



Resourceful. Determined. Professional.™

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The Waste Certification Statement™

For Approval Use Only			
Date Rec'd _____	Approval _____		
Price Code _____	Treatability Code _____		
PA RWC: _____	Subcategory (Circle)		
Oil	Metal	Organic	Solid
OK for Acceptance: Yes / No Authorized by _____			

AWS of WI ChemWorks Division 3801K W. McKinley Ave. Milwaukee, WI 53209 800-842-9792	AWS of IN ChemWorks II Division 5625 Old Porter Rd Portage, IN 46362 800-842-9792	AWS of IL IPC Division 4430 Boeing Drive Rockford, IL 61109 800-842-9792	AWS of PA AWS East 101 River Road New Castle, PA 16101 724-657-8777	AWS of IA Cedar Rapids Division 640 63rd Avenue, SW Cedar Rapids, IA 52404 319-247-2403
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Desired Management Technology _____	Waste Water Treatment _____	Solidification _____	Used Oil Management _____	Waste to Energy _____
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Please check the designated facility: ChemWorks _____ ChemWorks II _____ IPC* _____ AWS of PA _____ AWS of IA _____

A) Generator Information NAICS Code # _____ *Permit requires waste be analyzed every 5 years.

Generator Name _____ (Correspondence will be sent to "Customer Name" address)

Street _____ Customer Name _____

City _____ State _____ Zip _____ Street _____

Contact Name _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Contact Name _____

State ID# _____ Phone _____ Fax _____

B) Waste Description

1) Common Name of Waste: _____ Is Waste _____ Wet or _____ dry?

2) US DOT Proper Shipping Name: _____

3) Process Generating Waste: _____

4) Is this waste a characteristic or listed hazardous waste as defined in CFR 40 Part 261? Yes No

5) Is this waste "Used Oil" or contain "Used Oil" as defined in 40 CFR 279 or generator state regulations? Yes No

If Yes, please complete Section F. Used Oil Warranty.

6) Method of Shipment: Tanker Rolloff Drum - Type/Size _____ Other: _____

7) Amount/Frequency of Shipment: One Time Monthly Annually On Call Other _____

8) Waste is: Industrial Process Waste Unused or Off-Spec Product NRC Radioactive? Yes No

Commercial Process Waste UST or Spill Related Waste

Food Related Waste Other, please specify: _____

9) MSDS attached? Yes No 9) Analysis Attached? Yes No*

**If no, waste may be rejected on receipt based on AWS laboratory analysis.*

C) Physical Data

1) Color: _____ 4) Is Waste Pumpable? Yes No Pourable? Yes No

2) Odor: _____ Mild Strong 5) Flash Point: _____ 8) BOD: _____ ppm

3) # of Layers: _____ Liquid _____ % 6) pH: _____ 9) COD: _____ ppm

Solids _____ % Sludge _____ % 7) Specific Gravity: _____ 10) Does waste contain Mercury? No Yes* _____ ppm

11) Does waste contain Ammonia? No Yes _____ ppm 12) Does waste contain Cyanide? No Yes _____ ppm

13) Does waste contain Phenol? No Yes _____ ppm 14) Does waste contain PCB's? No Yes _____ ppm

*If total Mercury is in excess of 0.0234 mg/l, waste is subject to denial for waste water treatment. Please consult your RA for alternate disposal method.

D) Waste Composition

_____ %	_____ %
_____ %	_____ %
_____ %	_____ %
TOTAL 100%	

SAMPLE INFORMATION

Is sample provided? Yes No Date Collected: _____ Time Collected: _____

If yes, then fill out the following: Sampled by: _____ Sample location: _____

Composite Grab

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E) Pollutant Analysis

Based on knowledge or analysis, check if characteristic is Below Regulatory Limits "BRL" or state actual value.

INORGANIC CHARACTERISTICS

(BRL = Below Regulatory Limits)

D004 Arsenic	<5.0	<input type="checkbox"/>	<input type="checkbox"/>	D010 Selenium	<1.0	<input type="checkbox"/>	<input type="checkbox"/>
D005 Barium	<100.0	<input type="checkbox"/>	<input type="checkbox"/>	D011 Silver	<5.0	<input type="checkbox"/>	<input type="checkbox"/>
D006 Cadmium	<1.0	<input type="checkbox"/>	<input type="checkbox"/>	Copper	<100.0	<input type="checkbox"/>	<input type="checkbox"/>
D007 Chromium	<5.0	<input type="checkbox"/>	<input type="checkbox"/>	Zinc	<500.0	<input type="checkbox"/>	<input type="checkbox"/>
D008 Lead	<5.0	<input type="checkbox"/>	<input type="checkbox"/>	Nickel	BRL	<input type="checkbox"/>	<input type="checkbox"/>
D009 Mercury*	<0.2	<input type="checkbox"/>	<input type="checkbox"/>	*Total Mercury conc. >0.0234 mg/l is subject to denial for waste water treatment.			

