

DRY CREEK LANDFILL, INC.

SPECIAL WASTE PROFILE FORM



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Office Use Only

Waste Permit No. _____

Date: _____

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GENERATOR INFORMATION

1. Generator's Name:

2. Generator's Mailing Address:

3. Name and Billing Address of Responsible Party:

Phone: _____ Email: _____

4. Alternate Contact Name and Phone

SPECIAL WASTE INFORMATION

The information in this section will be compared to DEQ and EPA regulatory standards for hazardous waste.

5. Process generating the waste: _____

6. Waste name and address generated: _____

7. Is this an EPA or State of Oregon hazardous waste? YES NO

8. Chemical composition: List all hazardous and nonhazardous constituents from laboratory test data:

Constituents	Concentration Range	Units	Constituents	Concentration Range	Units

Lab Data Attached? YES NO

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1. Does the waste contain PCBs, explosives, or infectious, carcinogenic, pyrophoric, oxidizing, or shock-sensitive compounds? YES NO

Note: If the waste contains asbestos, asbestos disposal policies must be followed and a chain-of-custody form must be attached.

2. Physical state at 70°F: Solid Liquid Sludge

3. List known waste characteristics

a) Flash Point: _____

b) pH (if liquid): _____

c) Color: _____

d) Odor: _____

e) Other Descriptors: _____

4. Have you attached laboratory test results and chain-of-custody documentation to this waste profile form?
YES NO

5. Have you attached a DEQ letter of approval to this waste profile form? YES NO

SHIPPING INFORMATION

6. Packaging: Bulk Solid Bulk Liquid Drum

Type/Size: _____

7. Anticipated Volume: _____ Units: _____

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GENERATOR'S CERTIFICATION AND APPROVAL

I hereby certify that all information submitted in this form and all attached documents contain true and accurate descriptions of the waste stream.

Name of **Generator**

Signature of **Generator**

Printed Name/Title

Date

Dry Creek Landfill, Inc.

Signature

Date

Waste Acceptance Fee: _____ Per: _____

Permit Expires: _____

Waste Accepted Not to Exceed: _____

No waste authorized under this profile will be accepted after the expiration date stated above without prior authorization.

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SPECIAL WASTE CHARACTERIZATION DECLARATION

(Please print clearly)

Name of Generator: _____

Address of Generator: _____

Name of Waste: _____

Source of Waste: _____

Approximate Amount of Waste (cubic yards or tons): _____

The Generator listed above, by generator knowledge, confirmed by chemical and physical analysis, determined that the subject waste material (as named above) is not a hazardous waste by Oregon Department of Environmental Quality (DEQ) or US Environmental Protection Agency (EPA) criteria (ref.: OAR 340-101 and 40 CFR Subparts B-D, Part 261).

The Generator also determined that the above-listed waste material is not "Flammable," "Corrosive," "Reactive," "Toxic," "EPA-Listed," or "DEQ-Listed," as defined in the above-referenced regulations.

The Generator assumes all environmental liabilities if this waste is later determined to be an EPA or DEQ hazardous waste.

Authorized Signature

Title

Note: Laboratory test data must be attached to this form.