



898 Fernhill Road, West Chester, PA 19380
 Phone: (610) 436-4749
 Fax: (610) 430-6948

Waste Profile# _____
 Account Code/Stream _____
 Sales Rep _____
 Approval Date _____
 Form U DEP Receipt Date _____

SECTION A: GENERATOR INFORMATION

Generator Name: _____ **Bill To:** _____
Site Address: _____ **Address:** _____
City: _____ **State:** _____ **Zip:** _____ **City:** _____ **State:** _____ **Zip:** _____
County: _____ **County Code:** _____ **Other:** _____
Phone: _____ **Fax:** _____ **Phone:** _____ **Fax:** _____
Technical Contact: _____ **Business Contact:** _____
E-mail: _____ **E-mail:** _____

SECTION B: WASTE DESCRIPTION

Waste Name: _____
 Process Generating Material: _____
 Shipping Name: Non-RCRA/Non-DOT Regulated Material
 DOT Shipping Name: _____ **Hazard Class:** _____ **UN/NA#:** _____ **PG:** _____
 Shipping Method: Bulk Drum Other – describe: _____
 Quantity: _____ Frequency: _____
 Small Quantity Residual Waste Generator per 25 PA Code 287.51 **Form U Waiver:** Yes No
 Large Quantity Residual Waste Generator per 25 PA Code 287.51 **If yes, refer to chemical composition requirements & residual waste codes for Form U Waiver**
 Large Quantity Residual Waste Generator, Small Quantity Wastestream per 25 PA Code 287.51

SECTION C: PHYSICAL PROPERTIES (at 70° unless otherwise specified)

Physical State	Odor	Layers	pH	Flash Point (°F)	Specific Gravity
% Liquid	<input type="checkbox"/> None	<input type="checkbox"/> Single	<input type="checkbox"/> 2.1 to 4	<input type="checkbox"/> 100 to 199	<input type="checkbox"/> <.8
% Solid	<input type="checkbox"/> Strong	<input type="checkbox"/> Bi-Layered	<input type="checkbox"/> 4.1 to 10	<input type="checkbox"/> 200 or >	<input type="checkbox"/> .8 - 1.0
% Sludge	<input type="checkbox"/> Mild	<input type="checkbox"/> Multi	<input type="checkbox"/> 10.1 to 12.4		<input type="checkbox"/> 1.0 - 1.2
Color:	Describe:		<input type="checkbox"/> N/A		<input type="checkbox"/> >1.2

SECTION D: CHEMICAL COMPOSITION

Constituents:	Low	High	<input type="checkbox"/> Testing	(if testing, provide name and accreditation # of laboratory)	Lab # _____
	%	%	<input type="checkbox"/> Generator Knowledge		
	%	%	Arsenic	ppm	Lead
	%	%	Barium	ppm	Mercury
	%	%	Cadmium	ppm	Selenium
	ppm	ppm	Chromium	ppm	Silver
			<input type="checkbox"/> TCLP	<input type="checkbox"/> Total	

Total Halogens <1000 ppm*
 Non-TSCA PCBs <2 ppm*
 Sampled per 25 PA Code 261
 Analyses Attached
 MSDS Attached

* Requirements for Form U Waiver: 1) Waste is not Hazardous 2) PCB Waste < 2ppm 3) Total Halide Concentration < 1000 ppm (Total Halide Concentration between 1000 and 4000 ppm acceptable if waste can meet the criteria for rebuttable presumptions)

SECTION E: RESIDUAL WASTE CODE

- | | | |
|--|--|---|
| <input type="checkbox"/> 109 Sandblast Abrasive And Residue | <input type="checkbox"/> 317 Glycols/Antifreeze, Machine Coolants * | <input type="checkbox"/> 474 Grease |
| <input type="checkbox"/> 201 Water Treatment Plant Sludge/Sediment | <input type="checkbox"/> 419 Empty Containers and Drums | <input type="checkbox"/> 483 Blasting Abrasive/Residue/Scrap |
| <input type="checkbox"/> 207 Tank Bottoms | <input type="checkbox"/> 420 Process Wastewaters (Non-Haz.) * | <input type="checkbox"/> 503 Oil Containing Waste |
| <input type="checkbox"/> 209 Oily Sludge, Petroleum Derived | <input type="checkbox"/> 422 Oil/Water Emulsions, Oily Wastewaters * | <input type="checkbox"/> 506 Contaminated Soil/Debris Spill Residue |
| <input type="checkbox"/> 211 Other Industrial Sludge | <input type="checkbox"/> 470 Spent Filters (Air/Gas) | <input type="checkbox"/> 507 Waste Petroleum Mat'l Contaminated Soil/Debris |
| <input type="checkbox"/> 305 Spent Activated Carbon | <input type="checkbox"/> 471 Spent Filters (Aqueous) | <input type="checkbox"/> 508 Virgin Petroleum Fuel Contaminated Soil/Debris |
| <input type="checkbox"/> 307 Filter Media/Aids | <input type="checkbox"/> 472 Spent Filters (Non-Haz. Fuel, Oil, Solvent) | <input type="checkbox"/> 509 Waste Oil That Is Not Hazardous Waste * |

* To qualify for Eldredge, Inc. Form U Waiver, waste shall fall under Residual Waste Codes 317, 420, 422, or 509

SECTION F: GENERATOR CERTIFICATION

I hereby certify to the best of my knowledge and belief, the information contained herein is a true and accurate description of the material being offered for processing. Samples of this material submitted are representative of the material described in this profile. I further certify that by utilizing this profile, neither I nor any other employee of the company will deliver for processing or attempt to deliver for same any material that is classified as hazardous waste or any other material that this facility is prohibited from accepting by law.

Authorized Representative Name: (Printed)

Company:

Authorized Representative Signature:

Title:

Date: