



MOOSE CREEK THERMAL TREATMENT WASTE ACCEPTANCE INSTRUCTIONS

In accordance with US Ecology/NRC's QA/QC Management Acceptance Plan, prior to acceptance of any hydrocarbon and/or PFAS contaminated materials, laboratory documents identifying the contaminated materials and analytical test results must be submitted to US Ecology/NRC. These documents should show ADEC established procedures and include, but not be limited to:

- The name of the testing laboratory and responsible person
- Analytical methods
- Sampling procedures
- Quality assurance procedures
- Data reporting (analytical results and levels)
- Specific information on site history

REQUIRED INFORMATION

For material to be accepted by US Ecology/NRC for thermal treatment, the following forms must be completed, and information provided:

- Certification of RCRA Exempt Status
- Waste Analysis Form
- Analytical test results
- A.D.E.C. Transport Approval Form
- Customer Information

SUBMITTING INFORMATION FOR REVIEW AND ACCEPTANCE

- Email completed forms described above, and analytical data to NRCAKMooseCreek@nrcc.com. Please feel free to call (907) 488-4899 if you have any questions.
- Information provided will be reviewed within 2 business days. An acceptance determination will be made as soon as possible.
- Material accepted for treatment must accompany a US Ecology/NRC personnel signed APPROVED MATERIAL DROP-OFF RELEASE form upon delivery to the Moose Creek Thermal Treatment Facility. Material delivered without this form will not be accepted.



US ECOLOGY/NRC PROJECT NUMBER:	_____
PROFILE NUMBER:	_____
ENVIROWARE NUMBER:	_____

CERTIFICATION OF RCRA EXEMPT STATUS

GENERATOR'S NAME: _____

SITE NAME: _____

SITE ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

Generator, or legally authorized representative (Consultant/Advisor), hereby certifies that material presented to US Ecology/NRC for treatment from the above referenced site is RCRA (Resource Conservation and Recovery Act) exempt waste and does not meet the definition of hazardous waste under the applicable code of Federal and State Regulations.

Generator, or legally authorized representative (Consultant/Advisor), further agree to indemnify US Ecology/NRC LLC. for any liability that may be incurred as a result of the material presented for treatment being classified as a RCRA hazardous waste, including but not limited to indemnification for cost of proper disposal and any fines or penalties imposed by any local, State, or Federal agencies.

Signature of generator or legally authorized representative is required.

Generator Representative Name

Generator Representative Signature

Title

Mailing Address

City/State/Zip Code

Phone Number

Date

Consultant/Advisor Name

Consultant Advisor Signature

Title

Mailing Address

City/State/Zip Code

Phone Number

Date



US ECOLOGY/NRC PROJECT NUMBER: _____
PROFILE NUMBER: _____
ENVIROWARE NUMBER: _____

WASTE ANALYSIS FORM

GENERATOR INFORMATION

PHYSICAL/SITE ADDRESS

GENERATOR NAME: _____	EPA ID#: _____	
PHYSICAL ADDRESS: _____		
CITY: _____	STATE: _____	ZIP CODE: _____
CONTACT PERSON: _____	EMERGENCY PHONE #: _____	

MAILING ADDRESS

GENERATOR NAME: _____		
MAILING ADDRESS: _____		
CITY: _____	STATE: _____	ZIP CODE: _____
CONTACT PERSON: _____	EMERGENCY PHONE #: _____	

GENERATOR'S AUTHORIZED REPRESENTATIVE (CONSULTANT/ADVISOR)

COMPANY NAME: _____		
MAILING ADDRESS: _____		
CITY: _____	STATE: _____	ZIP CODE: _____
CONTACT PERSON: _____	EMERGENCY PHONE #: _____	



US ECOLOGY/NRC PROJECT NUMBER: _____
 PROFILE NUMBER: _____
 ENVIROWARE NUMBER: _____

WASTE INFORMATION

VOLUME OF MATERIAL & CONTAINMENT

TONS	CY BAGS	DRUMS	GALLONS	OTHER (describe)
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GENERAL DESCRIPTION OF WASTE

Date Generated: _____ Date of Spill (if applicable) _____

Location of material: _____

Source of contamination: _____
 (U.S.T., Surface Spill, Routine Maintenance, etc.)

