



- New
- Requalification

ISOLATION YES NO

NAME OF WASTE STREAM	PROFILE/APPROVAL NUMBER

- Sharonville
- M-town: Water
- Franklin
- St. Louis
- Kansas City
- AL
- WV
- M-town: Oil
- 7900
- Solidification
- Reuse Stream

<p>GENERATOR SITE INFORMATION</p> <p>Generator Name _____</p> <p>Site Contact Person _____</p> <p>Site Address _____</p> <p>City _____</p> <p>State _____</p> <p>Zip _____</p> <p>Phone _____</p> <p>Fax _____</p> <p>Email _____</p> <p>EPA ID # _____</p> <p>DOT SHIPPING NAME: Transporter: <input type="checkbox"/> Valicor <input type="checkbox"/> Other _____</p> <hr/> <p>GENERATING PROCESS:</p> <p>PHYSICAL CHARACTERISTICS</p> <p>Infectious or Biological Waste: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>NRC Regulated Radioactivity: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Reactivity: <input type="checkbox"/> None <input type="checkbox"/> Water <input type="checkbox"/> Shock <input type="checkbox"/> Pyrophoric</p> <p><input type="checkbox"/> Cyanides <input type="checkbox"/> Sulfides <input type="checkbox"/> DOT Explosive</p> <p><input type="checkbox"/> Gas <input type="checkbox"/> Aerosol <input type="checkbox"/> Lab-Pack <input type="checkbox"/> Other</p> <p>ODOR <input type="checkbox"/> None <input type="checkbox"/> Mild <input type="checkbox"/> Strong</p> <p>Describe: _____</p> <p>VOLUME & FREQUENCY <input type="checkbox"/> DRUM <input type="checkbox"/> TOTE <input type="checkbox"/> BULK</p> <p># Gallons _____; # Totes/Drums _____</p> <p><input type="checkbox"/> One Time <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Annually</p> <p>ADDITIONAL CHARACTERISTICS</p> <p>Does this waste contain greater than 0 ppm Polychlorinated Biphenyls (PCB) s? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Is this PCB waste regulated by TSCA? (PCB ≥ 50 ppm or derived from a ≥ 50 ppm source) <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Is this waste derived from drilling or hydraulic fracking operations relating to the oil & gas industry? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><i>If yes, is the material considered to be associated with UOG (unconventional Oil and Gas) Extraction wastewaters ie, brine or flowback waters?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Is waste subject to the National Emissions standards for Benzene Waste Operations? (40 CFR 61 Subpart FF) <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Is waste regulated as an ozone depleting Substance? (40CFR Part 82) <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Is this regulated as a marine pollutant? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>BILLING INFORMATION</p> <p>Billing Name _____</p> <p>Contact Person _____</p> <p>Address _____</p> <p>City _____</p> <p>State _____</p> <p>Zip _____</p> <p>Phone _____</p> <p>Fax _____</p> <p>Email _____</p> <p>PURCHASE ORDER REQUIRED <input type="checkbox"/> YES # _____ <input type="checkbox"/> NO</p> <p>RCRA HAZARDOUS <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> EXEMPT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> Solids</td> <td style="width: 150px;">_____ %</td> </tr> <tr> <td><input type="checkbox"/> Sludges</td> <td>_____ %</td> </tr> <tr> <td><input type="checkbox"/> Free Liquids</td> <td>_____ %</td> </tr> </table> <p>LAYERS <input type="checkbox"/> Single-Layered <input type="checkbox"/> Bi-Layered <input type="checkbox"/> Multi-Layered</p> <p>VISCOSITY <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High</p> <p>COLOR/APPEARANCE</p> <p>PH <input type="checkbox"/> N/A <input type="checkbox"/> 0-2.0 <input type="checkbox"/> 2.1-4 <input type="checkbox"/> 4.1-10 <input type="checkbox"/> 10.1-12.0 <input type="checkbox"/> ≥12.5</p> <p>Exact: _____</p> <p>FLASH POINT (liquid only)</p> <p><input type="checkbox"/> <73°F <input type="checkbox"/> 73-140°F <input type="checkbox"/> 141-200°F <input type="checkbox"/> >200°F Exact: _____</p> <p>CWT CLASSIFICATION (40 CFR PART 437)</p> <p><input type="checkbox"/> OIL SUBCATEGORY</p> <ul style="list-style-type: none"> • Used Oil • Coolants • Oil Water Mixture • Contaminated Ground Water <p><input type="checkbox"/> METAL SUBCATEGORY</p> <ul style="list-style-type: none"> • Waste acid and bases with or without metals • Metal finish rinse waters • Cleaning, rinsing, and surface preparation solutions from electroplating or phosphating <p><input type="checkbox"/> ORGANIC SUBCATEGORY</p> <ul style="list-style-type: none"> • Landfill Leachate • Contaminated ground water from non-petroleum source • Solvent bearing wastes • Off-Spec organic product • Wastewater from paint washes, adhesives, and/or epoxies. <p>PHYSICAL/CHEMICAL CONSTITUENTS</p> <p>Attach All SDS, sample analysis and other information</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; height: 20px;"> </td> <td style="width: 30%; text-align: right;">%</td> </tr> <tr> <td style="height: 20px;"> </td> <td style="text-align: right;">%</td> </tr> <tr> <td style="height: 20px;"> </td> <td style="text-align: right;">%</td> </tr> </table>	<input type="checkbox"/> Solids	_____ %	<input type="checkbox"/> Sludges	_____ %	<input type="checkbox"/> Free Liquids	_____ %		%		%		%
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GENERATOR'S CERTIFICATION: I hereby certify that the above and attached description is complete and accurate to the best of my knowledge and ability to determine that no deliberate or willful omission of composition properties exists and that all known or suspected hazards have been disclosed. I certify that the materials tested are representative of all materials described by this profile. Also, I acknowledge that oil containing more than 1,000 ppm total halogens is presumed to be hazardous waste per 40 CFR279. However, that presumption can be rebutted by applying my knowledge of my halogen content of the used oil in light of the materials or processes used in my operations. To the best of my knowledge and belief, I certify to VALICOR that our used oils are generated from industrial usage and we do not mix hazardous waste with our oil. I understand that every time I and or another of our employess sign the non-hazardous manifest or bill of lading, we are re-certifying this rebuttal presumption. In addition, to the best of my knowledge and belief, all information on these forms is a complete and accurate representation of our waste stream(s). **I will notify VALICOR in ADVANCE of changes in the waste stream(s).** I will comply with all local, state, and federal regulations with regards to your waste stream(s).

Customer Signature _____ Title _____ Date _____

Valicor Approval Signature _____ Title _____ Date _____