



Waste Stream Profile

Date Submitted: _____

Generator Information

Company Name		Contact Name	
Street Address		Phone Number	
City, State ZIP		Fax Number	
Broker Information			

Waste Stream Background Information

Waste Stream Name			
Generation Location			
Generating Process			
Previous Approval Number			
Volume per Load	Gallons in <input type="checkbox"/> Truck <input type="checkbox"/> Drums <input type="checkbox"/> Other		
Delivery Frequency	<input type="checkbox"/> Once	Loads per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year	

Waste Classification

Actual % Oil	Range	Classification	Instructions
_____ %	< 20 %	Wastewater	Disregard the Used Oil Characteristics Section of the profile
	20-80 %	Mixed	Fill out the BOTH sections each for the appropriate phase
	> 80 %	Used Oil	Disregard the Wastewater Characteristics Section of the profile

Wastewater Characteristics

☐ Analytical data available? (Please attach)

Check if Present	Concentration (mg/L)
Antimony <input type="checkbox"/>	
Arsenic <input type="checkbox"/>	
Barium <input type="checkbox"/>	
Cadmium <input type="checkbox"/>	
Chromium <input type="checkbox"/>	
Cobalt <input type="checkbox"/>	
Copper <input type="checkbox"/>	
Lead <input type="checkbox"/>	
Mercury <input type="checkbox"/>	
Molybdenum <input type="checkbox"/>	
Nickel <input type="checkbox"/>	
Selenium <input type="checkbox"/>	
Silver <input type="checkbox"/>	
Tin <input type="checkbox"/>	
Titanium <input type="checkbox"/>	
Vanadium <input type="checkbox"/>	
Zinc <input type="checkbox"/>	
Oil & Grease <input type="checkbox"/>	
Cyanide <input type="checkbox"/>	
Nitrogen (T) <input type="checkbox"/>	

Total Suspended Solids (wt%):				
<input type="checkbox"/> <1	<input type="checkbox"/> 1-5	<input type="checkbox"/> 6-10	<input type="checkbox"/> 11-20	<input type="checkbox"/> >20
pH Range (<2 or >12.5 is a hazardous waste)				
<input type="checkbox"/> 2-4	<input type="checkbox"/> 5-6	<input type="checkbox"/> 7	<input type="checkbox"/> 8-9	<input type="checkbox"/> 10-12.5
COD Range (mg/L) (if known)				
<input type="checkbox"/> <100	<input type="checkbox"/> 101-500	<input type="checkbox"/> 501-1000	<input type="checkbox"/> 1001-3000	<input type="checkbox"/> 3001-6000 <input type="checkbox"/> >6000

Organic Pollutants Present	Concentration (mg/L)

Does this waste stream contain any of the following?

☐ PCBs ☐ Sulfides ☐ AFFF ☐ Electro less Plating ☐ EDTA ☐ None
Are multiple layers present? ☐ Yes ☐ No

Describe _____

Describe the odor (if any) _____

Describe the color (if any) _____

Waste Stream Profile

Used Oil Characteristics

☐ Analytical data available? (Please attach)

Characteristic	Actual	Range			
Flash Point (Closed Cup - °F)		<input type="checkbox"/> < 140	<input type="checkbox"/> 141-200	<input type="checkbox"/> > 200	
Total Solids (%)		<input type="checkbox"/> < 1	<input type="checkbox"/> 1-5	<input type="checkbox"/> 6-10	<input type="checkbox"/> 11-20
pH (<2 or >12.5 is hazardous)		<input type="checkbox"/> 2-4	<input type="checkbox"/> 5-6	<input type="checkbox"/> 7	<input type="checkbox"/> 8-9
Viscosity		<input type="checkbox"/> Low	<input type="checkbox"/> Medium	<input type="checkbox"/> High	
Percent Moisture		<input type="checkbox"/> <1	<input type="checkbox"/> 1-5	<input type="checkbox"/> 6-10	<input type="checkbox"/> 11-20
BTU/pound		<input type="checkbox"/> < 2000	<input type="checkbox"/> 2001-6000	<input type="checkbox"/> 6001-10000	<input type="checkbox"/> 10001-16000

Check if Present	Concentration (mg/L)
Arsenic <input type="checkbox"/>	
Cadmium <input type="checkbox"/>	
Chromium <input type="checkbox"/>	
Lead <input type="checkbox"/>	
Total Organic Halogens <input type="checkbox"/>	
PCBs <input type="checkbox"/>	
Other <input type="checkbox"/>	

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Are multiple layers present? ☐ Yes ☐ No

Describe _____

Describe the odor (if any) _____

Describe the color (if any) _____

Additional Information and Comments

Certification

I certify that this waste is not classified as, mixed with, or derived from a hazardous or special waste under the Resource Conservation and Recovery Act (40 CFR Part 261). I further certify that the above information is true and accurate to the best of my knowledge and is based on analysis of a representative sample of the waste in accordance with EPA guidelines and documents, or on my thorough knowledge of the waste and the generating process.

Name: _____

Title: _____

Signature: _____

Date: _____

To Be Completed By WRI Personnel Only

Approved?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	By:		Date:		Approval Number:	
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