



Process Approval Code: \_\_\_\_\_ Date (m/d/y) \_\_\_\_\_ Profile number: \_\_\_\_\_

**A. GENERAL INFORMATION**

GENERATOR ID # : _____		GENERATOR NAME: _____	
GENERATOR CODE (Assigned by ESI) : _____		WEB SITE ADDRESS _____	
ADDRESS _____		CITY: _____	PROVINCE: _____ Postal Code: _____
GENERATOR TECHNICAL CONTACT: _____		PHONE: _____	E-mail address: _____
CUSTOMER ID # (Assigned by ESI): _____		CUSTOMER NAME: _____	
ADDRESS _____		CITY; _____	PROVINCE: _____ Postal Code: _____

**B. WASTE DESCRIPTION**

WASTE NAME/DESCRIPTION: \_\_\_\_\_

PROCESS GENERATING WASTE (Please provide detailed description of process generating waste): \_\_\_\_\_

**C. PHYSICAL PROPERTIES (at 25 °C or 77°F)**

PHYSICAL STATE		NUMBER OF PHASES/LAYERS			VISCOSITY (If liquid present)		COLOUR				
<input type="checkbox"/>	SOLID WITHOUT FREE LIQUID	1	2	3	<input type="checkbox"/>	1 - 100 cps (e.g. water)					
<input type="checkbox"/>	POWDER	% BY VOLUME (Approx.)			<input type="checkbox"/>	101 - 500 cps (e.g. motor oil)					
<input type="checkbox"/>	MONOLITHIC SOLID				TOP				<input type="checkbox"/>	501 - 10,000 cps	
<input type="checkbox"/>	LIQUID WITH NO SOLIDS				MIDDLE				<input type="checkbox"/>	> 10,000 cps (e.g. molasses)	
<input type="checkbox"/>	LIQUID/SOLID MIXTURE	BOTTOM			<input type="checkbox"/>						
<input type="checkbox"/>	% FREE LIQUID	ODOUR			BOILING POINT		MELTING POINT		TOTAL ORGANIC CARBON		
<input type="checkbox"/>	% SETTLED SOLID	<input type="checkbox"/>			NONE	<input type="checkbox"/>	<= 35 °C	<input type="checkbox"/>	< 60 °C	<input type="checkbox"/>	<= 1%
<input type="checkbox"/>	% TOTAL SUSPENDED SOLID	<input type="checkbox"/>			MILD	<input type="checkbox"/>	> 35 °C	<input type="checkbox"/>	60 - 93 °C	<input type="checkbox"/>	1 - 9%
<input type="checkbox"/>	SLUDGE	<input type="checkbox"/>			STRONG	<input type="checkbox"/>	38 - 54 °C	<input type="checkbox"/>	> 93 °C	<input type="checkbox"/>	>= 10%
<input type="checkbox"/>	GAS/AEROSOL	Describe: _____			<input type="checkbox"/>	>= 55 °C					
FLASH POINT		pH		SPECIFIC GRAVITY		ASH		Heat Value			
<input type="checkbox"/>	< 25 °C	<input type="checkbox"/>	<= 2	<input type="checkbox"/>	< 0.8 g/ml	<input type="checkbox"/>	< 0.1 %w/w	<input type="checkbox"/>	< 4 MJ/kg		
<input type="checkbox"/>	25 - 45 °C	<input type="checkbox"/>	2.1 - 6.9	<input type="checkbox"/>	0.8-1.0 g/ml	<input type="checkbox"/>	0.1 - 1.0 % w/w	<input type="checkbox"/>	4 - 25 MJ/kg		
<input type="checkbox"/>	45 - 60 °C	<input type="checkbox"/>	7 (Neutral)	<input type="checkbox"/>	1.0 g/ml	<input type="checkbox"/>	1.1 - 5.0 % w/w	<input type="checkbox"/>	> 25 MJ/kg		
<input type="checkbox"/>	61 - 93 °C	<input type="checkbox"/>	7.1 - 12.4	<input type="checkbox"/>	1.0-1.2 g/ml	<input type="checkbox"/>	5.1 - 20.0 % w/w	<input type="checkbox"/>	Unknown		
<input type="checkbox"/>	> 93 °C	<input type="checkbox"/>	>= 12.5	<input type="checkbox"/>	> 1.2 g/ml	<input type="checkbox"/>	> 20 % w/w	<input type="checkbox"/>	Actual:		
<input type="checkbox"/>	Actual:	<input type="checkbox"/>	Actual:	<input type="checkbox"/>	Actual:	<input type="checkbox"/>	Unknown				
<input type="checkbox"/>	NA	for solids use a 1:1 ratio with water		<input type="checkbox"/>	Actual:	<input type="checkbox"/>	Actual:				
						VAPOUR PRESSURE (for liquids only)		mm Hg			

