WASTE/MATERIAL PROFILE FORM

PROFILE #:_____

☐ *Environmental Services Inc. (ESI) Tillbury, Canada* ☐ *US Ecology Canada, Inc. Sarnia, Ontario*

Process Approval Code:	Date (mm/dd/yy):	Profile #:

A. GENERATOR/CUSTOMER INFORMATION *(If foreign generator, complete Waste Import Supplement)*

1. **Generator Name:**_____ ☐ **Invoicing information is the same as generator mailing address**
2. **Site Address:** _____ ☐ **P.O. required for payment?** *If yes, include*
   City:_____ **Phone:**_____ 8. **Invoicing Company:** _____
   Province:_____ **Postal Code:** _____ **Country:** ____ _____
3. **Mailing Address:** _____ 9. **Invoicing Address:** _____
   City: _____ **City:** _____
   Province: _____ **Postal Code:**_____**Country:**_____ **Province:** _____ **Postal Code:**_____**Country:**_____
4. **Technical Contact:** _____ 10. **Customer Contact:**_____
5. **Phone:** _____ **Email:** _____ 11. **Phone:**_____ **Email:**_____
6. **HWIN Generator #:**_____ **NAICS CODE:**_____ **Waste Class Code (WCC) # :** *(If applicable)* _____

B. WASTE/MATERIAL STREAM DESCRIPTION

1. **Waste Name:**_____
2. **Generating Process** *(Please provide a site history for Remediation & IDW sites. Use additional form if necessary):*_____
   _____
   _____
   _____
   _____

C. SHIPPING/PACKAGING INFORMATION

1. **TDG Dangerous Goods?** ☐ Yes ☐ No **Proper Shipping Name:**_____
2. **NOS Description:** *(e.g. "Lead" or "Chrome")* _____
3. **UN/NA #:**_____ **Hazard Class:**_____ **Packing Group:**_____ **ERG #:**_____
4. **Is there an ERAP#?** ☐ **Yes** ☐ **No** **If so, what is this #?**_____ **Phone Number:**_____
5. **24-Hour Emergency Phone:**_____ 6. **Inhalation Hazard?** ☐ Yes ☐ No
7. **Emergency Contact Name:**_____ **Phone Number:** _____
8. **Special Handling Instructions** *(If required):*_____
9. **Container Type:** ☐Bulk ☐Totes ☐Pallet ☐Boxes ☐Drums ☐Cylinder **Container Size:** _____
   ☐Lab Pack *(If Lab Pack, Inventory lists required)*
   ☐Combination Containers (e.g., inner containers), **Describe**:_____
   ☐Other, **Describe**:_____
10. **Volume/Frequency:** **Volume:** _____ **Units:**_____
    Frequency: ☐Year ☐Quarterly ☐Monthly ☐1 Time ☐Other, **Describe:** _____

D. PHYSICAL PROPERTIES *(Use additional form if necessary)*

1. **Physical Description** *(e.g. soil, water, PPE, debris, sorbent, etc. Include 100% of container content. If debris, provide dimensions & weight)*

Description	Typical (%)	Min (%)	Max (%)

2. **Viscosity (if liquid present):** ☐1-100 cps (e.g. water) ☐101-500 cps (e.g. motor oil) ☐501-10,000 cps ☐>10,000 cps (e.g. molasses)
3. **Odor:** ☐None ☐Slight ☐Strong **Odor Type:** ☐Ammonia ☐Amines ☐Mercaptans ☐Sulphur Organic Acid
   Other, **Describe:** _____
4. **Physical State:** *(at 20°C)* ☐Solid ☐Dust/Powder ☐Debris ☐Sludge/Slurry ☐Liquid ☐Gas/Aerosol ☐Varies
5. **Specific Gravity:** ☐<0.8 g/ml ☐0.8-1.0 g/ml ☐1.0 g/ml ☐1.0-1.2 g/ml ☐>1.2 g/ml ☐Actual: _____
6. **Color:** _____ 7. **Liquid phases:** ☐Single ☐Double Layer ☐Multi-layer ☐N/A
8. **Is it solid based on a slump test?** ☐Yes *(Solid)* ☐No *(Not Solid)*
   Is there a possibility of incidental liquids from transportation? ☐Yes ☐No
9. **pH:** *(If solid, provide estimated pH if mixed 50:50 with water)* ☐≤ 2 ☐2.1 - 4.9 ☐5 - 10 ☐10.1 - 12.4 ☐≥ 12.5
10. **Flash Point:** _____**°C** and/or ☐ <32°C ☐ 32 - 61°C ☐ 62 - 93°C ☐ >93°C ☐ Does Not Flash ☐ Flammable Solid
    BTU /lb. Value: _____ and/or ☐ <5000 BTU ☐ ≥5000 BTU

11. Are there any known handling/treatment issues involving this material? *(i.e. Describe whether the waste stream has ever been the direct or suspected cause of a fire or other reaction, and whether there are any specific controls you use to prevent any adverse reactions?)*
☐ Yes ☐ No *If yes*, **Describe**:_____

E. CHARACTERIZATION & CHEMICAL COMPOSITION

1. US Ecology Customers - Waste/Material Type: ☐ Industrial ☐ Non-Industrial ☐ Spill-Residual ☐ N/A

2. Provincial Waste Codes:_____

3. Ministry of Environment Waste Management OREGS #347: _____
If None, is it exempt from the definition of "Solid Waste" or "Hazardous Waste"? ☐ Yes ☐ No
*If yes, list reference from Ministry of Environmental Waste Management OREGS #347:*_____