Description of material: _____
 (gravel, soil, sand, silt, shop rags, floor dry, sludge, etc..)

Physical Composition:

- Dry soil, less than 5% organics Dry soil, greater than 5% organics % Fines __ % Debris _____
 Moist soil, no free liquids Wet soil, with free liquids Soft loose mud/sludge

Test results provided? If yes, check test performed and attach laboratory results.

- DRO RRO GRO BTEX VOCs SVOCs RCRA Metals Other _____

Is ADEC approval for removal and transportation of soils related to an ADEC approved cleanup plan, or a site overseen by ADEC spill response program required? YES NO

Does the material contain or is it mixed with a listed hazardous waste as described in 40 CFR 261 Subpart D (40 CFR 261.31-33)? YES NO

If claiming a specific RCRA exemption, please site exemption. _____

Provide a brief description of the site history related to contaminated materials. _____

Comments: _____

I hereby certify that all information provided, and all attached documents are complete, accurate, and disclose all known or suspected hazards. I acknowledge that if the material varies from the information provided herein, additional charges for testing, handling, treatment, surcharges or other fees may be imposed.

 Authorized Signature Title Date



US ECOLOGY/NRC PROJECT NUMBER: _____
PROFILE NUMBER: _____
ENVIROWARE NUMBER: _____

CUSTOMER INFORMATION

BILLING INFORMATION

Company Name:		Date
Contact Name:	Phone Number:	
Address:		
City:	State:	Zip Code:
P.O. Number / Project Number:		
Email:		

CERTIFICATE OF TREATMENT

Mailing address for Certificate of Treatment if other than Generator's mailing address on Waste Acceptance Form.

Company Name:		Date
Contact Name:	Phone Number:	
Address:		
City:	State:	Zip Code:
P.O. Number / Project Number:		
Email:		



**ALASKA DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SPILL PREVENTION AND RESPONSE
Contaminated Sites and Prevention Preparedness and Response Programs**

Contaminated Media Transport and Treatment or Disposal Approval Form

DEC HAZARD/SPILL ID #		NAME OF CONTAMINATED SITE OR SPILL	
CONTAMINATED SITE OR SPILL LOCATION – ADDRESS OR OTHER APPROPRIATE DESCRIPTION			
CURRENT PHYSICAL LOCATION OF MEDIA		SOURCE OF THE CONTAMINATION (DAY TANK, WASH BAY, FIRE TRAINING PIT, LUST, ETC.)	
CONTAMINANTS OF CONCERN		ESTIMATED VOLUME	DATE(S) GENERATED
POST TREATMENT ANALYSIS REQUIRED <i>(such as GRO, DRO, RRO, VOCs, metals, PFAS, and/or Chlorinated Solvents)</i>			
COMMENTS OR OTHER IMPORTANT INFORMATION			

TREATMENT FACILITY, LANDFILL, AND/OR FINAL DESTINATION OF MEDIA	PHYSICAL ADDRESS/PHONE NUMBER
RESPONSIBLE PARTY	ADDRESS/PHONE NUMBER
WASTE MANAGEMENT CO. / ORGANIZER	ADDRESS/PHONE NUMBER

***Note, disposal of polluted soil in a landfill requires prior approval from the landfill operator and ADEC Solid Waste Program.**

_____ Name of the Person Requesting Approval (printed)	_____ Title/Association
_____ Signature	_____ Date
	_____ Phone Number

-----**DEC USE ONLY**-----

Based on the information provided, ADEC approves transport of the above mentioned material. The Responsible Party or their consultant must submit to the DEC Project Manager a copy of weight receipts of the loads transported and a post treatment analytical report, if disposed of at an approved treatment facility. The contaminated soil shall be transported as a covered load in compliance with 18 AAC 60.015.

_____ DEC Project Manager Name (printed)	_____ Project Manager Title
_____ Signature	_____ Date
	_____ Phone Number