**D. COMPOSITION (List the complete composition of the waste, include any inert components and /or debris. Ranges for individual components are acceptable. If a trade name is used, please supply an MSDS. Please do not use abbreviations. )**

CHEMICAL	MIN - MAX	UOM	CHEMICAL	MIN - MAX	UOM

ANY METAL OBJECTs (Debris) PRESENT? YES  NO   
 If yes include dimension: \_\_\_\_\_

**E. HAZARDS**



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**DOES THIS WASTE HAVE ANY UNDISCLOSED HAZARDS OR PRIOR INCIDENTS ASSOCIATED WITH IT, WHICH COULD AFFECT THE WAY IT SHOULD BE HANDLED?**

YES \_\_\_\_\_ NO \_\_\_\_\_ (If yes, explain) \_\_\_\_\_

ASBESTOS	LDR Waste	REDUCING AGENT
REGULATED SUBSTANCES	OXIDIZER	SHOCK SENSITIVE
DIOXIN	OSHA REGULATED CARCINOGENS	SPONTANEOUSLY IGNITES WITH AIR
EXPLOSIVE	PESTICIDE	THERMALLY SENSITIVE
HERBICIDE	POLYMERIZABLE	WATER REACTIVE
FUMING / SMOKING WASTE	RADIOACTIVE	IGNITABLE SOLID
NONE OF THE ABOVE	INFECTIOUS, PATHOGENIC, OR ETIOLOGICAL AGENT	

**F. CONSTITUENTS** -- Enter values or ranges where known. If constituent concentrations are based on analytical testing, analysis must be provided. If based on knowledge, basis of knowledge must be provided in Section B.

558 Haz Waste #	REGULATED METALS	REG. Level (mg/l)	TCLP mg/l	TOTAL ppm	558 Haz Waste #	PESTICIDES, HERBICIDES and NON-VOLATILE	REG. Level (mg/l)	TCLP mg/l	TOTAL ppm
D004	ARSENIC	2.5			E018	PCBs	0.3		
D005	BARIUM	100			E001	ALDRIN / DIELDRIN	0.07		
E104	BORON	500			D020	CHLORDANE	0.7		
D006	CADMIUM	0.5			E008	DDT & METABOLITES	3.0		
D007	CHROMIUM	5.0			D016	2,4-D	10.0		
D008	LEAD	5.0			D012	ENDRIN	0.02		
D009	MERCURY	0.1			D031	HEPTACHLOR	0.3		
D010	SELENIUM	1.0			D013	HEPTACHLOR + HEPTACHLOR	0.4		
D011	SILVER	5.0			D014	LINDANE	90.0		
E126	URANIUM	10.0			D017	METHOXYCHLOR	5.0		
					E116	METOLACHLOR	0.5		
					D015	TOXAPHENE	1.0		
					D017	2,4,5-TP (SILVEX)	28.0		
					E020	2,4,5-Trichlorophenoxy Acid	0.9		
					E101	ALDICARB	0.5		
					E102	ATRAZINE ( Weedex)	2.0		
					E103	AZINPHOS-METHYL(Guthi	4.0		
					E002	BENDIOCARB	9.0		
					E004	CARBARYL	9.0		
					E005	CARBOFURAN	9.0		
					E106	CHLORPHYRIFOS	1.0		
					E107	CYANAZINE	2.0		
					E108	DIAZINON	12.0		
					E109	DICAMBA	0.9		
					E110	DICLOFOP-METHYL	2.0		
					E111	DIMETHOATE	1.0		
					E102	DINOSEB	1.5 ( ppt)		
					E013	DIOXINS & FURANS	7.0		
					E112	DIQUAT	15.0		
					E113	DIURON	28.0		
					E114	GLYPHOSATE	19.0		
					E115	MALATHION	0.7		
					E015	METHYL PARATHION	8.0		
					E117	METRIBUZIN	0.0009		
					E016	NDMA(Nitrosodimethylamir	40.0		
					E119	NTA (Nitrilotriacetic Acid)	1.0		
					E120	PARAQUAT	5.0		
					E017	PARATHION	0.2		
					E109	PHORATE	19.0		
					E121	PICLORAM	1.0		
					E122	SIMAZINE			



