



Instructions for Waste Characterization Profile & Approval

For Assistance: Contact Customer Service at 1-800-881-1098

To ensure timely processing of your waste management approval, please fill out the Waste Characterization Profile form as complete as practicable.

For information related to Categorical Pretreatment Standards (40 CFR §400-471) use the following internet link to the USEPA Web site:

<http://www.epa.gov/docs/epacfr40/chapt-I.info/subch-N.htm>

For information related to Identification and Listing of Hazardous Waste (40 CFR §261) please use the following internet link to the USEPA Web site:

http://www.access.gpo.gov/nara/cfr/cfrhtml_00/Title_40/40cfr261_00.html

Attach copies of supporting analytical data or Material Safety Data Sheets (MSDS).

Send a representative sample with completed chain of custody form to the following address:

*Waste Acceptance Department
Shamrock Environmental Corporation
6106 Corporate Park Drive
Browns Summit, North Carolina 27214
(800) 881-1098*

ALL SAMPLES MUST BE SHIPPED IN SECURE CONTAINERS IN ACCORDANCE WITH APPLICABLE USDOT SHIPPING REQUIREMENTS. Packaging used for the transportation shall be designed, constructed, maintained, closed, and loaded so that, under conditions normally incident to transportation, there will be no release of regulated materials to the environment. If shipping via air freight, be sure to comply with air transport and shipper-specific requirements.

Once all required information has been obtained, the profile has been evaluated and an approval issued, a Customer Service Representative will contact you regarding pricing and scheduling of your waste shipment(s).

If you have questions regarding the status of your approval, please call the Customer Service Department at 800-881-1098.