ORGANIC CHARACTERISTICS (check if characteristic is Below Regulatory Limits "BRL" or state actual value)

D018 Benzene	<0.5	<input type="checkbox"/>	<input type="checkbox"/>	D032 Hexachlorobenzene	<0.13	<input type="checkbox"/>	<input type="checkbox"/>
D019 Carbon Tetrachloride	<0.5	<input type="checkbox"/>	<input type="checkbox"/>	D033 Hexachlorobutadiene	<0.5	<input type="checkbox"/>	<input type="checkbox"/>
D021 Chlorobenzene	<100	<input type="checkbox"/>	<input type="checkbox"/>	D034 Hexachloroethane	<3.0	<input type="checkbox"/>	<input type="checkbox"/>
D022 Chloroform	<6.0	<input type="checkbox"/>	<input type="checkbox"/>	D035 Methyl Ethyl Ketone	<200.0	<input type="checkbox"/>	<input type="checkbox"/>
D023 o-Cresol	<200.0	<input type="checkbox"/>	<input type="checkbox"/>	D036 Nitrobenzene	<2.0	<input type="checkbox"/>	<input type="checkbox"/>
D024 m-Cresol	<200.0	<input type="checkbox"/>	<input type="checkbox"/>	D037 Pentachlorophenol	<100.0	<input type="checkbox"/>	<input type="checkbox"/>
D025 p-Cresol	<200.0	<input type="checkbox"/>	<input type="checkbox"/>	D038 Pyridine	<5.0	<input type="checkbox"/>	<input type="checkbox"/>
D026 Cresol	<200.0	<input type="checkbox"/>	<input type="checkbox"/>	D039 Tetrachloroethylene	<0.7	<input type="checkbox"/>	<input type="checkbox"/>
D027 1,4-Dichlorobenzene	<7.5	<input type="checkbox"/>	<input type="checkbox"/>	D040 Trichloroethylene	<0.5	<input type="checkbox"/>	<input type="checkbox"/>
D028 1,2-Dichloroethane	<0.5	<input type="checkbox"/>	<input type="checkbox"/>	D041 2,4,5-Trichlorophenol	<400.0	<input type="checkbox"/>	<input type="checkbox"/>
D029 1,1-Dichloroethylene	<0.7	<input type="checkbox"/>	<input type="checkbox"/>	D042 2,4,6-Trichlorophenol	<2.0	<input type="checkbox"/>	<input type="checkbox"/>
D030 2,4-Dinitrotolune	<0.13	<input type="checkbox"/>	<input type="checkbox"/>	D043 Vinyl Chloride	<0.2	<input type="checkbox"/>	<input type="checkbox"/>

F) Used Oil Warranty (complete if waste is a "Used Oil" or contains "Used Oil") Not Applicable

Has this Used Oil* been mixed with Hazardous Waste? Yes No Are any chlorinated solvents used on Site? Yes No

*Used oil is oil that has been refined from crude or synthetic oil and used as a lubricant.

Does this Used Oil contain Total Halogens greater than 1,000 ppm? Yes No *Subject to verification by AWS Laboratory

If yes, can you identify the Halogenated Constituent in the Oil? _____

If yes, can you rebut the presumption (certify) that material is a Hazardous Waste? Yes *No

* If no, this waste cannot be accepted by Advanced Waste Services, Inc. facilities.

If yes, please check your method of Rebutting the Presumption (at least one must be checked):

The total halogen content is due to the presence of a Halogenated Constituent of the oil formulation; for example, Chlorinated Paraffins (Material Safety Data Sheet must be attached). This Used Oil has not been mixed with a chlorinated solvent or other hazardous waste.

The attached laboratory analysis does not contain significant concentrations of Halogenated Constituents.

Generator's Initials _____

G) Warranty Statement

I hereby certify the following: The waste identified in Section B of this waste profile form, when measured in each container or vessel, does not contain any material at a concentration which would render it hazardous as defined in 40 CFR 261 to include regulated Pesticides/Herbicides, nor does it contain PCB's at a concentration of >1 ppm, or contaminated with PCB's from a source \geq 50 ppm.

I further hereby agree to indemnify and hold Advanced Waste Services, Inc. treatment facilities harmless from any cost, damages or other liability resulting from the breach of this warranty.

Generator's Initials _____

GENERATOR CERTIFICATION

I, _____ hereby certify that I am familiar with the process generating the waste and that the above and attached description is complete and accurate to the best of my knowledge and ability. No deliberate or willful omissions of composition or properties have been made and all known or suspected hazards have been disclosed. I also certify to the best of my knowledge that the waste does not contain any constituent that would cause the waste to be regulated as a RCRA Characteristic or Listed hazardous waste, a PCB TSCA waste, or NRC Regulated Radioactive waste. Further, the waste sample, if provided, is representative of the waste material described above.

Signature * _____

Title _____

Date _____

* **Cannot be signed by an AWS employee.**