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D038	PYRIDINE	5.0			E123	TEMEPHOS	28.0	
D041	2,4,5-TRICHLOROPHENOL	400			E124	TERBUFOS	0.1	
D042	2,4,6-TRICHLOROPHENOL	0.5			E022	TRIALATE	23.0	
E021	2,3,4,6-TETRACHLOROPHENC	10			E125	TRIFLURALIN	4.5	

558 Haz Waste #	INORGANICS	REG. Level (mg/l)	TCLP mg/l	TOTAL ppm
E006	CYANIDE (free)	20		
E014	FLUORIDE	150		
E118	NITRATE + NITRITE (as N)	1000		

G. OTHER NON-METALS		ACTUAL	MIN	MAX	UOM	VHCs	ARE PCBS PRESENT?:			
558 Haz Waste #	AMMONIA		0.00	0.00		NONE		YES	<input type="checkbox"/>	NO
D003	REACTIVE CYANIDE		0.00	0.00		< 1000 PPM		NONE		
D003	REACTIVE SULFIDE		0.00	0.00		> 1001 PPM		<50 PPM		
	TOTAL SULFIDE		0.00	0.00		> 2.0 % w/w		>= 50 PPM		
	TOTAL CYANIDE		0.00	0.00		ACTUAL		ACTUAL		
	BROMINE		0.00	0.00		<b>H. OTHER CHEMICALS</b>				
	CHLORIDE		0.00	0.00			ACTUAL	MIN	MAX	UOM
	FLUORIDE		0.00	0.00		PHENOL		0.00	0.00	
	SULFUR		0.00	0.00		TOTAL PETROLEUM HYDROCARBONS		0.00	0.00	

H. REGULATORY STATUS			
YES		NO	PROVINCIAL HAZARDOUS / SPECIAL WASTE? IF YES, LIST HAZARDOUS WASTE CODES BELOW FOR ONTARIO IDENTIFY WASTE CLASS CODE
YES		NO	REGULATED OR LICENSSED RADIOACTIVE WASTE?
YES		NO	REGULATED PCB WASTE? (List PCB level in Section G.)
YES		NO	IF REACTIVE CYANIDE OR REACTIVE SULFIDE, List levels in section G.
YES		NO	IS THIS WASTE REGULATED UNDER THE OZONE DEPLETING SUBSTANCE FOR ONTARIO?
YES		NO	FOR ONTARIO, DOES THIS WASTE CONTAIN A DESIGNATED SUBSTANCE (Occupational Health and Safety Act)? If so please the designated substance below.
YES		NO	DOES THIS WASTE CONTAIN VOC'S IN CONCENTRAIONS >= 500 PPM?