Tracking Number: _____

Material Name: _____

For Assistance Contact Customer Service: 1-800-881-1098

Material Characterization Profile

Section 1: Generator Information						
Generator Name: _____ Generator EPA ID: _____ Pickup Address: _____ _____ Technical Contact: _____ Phone: _____ Fax: _____ Mailing Address: _____ _____	Billing Contact: _____ Billing Name: _____ Billing Address: _____ _____ Billing Phone: _____ Billing Fax: _____					
Section 2: Material Description & Characteristics						
Name of Material: _____						
Process Generating Material: _____						
Shipping Information: Quantity _____ Units <input type="checkbox"/> Gallons <input type="checkbox"/> Cubic Yards <input type="checkbox"/> Tons <input type="checkbox"/> Totes <input type="checkbox"/> Drums Per: <input type="checkbox"/> Once <input type="checkbox"/> Day <input type="checkbox"/> Month <input type="checkbox"/> Year						
Is the material off-specification or discarded commercial product? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is an MSDS available? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> MSDS attached.						
Is the material a hazardous waste as defined in RCRA (40 CFR 261)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list waste codes: _____						
Is the material/wastewater subject to a CWA Categorical Pretreatment Standard (40 CFR 400-471)? <input type="checkbox"/> Yes <input type="checkbox"/> No List: _____						
Composition (key compounds, soil, water, PPE, debris, etc.):			Used Oil Management Parameters:			
_____ to _____ % _____ to _____ % _____ to _____ % _____ to _____ %			Halogens: <input type="checkbox"/> ≤1000 ppm <input type="checkbox"/> ≤ 4000 ppm <input type="checkbox"/> _____ Rebuttable? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	BTU Value: <input type="checkbox"/> < 2 (BTU/1000 lb) <input type="checkbox"/> 2-5 (BTU/1000 lb) <input type="checkbox"/> 5-9 (BTU/1000 lb) <input type="checkbox"/> 9-12 (BTU/1000 lb) <input type="checkbox"/> > 12 (BTU/1000 lb) <input type="checkbox"/> _____	Sulfur: <input type="checkbox"/> ≤ 2% <input type="checkbox"/> _____ Ash (%): <input type="checkbox"/> ≤ 1% <input type="checkbox"/> _____	Moisture: _____ Viscosity (sus): _____
Description: _____ Color: _____ Odor: _____						
Physical State @ 70°F: <i>(check all that apply)</i> <input type="checkbox"/> Free Liquid _____ % <input type="checkbox"/> Sludge _____ % <input type="checkbox"/> Solid _____ % <input type="checkbox"/> Pumpable _____ % <input type="checkbox"/> Pourable _____ %	pH: <input type="checkbox"/> ≤ 2 <input type="checkbox"/> <12.5 <input type="checkbox"/> < 5 <input type="checkbox"/> ≥ 12.5 <input type="checkbox"/> < 9 <input type="checkbox"/> _____	Specific Gravity: <input type="checkbox"/> < 0.8 <input type="checkbox"/> 0.8 - 1.2 <input type="checkbox"/> > 1.2 <input type="checkbox"/> _____	Flash Point: <input type="checkbox"/> < 130°F <input type="checkbox"/> < 140°F <input type="checkbox"/> 140 - 200°F <input type="checkbox"/> ≥ 200°F <input type="checkbox"/> _____	TSS: <input type="checkbox"/> < 200 ppm <input type="checkbox"/> < 1000 ppm <input type="checkbox"/> ≤ 5000 ppm <input type="checkbox"/> > 5000 ppm <input type="checkbox"/> _____	TDS: <input type="checkbox"/> < 0.5 ppm <input type="checkbox"/> < 1.0 ppm <input type="checkbox"/> > 1.0 ppm <input type="checkbox"/> _____	
Oil & Grease: <input type="checkbox"/> > 100 ppm <input type="checkbox"/> > 5% _____	<input type="checkbox"/> BOD ₅ <input type="checkbox"/> COD: <input type="checkbox"/> < 200 ppm <input type="checkbox"/> < 2000 ppm <input type="checkbox"/> ≤ 7500 ppm <input type="checkbox"/> > 7500 ppm <input type="checkbox"/> _____ ppm	Ammonia: _____ ppm Sulfides: _____ ppm Phenols: _____ ppm	Cyanides: <input type="checkbox"/> < 0.02 ppm <input type="checkbox"/> < 0.1 ppm <input type="checkbox"/> < 5 pp,m <input type="checkbox"/> ≥ 5 ppm	Contains Chelating Agents?: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list: _____	PCBs? <input type="checkbox"/> Yes <input type="checkbox"/> No Conc.: _____ Radioactive? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the material contain phthalates? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Identify: _____						
Section 3: Chemical Constituents:						
Metals: Metal results below are: <input type="checkbox"/> Total <input type="checkbox"/> TCLP BRL: Initial here if all results below are represented as Below Regulatory Levels						
<input type="checkbox"/> Antimony: _____ ppm <input type="checkbox"/> Arsenic: _____ ppm <input type="checkbox"/> Barium: _____ ppm <input type="checkbox"/> Cadmium: _____ ppm <input type="checkbox"/> Chromium: _____ ppm	<input type="checkbox"/> Cobalt: _____ ppm <input type="checkbox"/> Copper: _____ ppm <input type="checkbox"/> Lead: _____ ppm <input type="checkbox"/> Mercury: _____ ppm	<input type="checkbox"/> Molybdenum: _____ ppm <input type="checkbox"/> Nickel: _____ ppm <input type="checkbox"/> Selenium: _____ ppm <input type="checkbox"/> Silver: _____ ppm	<input type="checkbox"/> Tin: _____ ppm <input type="checkbox"/> Titanium: _____ ppm <input type="checkbox"/> Vanadium: _____ ppm <input type="checkbox"/> Zinc: _____ ppm			
Organics: Organic results below are: <input type="checkbox"/> Total <input type="checkbox"/> TCLP BRL: Initial here if all results below are represented as Below Regulatory Levels						
<input type="checkbox"/> Bis(2-ethylhexyl)phthalate: _____ ppm <input type="checkbox"/> Carbazole: _____ ppm <input type="checkbox"/> n-Decane: _____ ppm	<input type="checkbox"/> o-Cresol: _____ ppm <input type="checkbox"/> p-Cresol: _____ ppm <input type="checkbox"/> 2,3-Dichloroaniline: _____ ppm	<input type="checkbox"/> Fluoranthene: _____ ppm <input type="checkbox"/> 2,4,6-Trichlorophenol: _____ ppm <input type="checkbox"/> N-Octadecane: _____ ppm				
Section 4: Certification:						
I certify under penalty of law that this document, all attachments and supporting materials were prepared and presented by me under my direct supervision and that the information provided is a true, accurate and complete representation of the waste materials to be presented for evaluation and management by Shamrock Environmental. Furthermore, I agree that any waste materials managed under any approval issued by Shamrock Environmental pursuant to this request will be transported, delivered and tendered to be in conformance with the material characterization profile. Where Shamrock Environmental determines a material to be non-conforming, the generator shall be responsible for all costs associated with timely return of the material to generator or for other alternate and lawful management of the non-conforming material conducted on behalf of the generator.						
Generator Signature _____			Printed Name _____			
Company Name _____		Title _____		Date _____		
<input type="checkbox"/> Additional pages attached						

