



# SAMPLE TREATABILITY FORM

Sample Name: \_\_\_\_\_

Customer: \_\_\_\_\_ Sales Rep: \_\_\_\_\_

Location: \_\_\_\_\_ CWT Classification: \_\_\_\_\_

Project Volume: \_\_\_\_\_ Frequency: \_\_\_\_\_

Sample Date: \_\_\_\_\_ Submission Date: \_\_\_\_\_

Sample to be submitted for analysis at off-site lab?

YES  NO  HOLD FOR REVIEW

Contractor Tank?

YES  NO

Process Generating this waste/material: \_\_\_\_\_

Physical Characteristics: \_\_\_\_\_

Notes/Comments:

## TREATABILITY RESULTS (Please check analyses needed)

pH \_\_\_\_\_  PCB, ppm \_\_\_\_\_  S, ppm \_\_\_\_\_  C1, ppm \_\_\_\_\_  FP, °F \_\_\_\_\_  Oil % \_\_\_\_\_  Water % \_\_\_\_\_

Solid % \_\_\_\_\_  Oxidizing Potential (+/-) \_\_\_\_\_  NH3, ppm \_\_\_\_\_  CO2, ppm \_\_\_\_\_

Reccomended treatment method: \_\_\_\_\_

Recommended plant location to treat: \_\_\_\_\_

Anticipated cost to treat: \_\_\_\_\_

Treatability performed by: \_\_\_\_\_

Results communicated to: \_\_\_\_\_

Additional comments: