



**SECTION E WASTE DESCRIPTION**

(check all that apply)

Additional Pages Attached

*Chemical Products:*

- Virgin/Unused Product
- Offspec, unusable, or expired
- Used or spent
- \_\_\_\_\_

*Process Wastes:*

- Pollution Control Process
  - Filter Media
  - Water/Wastewater Sludge
- Spill Cleanup
  - Petroleum Impacted Soil
- Industrial Process
  - Sandblast
  - Drill Cuttings
- \_\_\_\_\_

*Specific Wastes:*

- Combustor Ash
- Treated Wood
- Treated Biomedical
- Wastewater Screening
- Stormwater Sediment
- Street Sweepings
- \_\_\_\_\_

Detailed description of generation. What, Where, How the waste was produced. Attach additional pages if necessary:

**SECTION F CHEMICAL CONSTITUENTS**

Composition:

(min-max)

_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %

Contains: (check all that apply)

- |                                      |                                     |                                   |
|--------------------------------------|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> PCB's       | <input type="checkbox"/> Grease/Oil | <input type="checkbox"/> Chromium |
| <input type="checkbox"/> Cyanide     | <input type="checkbox"/> Gas/Diesel | <input type="checkbox"/> Lead     |
| <input type="checkbox"/> Sulfides    | <input type="checkbox"/> Solvents   | <input type="checkbox"/> Mercury  |
| <input type="checkbox"/> Pesticides  | <input type="checkbox"/> Hydraulic  | <input type="checkbox"/> Selenium |
| <input type="checkbox"/> Dioxins     | <input type="checkbox"/> Arsenic    | <input type="checkbox"/> Silver   |
| <input type="checkbox"/> Halogens    | <input type="checkbox"/> Barium     | <input type="checkbox"/> Other    |
| <input type="checkbox"/> Radioactive | <input type="checkbox"/> Cadmium    | _____                             |

**SECTION G PHYSICAL CHARACTERISTICS**

<i>Color/Appearance:</i>	<i>Physical State:</i> <input type="checkbox"/> Dust/Powder <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Semi-Solid <input type="checkbox"/> Large Debris	<i>Layers:</i> <input type="checkbox"/> Single <input type="checkbox"/> Two <input type="checkbox"/> Multi	<i>Odor:</i> <input type="checkbox"/> None <input type="checkbox"/> Mild <input type="checkbox"/> Strong Describe:	<i>Water Content:</i> <input type="checkbox"/> No <input type="checkbox"/> Yes % <i>Pumpable:</i> <input type="checkbox"/> No <input type="checkbox"/> Yes	<i>pH:</i>  <i>Infectious:</i> <input type="checkbox"/> No <input type="checkbox"/> Yes
--------------------------	---	---	--	---	---

**SECTION H REGULATORY INFORMATION**

Agency:  
Contact:

Corrective Action Required:

**SECTION I QUANTITY**

- |       |                                |                                    |
|-------|--------------------------------|------------------------------------|
| _____ | <input type="checkbox"/> Tons  | <input type="checkbox"/> One Time  |
|       | <input type="checkbox"/> Yards | <input type="checkbox"/> Per Week  |
|       | <input type="checkbox"/> Lbs   | <input type="checkbox"/> Per Month |
|       | <input type="checkbox"/> Drums | <input type="checkbox"/> Per Year  |
|       | <input type="checkbox"/> _____ | <input type="checkbox"/> _____     |

**SECTION J TRANSPORTATION**

Transporter:  
Vehicle/Packaging Method:

**SECTION K SAMPLING INFORMATION**

Laboratory Analysis Attached

- Sample Type:  Grab  Composite  \_\_\_\_\_
- Sample Obtained by:  Generator  Lab  \_\_\_\_\_

Describe composite methodology: