option(s) _____	
2. Proposed Treatment Facility(s) _____	
3. Supplemental Information (special handling, hours of acceptance, etc): _____ _____ _____	
4. Approval Decision: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Approved tonnages: _____
4a. If denied, please indicate reason in the space provided: _____ _____	

5. Approval Signature: _____ Date: _____

6. Facility Manager's Signature: _____ Date: _____