



<b>Approval #:</b>  <p style="text-align: center; color: red;">(AERC Use Only)</p>
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**AERC Profile for Recycling of Hazardous Waste**  
 (Please type or print in ink)

Date Received:
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Waste Name/Description:	
Generator:	EPA ID #:
Shipping Address (Street, City, State, Zip):	
Generator Contact:	E-Mail Address:
Phone:	Fax:
Billing Information (Company, Street, City, State, Zip):	
Billing Contact:	E-Mail Address:
Phone:	Fax:
Process Generating Waste-Be Specific:	

**DOT/EPA Information**

<b>DOT Hazardous Material Basic Description:</b> Specify the <b>Identification Number</b> , the <b>Proper Shipping Name</b> , the <b>Hazard Class</b> and the <b>Packing Group</b>   ISHP					
RQ:	ERG#:	RCRA and/or State Waste Codes:	<input type="checkbox"/> N/A		
Physical Description of Waste:					

**Waste Material Characterization**

Chemical Composition – Constituents: (Must Account for 100%)	Total % (Range)	TCLP (mg/L)	TCLP (mg/L)	Specific (PPM or mg/L)	Constituents
				Antimony	
				Arsenic	
				Barium	
				Beryllium	
				Cadmium	
				Chromium	
				Copper	
				Cyanide	
				Lead	
				Mercury	
				Nickel	
				Nitrates	
				Organics	
				Selenium	
				Silver	
				Sulfates	
				Sulfide	
				Thallium	
				Vanadium	

<b>Halogens</b> <input type="checkbox"/> «2% <input type="checkbox"/> Cl <input type="checkbox"/> 2-5% <input type="checkbox"/> F <input type="checkbox"/> 5-10% <input type="checkbox"/> Br <input type="checkbox"/> 10-30% <input type="checkbox"/> I <input type="checkbox"/> »30% <input type="checkbox"/> Measured: _____	<b>Layers</b> <input type="checkbox"/> Multilayered <input type="checkbox"/> Bi-Layered <input type="checkbox"/> Single Phase  Color: _____	<b>Solids</b> <input type="checkbox"/> Suspended      % <input type="checkbox"/> Settleable      % <input type="checkbox"/> Dissolved      %  Color: _____	<b>Odor</b> <input type="checkbox"/> None <input type="checkbox"/> Mild <input type="checkbox"/> Strong  Describe: _____	<b>Physical State:</b> <input type="checkbox"/> Solid <input type="checkbox"/> Flowable Powder <input type="checkbox"/> Semisolid <input type="checkbox"/> Pumpable <input type="checkbox"/> Liquid  <b>Viscosity</b> <input type="checkbox"/> High (Syrup) <input type="checkbox"/> Medium (Oil) <input type="checkbox"/> Low Water  <input type="checkbox"/> Gas
<b>PH</b> <input type="checkbox"/> «2% <input type="checkbox"/> 2-5% <input type="checkbox"/> 5-9 <input type="checkbox"/> 9-12.5 <input type="checkbox"/> »12.5 <input type="checkbox"/> Exact _____ <input type="checkbox"/> N/A <input type="checkbox"/> Not Specified/Determined	<b>Specific Grav.</b> <input type="checkbox"/> <.8 <input type="checkbox"/> .8-1.0 <input type="checkbox"/> 1.0 <input type="checkbox"/> 1.0-1.2 <input type="checkbox"/> >1.2 <input type="checkbox"/> Measured: _____ <input type="checkbox"/> Not Specified/Determined	<b>Flash Point</b> <input type="checkbox"/> <80 <input type="checkbox"/> 80-100 <input type="checkbox"/> 101-140 <input type="checkbox"/> 141-200 <input type="checkbox"/> >200 <input type="checkbox"/> No Flash <input type="checkbox"/> Measured: _____ <input type="checkbox"/> Not Specified/Determined	BTU/LB _____ % ASH _____ Water Solubility _____	<b>Hazardous Characteristics (Potential or Known)</b> <input type="checkbox"/> Reactive Material – Specify: _____ <input type="checkbox"/> Radioactive <input type="checkbox"/> Explosive <input type="checkbox"/> Biohazard [Certificate of Sterilization/Disinfection <b>REQUIRED</b> ]

**Container Information:**

**Packaging:**

Present Container: \_\_\_\_\_

Shipping Container: \_\_\_\_\_

**Shipping Frequency:** Units: \_\_\_\_\_

UOM: \_\_\_\_\_

[e.g., Drums, Boxes, Totes, etc.]

Size

[Check One] | One Time \_\_ | Per Day \_\_ |  
 Per Wk \_\_ | Per Mth \_\_ | Per Qtr \_\_ | Per Yr \_\_

Other Description: \_\_\_\_\_

**Additional Information:**

Is this waste subject to subpart CC regulations (i.e. contains >500 ppm volatile organic compounds)?

<u>Yes</u>	<u>No</u>
<input type="checkbox"/>	<input type="checkbox"/>

Are there underlying hazardous constituents, other than mercury listed in 40CFR268.48?

<input type="checkbox"/>	<input type="checkbox"/>
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Does the waste contain >500 ppm of any 40CFR Part 261 Appendix VIII Constituents?

<input type="checkbox"/>	<input type="checkbox"/>
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If any of the above items were answered yes, explain below:

\_\_\_\_\_

**Add'l Comments:** \_\_\_\_\_

**Generator Certification:**

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

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print Name/Title

**TSDF Notification to the Generator:** *If approved for management, AERC.com, Inc., dba AERC Recycling Solutions, has all the appropriate permit(s) for, and will accept, the waste that has been characterized and identified by the Generator within this profile document.*

**Qtrly | Annual Reporting Information:**

NAICS   SIC Code(s):	Source Code:	Form Code:	Mgmt Method Code:	Module #:
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