**I. MAIN LISTING INFORMATION:** (include proper provincial WASTE CODE CLASSIFICATION, transportation dangerous goods shipping name, hazard class, ID number and packing group)

Provincial WCC (numbers and letters)	Shipping Name (proper name in lower case and the technical constituents in upper case):	Class/Sub(s)	UN No.	Packing group No.

Emergency contact information

Special Handling Instruction:

**J. TRANSPORTATION REQUIREMENTS**

ESTIMATED SHIPMENT FREQUENCY:

<input type="checkbox"/>	ONE TIME	<input type="checkbox"/>	WEEKLY	<input type="checkbox"/>	MONTHLY	<input type="checkbox"/>	QUARTERLY	<input type="checkbox"/>	YEARLY	<input type="checkbox"/>	OTHER
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IF BULK LIQUID OR BULK SOLID PLEASE INDICATE THE EXPECTED NUMBER OF LOADS PER SHIPPING FREQUENCY:

CONTAINERIZED		BULK LIQUID		BULK SOLID	
CONTAINERS/SHIPMENT		LOAD SIZE:	<input type="text"/>	SHIPMENT UOM:	
STORAGE CAPACITY:	<input type="text"/>	FROM TANK (SIZE)	<input type="text"/>	<input type="text"/>	TONNE (TNE) <input type="text"/>
CONTAINER TYPE:	<input type="text"/>	FROM DRUMS	<input type="text"/>	PER SHIPMENT:	<input type="text"/>
CUBIC YARD BOX	<input type="text"/>	VEHICLE TYPE:	<input type="text"/>	<input type="text"/>	MIN <input type="text"/>
PALLET	<input type="text"/>	VAC TRUCK	<input type="text"/>	STORAGE CAPACITY	<input type="text"/>
TOTE TANK	<input type="text"/>	TANK TRUCK	<input type="text"/>	VEHICLE TYPE:	<input type="text"/>
					MAX <input type="text"/>
					TNE or M <sup>3</sup>



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OTHER		RAILROAD TANK CAR			DUMP TRAILER
DRUM SIZE:		OTHER			ROLL OFF BOX
CONTAINER MATERIAL:		CHECK COMPATIBLE STORAGE MATERIALS.			INTERMODAL BOX
STEEL		STEEL		STAINLESS STEEL	LUGGER
FIBER		RUBBER LINED		FIBERGLASS LINED	VACTOR
PLASTIC		DERAKANE			OTHER
OTHER		OTHER			

**K. SPECIAL REQUEST**

SPECIFIC DISPOSAL RESTRICTIONS OR REQUESTS: \_\_\_\_\_

SPECIAL WASTE HANDLING REQUIREMENTS: \_\_\_\_\_

OTHER COMMENTS OR REQUESTS: \_\_\_\_\_

**L. BIENNIAL/ANNUAL REPORTING INFORMATION**

NPRI: \_\_\_\_\_

**M. SAMPLE STATUS**

REPRESENTATIVE SAMPLE HAS BEEN SUPPLIED. YES  NO  NUMBER OF SAMPLES: \_\_\_\_\_

SAMPLED BY: \_\_\_\_\_ DATE SAMPLED: \_\_\_\_\_ SENT WHERE: \_\_\_\_\_

**N. GENERATORS CERTIFICATION**

I hereby certify that all information submitted in this and attached documents is correct to the best of my knowledge. I also certify that any samples submitted are representative of the actual waste. I certify that containers that I supply conforms to Transport Canada's Regulations. If Environmental Services Inc. discovers a discrepancy during the approval process, Generator grants Environmental Services Inc. the authority to amend the profile, as Environmental Services Inc. deems necessary, to reflect the discrepancy.

AUTHORIZED SIGNATURE	NAME (PRINT)	TITLE	DATE

**FOR Environmental Services Inc. USE ONLY**

ESI REPRESENTATIVE COMPLETING PROFILE: \_\_\_\_\_