



New VALICOR INTERNAL USE ONLY
 Requalification ISOLATION YES NO

NAME OF WASTE STREAM	PROFILE/APPROVAL NUMBER

Designated Facility Inkster, MI Designated Facility Inkster, MI Solidification Reuse

GENERATOR SITE INFORMATION	BILLING INFORMATION
Generator Name	Billing Name
Site Contact Person	Contact Person
Site Address	Address
City	City
State	State
Zip	Zip
Phone	Phone
Fax	Fax
Email	Email
EPA ID # _____	PURCHASE ORDER REQUIRED: <input type="checkbox"/> YES # _____ <input type="checkbox"/> NO
DOT SHIPPING NAME: Transporter: <input type="checkbox"/> Valicor <input type="checkbox"/> Other	RCRA HAZARDOUS: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> EXEMPT
GENERATING PROCESS:	<input type="checkbox"/> Solids _____ %
	<input type="checkbox"/> Sludges _____ %
PHYSICAL CHARACTERISTICS:	<input type="checkbox"/> Free Liquids _____ %
	LAYERS: <input type="checkbox"/> Single-Layered <input type="checkbox"/> Bi-Layered <input type="checkbox"/> Multi-Layered
Infectious or Biological Waste: <input type="checkbox"/> Yes <input type="checkbox"/> No	VISCOSITY: <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
NRC Regulated Radioactivity: <input type="checkbox"/> Yes <input type="checkbox"/> No	COLOR/APPEARANCE:
Reactivity: <input type="checkbox"/> None <input type="checkbox"/> Water <input type="checkbox"/> Shock <input type="checkbox"/> Pyrophoric	
<input type="checkbox"/> Cyanides <input type="checkbox"/> Sulfides <input type="checkbox"/> DOT Explosive	PH: <input type="checkbox"/> N/A <input type="checkbox"/> 0-2.0 <input type="checkbox"/> 2.1-4 <input type="checkbox"/> 4.1-10 <input type="checkbox"/> 10.1-12.0 <input type="checkbox"/> ≥12.5
<input type="checkbox"/> Gas <input type="checkbox"/> Aerosol <input type="checkbox"/> Lab-Pack <input type="checkbox"/> Other	Exact: _____
ODOR: <input type="checkbox"/> None <input type="checkbox"/> Mild <input type="checkbox"/> Strong	FLASHPOINT: (liquid only) <input type="checkbox"/> <73°F <input type="checkbox"/> 73-140°F <input type="checkbox"/> 141-200°F <input type="checkbox"/> >200°F Exact:
Describe: _____	CWT CLASSIFICATION (40 CFR PART 437):
VOLUME & FREQUENCY: <input type="checkbox"/> DRUM <input type="checkbox"/> TOTE <input type="checkbox"/> BULK	
# Gallons _____; # Totes/Drums _____	<input type="checkbox"/> OIL SUBCATEGORY
<input type="checkbox"/> One Time <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Annually	• Used Oil • Coolants Oil • Water Mixture Contaminate • Ground Water
ADDITIONAL CHARACTERISTICS:	<input type="checkbox"/> METAL SUBCATEGORY
	• Waste acid and bases with or without metals • Metal finish rinse waters
Does this waste contain Polychlorinated Biphenyls (PCB)s? <input type="checkbox"/> YES <input type="checkbox"/> NO	• Cleaning, rinsing, and surface preparation solutions from electroplating or phosphating
Is this PCB waste regulated by TSCA? (PCB ≥ 50 ppm <input type="checkbox"/> YES <input type="checkbox"/> NO Or derived from a ≥ 50 ppm source)	<input type="checkbox"/> ORGANIC SUBCATEGORY
Is this waste derived from drilling or hydraulic fracking operations relating to the oil & gas industry? <input type="checkbox"/> YES <input type="checkbox"/> NO	• Landfill Leachate • Contaminated ground water from non-petroleum source
<i>If yes, is the material considered to be associated with UOG (unconventional Oil and Gas) Extraction wastewater ie, brine or flowback waters?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO	• Solvent bearing wastes • Off-Spec organic product • Wastewater from paint washes, adhesives, and/or epoxies
Is waste subject to the National Emissions standards for Benzene Waste Operations? (40 CFR 61 Subpart FF) <input type="checkbox"/> YES <input type="checkbox"/> NO	PHYSICAL/CHEMICAL CONSTITUENTS Attach all SDS, sample analysis and other information
Is this regulated as a marine pollutant? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Does the waste stream contain any known poly/per-fluorinated compounds? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, then complete PFAS certification)	

GENERATOR'S CERTIFICATION: I hereby certify that the above and attached description is complete and accurate to the best of my knowledge and ability to determine that no deliberate or willful omission of composition properties exists and that all known or suspected hazards have been disclosed. I certify that the materials tested are representative of all materials described by this profile. Also, I acknowledge that oil containing more than 1,000 ppm total halogens is presumed to be hazardous waste per 40 CFR279. However, that presumption can be rebutted by applying my knowledge of my halogen content of the used oil in light of the materials or processes used in my operations. To the best of my knowledge and belief, I certify to VALICOR that our used oils are generated from industrial usage and we do not mix hazardous waste with our oil. I understand that every time I and or another of our employees sign the non-hazardous manifest or bill of lading, we are re-certifying this rebuttal presumption. In addition, to the best of my knowledge and belief, all information on these forms is a complete and accurate representation of our waste stream(s). **I will notify VALICOR in ADVANCE of changes in the waste stream(s).**
 I will comply with all local, state, and federal regulations with regards to your waste stream(s).

Customer Signature _____ Title _____ Date _____
 Valicor Approval Signature _____ Title _____ Date _____