



today's
waste
Environmental Services
tomorrow's
resources

global
sourcing
Oil and Chemical Trading
universal
satisfaction

GTI Waste Profile

**P.O. Box 1269
Madison, NJ 07940
Ph: (973)-630-0990
Fax: (973)-630-0991**

Please use this profile for your hazardous or non-hazardous wastestreams. If you need help filling in this profile, or have any questions, please feel free to call toll free at 877-536-5541.

Please print out this form, fill out and fax.

SECTION 1 OF 6: GENERAL INFORMATION

Generator Name: _____

U.S. EPA ID#: _____

State ID#: _____

LOCATION ADDRESS

Address: _____

Address 2: _____

City: _____

State: _____ Zip Code: _____

Phone: _____

Fax: _____

Technical Contact: _____

E-mail: _____

MAILING ADDRESS

Address: _____

Address 2: _____

City: _____

State: _____ Zip Code: _____

Phone: _____

Fax: _____

BILLING ADDRESS

Address: _____

Address 2: _____

City: _____

State: _____ Zip Code: _____

Phone: _____

Fax: _____

SITE ADDRESS (IF DIFFERENT):

Address: _____

Address 2: _____

City: _____

State: _____ Zip Code: _____

Phone: _____

Fax: _____

MATERIAL INFORMATION

Material Name: _____

Detailed Description of process generating waste: _____

Anticipated volume: _____ Daily: Weekly: Monthly: Yearly: One time only:

Drum:

Size: 5 gal. 15 gal. 30 gal. 55 gal. 85 gal. 110 gal. Other: _____

Bulk: Roll-Off:

Size: 10 yds. 20 yds. 30 yds. 40 yds. Other: _____

Dump Trailer: Tanker: Other (Describe): _____

SECTION 2 OF 6: MATERIAL COMPOSITION

Component	Concentration			Unit of Measure		
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>
_____	Min: _____	Max: _____	Actual: _____	PPM: <input type="radio"/>	PPB: <input type="radio"/>	% of weight: <input type="radio"/>

SECTION 3 OF 6: CHARACTERISTICS

Please specify **Yes** or **No** to each question.

- Does waste exhibit the characteristic of ignitability as defined in 40 CFR 261.21? Yes No
- Does waste exhibit the characteristics of corrosivity as defined in 40 CFR 261.22? Yes No
- Does waste exhibit the characteristic of reactivity as defined in 40 CFR 261.23? Yes No
- Is waste a spent solvent as defined in 40 CFR 261.31? Yes No
- Is waste a discarded chemical product, off spec, container or spill residues as defined in 40 CFR 261.33? Yes No

Physical State: Solid Semi-Solid Liquid Gas
 Pumpable Pourable Dumpable

Free Liquid: Yes No

Viscosity: Low Medium High

Layers: Single Bi-Layered Multi

Odor: None Mild Strong

Flash Point: <73°F 73-100° F100-140°F
 140-200°F >200°F

Ash: _____%

Sulfur: _____%

Halogens:(Cl,F,Br,I,At) _____%

pH: <2 2-5 5-9 9-12.5 >12.5
 Actual pH (if known): _____

Density: _____ (lb. / gal.)

BTU / lb.: _____

Warnings Explosive Dioxin Bearing Radioactive
 Shock Sensitive Reactive Sulfides PCB
 Biological Reactive Cyanide Pyrophoric
 Water Reactive Pesticides

SECTION 4 OF 6: CHARACTERISTICS

DOT Hazardous Material: Yes No

Proper Shipping Name: _____

Hazard Class and Division: _____

UN or NA: _____

Packing Group: I II III

RQ: No Yes If Yes: _____

N.O.S. Information: _____

USEPA Hazardous Waste: Yes No Waste Codes: _____

State Hazardous Waste: Yes No State Codes: _____

ERG#: _____

Additional Information: _____

SECTION 5 OF 6: CHARACTERISTICS

Indicate if this waste contains any of the following characteristics as defined by 40 CFR 261.24.

