



**CHEMTRON CORPORATION**  
 35850 Schneider Court – Avon, OH 44011  
 Phone: (440) 937-6348  
 Fax: (440) 937-6845 or (440) 937-1038  
 24 Hr. ER: (440) 937-5950  
 EPA ID #: OHD066060609



TCLP (If available, please attach to profile)  
 Generator's Knowledge  
 Sales Rep: \_\_\_\_\_

**GENERATOR INFORMATION:**

Company Name: \_\_\_\_\_  
 Contact Person & Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 EPA ID#: \_\_\_\_\_ Email Address: \_\_\_\_\_

**BILLING INFORMATION:**

Company Name: \_\_\_\_\_  SAME AS ABOVE  
 Contact Person & Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**WASTE INFORMATION:**

Generator's Common Name: \_\_\_\_\_  
 EPA Hazardous Waste # (s): \_\_\_\_\_  
 DOT Shipping Description: \_\_\_\_\_  
 DOT Hazard Class: \_\_\_\_\_ P.G.: I II III UN/NA#: \_\_\_\_\_  
 Process Generating Waste: \_\_\_\_\_

Quantity: \_\_\_\_\_ Units: \_\_\_\_\_ Shipped Per: \_\_\_\_\_

Are there smaller containers inside larger containers **WITHOUT** absorbant ?(Loose Pack)?  Y  N  
 Are there smaller containers inside larger containers **WITH** absorbant ?(Lab Pack)?  Y  N

**CHEMICAL COMPOSITION:**

Please list **COMPLETE CHEMICAL COMPOSITION**.

In addition, please indicate whether each constituent listed is a Toxic Chemical as defined in the Toxic Chemical Release Inventory (Form R),

Form R		Constituents	Range
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		
<input type="checkbox"/> Y	<input type="checkbox"/> N		

Source Code: \_\_\_\_\_ Form Code: \_\_\_\_\_ System Code: \_\_\_\_\_

<b>Does this waste meet the definition of a Hazardous Waste per 40 CFR 261?</b>			
<b>F Listed:</b> <input type="checkbox"/> Y <input type="checkbox"/> N	<b>K Listed:</b> <input type="checkbox"/> Y <input type="checkbox"/> N	<b>P Listed:</b> <input type="checkbox"/> Y <input type="checkbox"/> N	<b>U Listed:</b> <input type="checkbox"/> Y <input type="checkbox"/> N

<b>Physical state at 70 °F:</b> <input type="checkbox"/> Liquid <input type="checkbox"/> Sludge <input type="checkbox"/> Semisolid <input type="checkbox"/> Solid Without Free Liquid <input type="checkbox"/> Powder <input type="checkbox"/> Monolithic Solid <input type="checkbox"/> Liquid/Solid Mixture % Free Liquid _____ % Settled Solids _____ % Total Suspended Solids _____ <input type="checkbox"/> Aerosol <input type="checkbox"/> Other (describe) _____ _____	<b>Number of Phases/Layers</b> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> ≥ 4 % By Volume (Approx.) Top _____ Middle _____ Bottom _____	<b>Odor</b> <input type="checkbox"/> None <input type="checkbox"/> Mild <input type="checkbox"/> Strong Describe: _____	<b>Color</b>   
pH <input type="checkbox"/> ≤ 2 <input type="checkbox"/> 2.1 – 6.9 <input type="checkbox"/> 7 (Neutral) <input type="checkbox"/> 7.1 – 12.4 <input type="checkbox"/> ≥12.5 <input type="checkbox"/> N/A (Organic) <input type="checkbox"/> Other/Exact _____	<b>Flash Point (°F)</b> <input type="checkbox"/> ≤ 140 <input type="checkbox"/> 140.1 – 200 <input type="checkbox"/> > 200 EXACT: _____	<b>Specific Gravity</b> <input type="checkbox"/> ≤ 0.8 (e.g. Gasoline) <input type="checkbox"/> 0.8 – 1.0 (e.g. Ethanol) <input type="checkbox"/> 1.0 (e.g. Water) <input type="checkbox"/> 1.0 – 1.2 (e.g. Antifreeze) <input type="checkbox"/> ≥ 1.2 (e.g. Methylene Chloride) <input type="checkbox"/> N/A (Solid)	<b>BTU / lb</b> <input type="checkbox"/> < 2000 <input type="checkbox"/> 2000 - 5000 <input type="checkbox"/> 5000 - 10000 <input type="checkbox"/> > 10000
<b>Other Characteristics</b> Explosive <input type="checkbox"/> Y <input type="checkbox"/> N    Shock Sensitive <input type="checkbox"/> Y <input type="checkbox"/> N    Water Reactive <input type="checkbox"/> Y <input type="checkbox"/> N    Pyrophoric <input type="checkbox"/> Y <input type="checkbox"/> N			
Halogens as Chlorine _____ % <input type="checkbox"/> ppm		Fluorine _____ % <input type="checkbox"/> ppm	
Isocyanates _____ % <input type="checkbox"/> ppm		Cyanide _____ % <input type="checkbox"/> ppm	
		Sulfur _____ % <input type="checkbox"/> ppm	
		Sulfide _____ % <input type="checkbox"/> ppm	