4. If F006-F009, F012, or F019, are Cyanides used in the process? ☐ Yes ☐ No *(If yes, Total and Amenable CN analysis required)*

5. Knowledge is from: ☐ Lab analysis *(Requires attachment)* ☐ SDS *(Requires attachment)* ☐ Process/generator knowledge

6. Chemical Composition *(Include all applicable UHC's Environment Canada NPRI, Hazardous Materials, etc.)*

Constituent	Units	TCLP	Totals	Typical	Min	Max	UHC	Exceeds LDR

F. ADDITIONAL PROPERTIES ☐ None Apply *(Through Question F23)*

1. Explosive: ☐ Yes ☐ No	**2. Reactive Sulfides:_____ ppm** ☐ Yes ☐ No
3. Shock Sensitive: ☐ Yes ☐ No	**4. Reactive Cyanides:_____ ppm** ☐ Yes ☐ No
5. Radioactive: ☐ Yes ☐ No *(If yes, complete Radioactive Waste Acceptance Supplement)*	**6. Reactive Other:** ☐ Yes ☐ No **Describe:**_____
7. NORM/TENORM ☐ Yes ☐ No	**8. PFAS/PFOS** ☐ Yes ☐ No
9. Medical/Infectious/Biohazard Waste: ☐ Yes ☐ No	**10. Polychlorinated Biphenyls (PCB):** ☐ Yes ☐ No *(If yes, complete PCB Supplement)*
11. Dioxins and/or Furans: ☐ Yes ☐ No	**12. Metal Fines/Powder/Paste:** ☐ Yes ☐ No *(Including Aluminum)*
13. Pyrophoric: ☐ Yes ☐ No	**14. Temperature Controlled:** ☐ Yes ☐ No *(For Transportation Only)*
15. Thermally Unstable: ☐ Yes ☐ No	**16. Biodegradable Sorbents:** ☐ Yes ☐ No
17. Compressed Gas: ☐ Yes ☐ No *(If yes, complete Compressed Gas Cylinder Supplement)*	**18. Used Oil:** (per 40 CFR Part 279) ☐ Yes ☐ No *(If yes, complete Used Oil Supplement)*
19. Oxidizer: *(List in Section E6)* ☐ Yes ☐ No	**20. Tires:** *(If yes, must be quartered for landfill)* ☐ Yes ☐ No
21. Organic Peroxide: ☐ Yes ☐ No	**22. Beryllium:** ☐ Yes ☐ No

23. Asbestos: ☐ Yes ☐ No **If Yes:** ☐ Non Friable ☐ Friable *(If friable, material must be packaged per 40 CFR Part 61.150)*

24. Ammonia/Ammonia Compounds: ☐ Yes ☐ No

25. Pesticides: ☐ Yes ☐ No *(If yes, please submit any analytical documents as needed or SDS.)*

26. Are pharmaceutical wastes profiled under this approval subject to a controlled substance? ☐ Yes ☐ No ☐ N/A
(If yes, make sure you submit a plan in order to proceed)

27. Is this waste regulated under the Ozone Depleteing Substance for Ontario? ☐ Yes ☐ No ☐ N/A

28. For Ontario, does this waste contain a designated substance (Occupational Health and Safety Act)? ☐ Ye ☐ No ☐ N/
A If so, list the designated substance here: _____

G. REGULATORY INFORMATION

1. Volatile Organic Concentration: ☐ <500 ppmw ☐ ≥500 ppmw

2. Has the material been treated after the initial point of generation? ☐ Yes ☐ No
If yes, **Describe:**_____
_____

3. If Hazardous, as defined by HWIN generator registration guidelines, select one of the following:
☐ Wastewater *WW=<1% TSS & TOC*
☐ Non-wastewater *TSS/TOC>WW*
☐ Alternative Treatment Standards for soil *> 50% soil*

☐ Alternative Treatment Standards for debris: *>50% of waste is >2.5 inch size*

☐ I confirm debris cannot reasonably be separated from non-debris by simple physical or mechanical means.

☐ I confirm debris has not been mixed/diluted with non-debris as prohibited.

☐ Waste meets LDR Treatment Standards

H. GENERATOR'S CERTIFICATION

1. **Is a specific facility or treatment technology requested?** ☐ Yes ☐ No
2. **Requested Technology:** _____

   _____
3. **Thermal processing:** ☐ Yes ☐ No *(If yes, complete Thermal Supplement)*
4. **Other specific restrictions requested:** _____

   _____

   _____
5. **Requested US Ecology Facility:** _____

   _____

☐ I certify that all information (including attachments) is complete, factual and is an accurate representation of the known and suspected hazards pertaining to waste/material described herein. I authorize US Ecology's personnel to add supplemental information to the Waste/Material Profile Form, provided I am contacted and grant permission to do so. US Ecology may require re-submittal of the Waste/Material Profile Form if substantial changes are determined necessary. I authorize US Ecology's personnel to obtain a sample from any waste/material shipment for purposes of verification and confirmation and understand that waste/material that does not conform to specifications described in this Waste/Material Profile Form may be rejected by US Ecology. I certify that I am familiar with the waste/material described herein through analysis and/or process knowledge and that all information is true, accurate, representative and complete and that this Waste/Material Profile Form was completed in accordance with the instructions provided.

If I am an agent acting on behalf of the generator, I also certify that I have permission to sign any and all waste/material characterization paperwork on the generator's behalf and that I can produce such certification in writing upon request.

Print Name: _____ **Signature:** _____

Title: _____ **Company:** _____

Date: _____

Internal Comments/Internal Approval: _____

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