Toxicity Table

	Constituent	RegLevel PPM	TCLP PPM	Above Reg Level	Below Reg Level
D004	Arsenic	5.0	<5.0	<input type="radio"/>	<input type="radio"/>
D005	Barium	100.0	<100.0	<input type="radio"/>	<input type="radio"/>
D006	Cadmium	1.5	<1.0	<input type="radio"/>	<input type="radio"/>
D007	Chromium	5.0	<5.0	<input type="radio"/>	<input type="radio"/>
D008	Lead	5.0	<5.0	<input type="radio"/>	<input type="radio"/>
D009	Mercury	0.02	<0.02	<input type="radio"/>	<input type="radio"/>
D010	Selenium	1.0	<1.0	<input type="radio"/>	<input type="radio"/>
D011	Silver	5.0	<5.0	<input type="radio"/>	<input type="radio"/>
D012	Endrin	0.02	<0.02	<input type="radio"/>	<input type="radio"/>
D013	Lindane	0.4	<0.4	<input type="radio"/>	<input type="radio"/>
D014	Methoxychlor	10.0	<10.0	<input type="radio"/>	<input type="radio"/>
D015	Toxaphene	0.5	<0.5	<input type="radio"/>	<input type="radio"/>
D016	2,4-Dichlorophenoxyacetic Acid	10.0	<10.0	<input type="radio"/>	<input type="radio"/>
D017	2,4,5-TP (Silvex)	1.0	<1.0	<input type="radio"/>	<input type="radio"/>
D018	Benzene	0.5	<0.5	<input type="radio"/>	<input type="radio"/>
D019	Carbon Tetrachloride	0.5	<0.5	<input type="radio"/>	<input type="radio"/>
D020	Chlordane	0.03	<0.03	<input type="radio"/>	<input type="radio"/>
D021	Chlorobenzene	100	<100	<input type="radio"/>	<input type="radio"/>
D022	Chloroform	6.0	<6.0	<input type="radio"/>	<input type="radio"/>
D023	o-Cresol	200.0	<200.0	<input type="radio"/>	<input type="radio"/>
D024	m-Cresol	200.0	<200.0	<input type="radio"/>	<input type="radio"/>
D025	p-Cresol	200.0	<200.0	<input type="radio"/>	<input type="radio"/>
D026	Cresol	200.0	<200.0	<input type="radio"/>	<input type="radio"/>
D027	1,4-Dichlorobenzene	7.5	<7.5	<input type="radio"/>	<input type="radio"/>
D028	1,2-Dichloroethane	0.5	<0.5	<input type="radio"/>	<input type="radio"/>

SECTION 5 OF 6: CHARACTERISTICS - Continued.

Indicate if this waste contains any of the following characteristics as defined by 40 CFR 261.24.

Toxicity Table

	Constituent	RegLevel PPM	TCLP PPM	Above Reg Level	Below Reg Level
D029	1,1-Dichloroethylene	0.7	<0.7	<input type="radio"/>	<input type="radio"/>
D030	2,4-Dinitrotoluene	0.13	<0.13	<input type="radio"/>	<input type="radio"/>
D031	Heptachlor (and expoxide)	0.008	<0.008	<input type="radio"/>	<input type="radio"/>
D032	Hexachlorobenzene	0.13	<0.13	<input type="radio"/>	<input type="radio"/>
D033	Hexachlorobutadiene	0.5	<0.5	<input type="radio"/>	<input type="radio"/>
D034	Hexachloroethane	3.0	<3.0	<input type="radio"/>	<input type="radio"/>
D035	Methyl Ethyl Ketone	200.0	<200.0	<input type="radio"/>	<input type="radio"/>
D036	Nitrobenzene	2.0	<2.0	<input type="radio"/>	<input type="radio"/>
D037	Pentachlorophenol	100.0	<100.0	<input type="radio"/>	<input type="radio"/>
D038	Pyridine	5.0	<5.0	<input type="radio"/>	<input type="radio"/>
D039	Tetrachloroethylene	0.7	<0.7	<input type="radio"/>	<input type="radio"/>
D040	Trichloroethylene	0.5	<0.5	<input type="radio"/>	<input type="radio"/>
D041	2,4,5-Trichlorophenol	400.0	<400.0	<input type="radio"/>	<input type="radio"/>
D042	2,4,6-Trichlorophenol	2.0	<2.0	<input type="radio"/>	<input type="radio"/>
D043	Vinyl Chloride	0.2	<0.2	<input type="radio"/>	<input type="radio"/>

- Is a sample available? Yes No
- Is additional analytical data available? Yes No
- Above information is based on:
- Actual Testing
 - Generator Knowledge
 - Both

SECTION 6 OF 6: CERTIFICATION

I certify that this document was prepared by myself, or under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my own knowledge or inquiry of the person(s) who manage the systems, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information.

First Name: _____ Date: _____

Last Name: _____

Signature: _____