<b>EPA HW#</b>	<b>Contaminant</b>	<b>Reg. Level</b>	
D001	Ignitable	< 140 F; Oxidizer	<input type="checkbox"/> Y <input type="checkbox"/> N
D002	Corrosive	pH<2	<input type="checkbox"/> Y <input type="checkbox"/> N
D002	Corrosive	pH>12.5	<input type="checkbox"/> Y <input type="checkbox"/> N
D003	Reactive (see "D003- RCRA REACTIVITY" note @ bottom of this sheet)		

<b>METAL CHARACTERISTICS:</b>		<b>Reg. Level</b>			<b>Concentration</b>
D004	Arsenic	mg/kg	<	≥	_____
D005	Barium	5.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D006	Cadmium	100.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D007	Chromium	1.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D008	Chromium	5.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D008	Lead	5.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D009	Mercury	<0.2 <input type="checkbox"/>	0.2-259 <input type="checkbox"/>	≥260 <input type="checkbox"/>	_____
D010	Selenium	1.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D011	Silver	5.0	<input type="checkbox"/>	<input type="checkbox"/>	_____

<b>ORGANIC CHARACTERISTICS:</b>					
D012	Endrin	0.02	<input type="checkbox"/>	<input type="checkbox"/>	_____
D013	Lindane	0.4	<input type="checkbox"/>	<input type="checkbox"/>	_____
D014	Methoxychlor	10.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D015	Toxaphene	0.5	<input type="checkbox"/>	<input type="checkbox"/>	_____
D016	2,4-Dichlorophenoxyacetic Acid	10.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D017	2, 4, 5-TP-(Silvex)	1.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D018	Benzene	0.5	<input type="checkbox"/>	<input type="checkbox"/>	_____
D019	Carbon Tetrachloride	0.5	<input type="checkbox"/>	<input type="checkbox"/>	_____
D020	Chlordane	0.03	<input type="checkbox"/>	<input type="checkbox"/>	_____
D021	Chlorobenzene	100.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D022	Chloroform	6.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D023	o-Cresol	200.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D024	m-Cresol	200.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D025	p-Cresol	200.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D026	Cresol	200.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D027	1, 4-Dichlorobenzene	7.5	<input type="checkbox"/>	<input type="checkbox"/>	_____
D028	1, 2-Dichloroethane	0.5	<input type="checkbox"/>	<input type="checkbox"/>	_____
D029	1, 1-Dichloroethylene	0.7	<input type="checkbox"/>	<input type="checkbox"/>	_____
D030	2, 4-Dinitrotoluene	0.13	<input type="checkbox"/>	<input type="checkbox"/>	_____
D031	Heptachlor	0.008	<input type="checkbox"/>	<input type="checkbox"/>	_____
D032	Hexachlorobenzene	0.13	<input type="checkbox"/>	<input type="checkbox"/>	_____
D033	Hexachlorobutadiene	0.5	<input type="checkbox"/>	<input type="checkbox"/>	_____
D034	Hexachloroethane	3.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D035	Methyl Ethyl Ketone	200.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D036	Nitrobenzene	2.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D037	Pentachlorophenol	100.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D038	Pyridine	5.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D039	Tetrachloroethylene	0.7	<input type="checkbox"/>	<input type="checkbox"/>	_____
D040	Trichloroethylene	0.5	<input type="checkbox"/>	<input type="checkbox"/>	_____
D041	2, 4, 5-Trichlorophenol	400.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D042	2, 4, 6-Trichlorophenol	2.0	<input type="checkbox"/>	<input type="checkbox"/>	_____
D043	Vinyl Chloride	0.2	<input type="checkbox"/>	<input type="checkbox"/>	_____
Beryllium _____					
Aluminum (metallic) _____					
Magnesium (metallic) _____					

## CHEMTRON USE ONLY

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**Approval Notes:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Account Number:** \_\_\_\_\_  
**Price Code:** \_\_\_\_\_

**Approval Code:    Liquid:** \_\_\_\_\_  
**Sludge:** \_\_\_\_\_  
**Solid:** \_\_\_\_\_

**Pricing:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Profile Notes:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>DOES THE WASTE CONTAIN ANY OF THE FOLLOWING:</b> Halogenated Aromatics (PCB, PBB); Aromatic Amines; Urea; Thiorea, Cyclic Nitrogen (e.g. Pyridine, Quinones, Phosphorus Compounds, Polycyclic Organics; Asbestos, Radioactive Material); Biological Materials; Infectious Agents; Phenols: <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, attach detailed explanation.)
<b>D003 - RCRA REACTIVITY:</b> Does the waste meet the definition/characteristics of a D003 RCRA reactive waste, as defined in 40 CFR 261.23 (Ohio Administrative Code 3745-51-23)? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, attach detailed explanation.)
<b>IF THE WASTE CONTAINS USED OIL:</b> Has the used oil been mixed with halogenated hazardous waste listed in 40 CFR 261.30 through 261.35 (Ohio Administrative Code 3745-51-30 through 3745-51-35)? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, attach detailed explanation.)

I hereby certify that I have personally examined and am familiar with the information submitted in this and all attached documents. Based upon my inquiry of those immediately responsible for this information, I believe the submitted information is true, accurate and complete to the best of my knowledge and that all known and suspected hazards have been disclosed in accordance with 40CFR 261.

\_\_\_\_\_  
 Signature Title Date