



CITY OF ALBANY
DEPARTMENT OF GENERAL SERVICES

GERALD D. JENNINGS
MAYOR

WILLARD A. BRUCE
COMMISSIONER

WASTE PROFILE SHEET

DATE: _____

LOT NUMBER: (ASSIGNED BY CITY) _____

A. WASTE GENERATOR INFORMATION

1. GENERATOR NAME: _____
2. 2. PHONE: _____
3. 3. FACILITY STREET ADDRESS: _____
4. 4. FACILITY CITY: _____
5. 5. FACILITY COUNTY: _____
6. 6. STATE: _____
7. 7. ZIP/POSTAL CODE: _____
8. 8. GENERATOR USEPA/FEDERAL ID #: _____

B. CUSTOMER INFORMATION

1. CUSTOMER NAME: _____
2. CUSTOMER CONTACT: _____
3. CUSTOMER PHONE: _____
4. CUSTOMER FAX: _____
5. BILLING ADDRESS: _____
6. BILL TO #: _____

C. WASTE STREAM INFORMATION

1. 1. DESCRIPTION
 - A. NAME OF WASTE: _____
 - B. PROCESS GENERATING WASTE (ATTACH PROCESS DESCRIPTION): _____
 - C. COLOR: _____
 - D. STRONG ODOR (DESCRIBE): _____
 - E. PHYSICAL STATE @70 DEGREES FARENHEIT: ___ SOLID ___ LIQUID ___ GAS
 ___ SLUDGE ___ OTHER
 - F. PERCENT (%) SOLIDS: _____
 - G. DENSITY: _____ LBS/CUBIC YD.
 - H. LIQUID FLASH POINT: ___<73°F ___73-99°F ___100-139°F ___140-199°F ___200°F ___N/A
2. 2. QUANTITY OF WASTE
ESTIMATED VOLUME: _____ TONS/YARDS/DRUMS/OTHER (SPECIFY)
3. SHIPPING FREQUENCY: _____ PER ___ MONTH ___ QUARTER ___ YEAR ___ 1 TIME
4. PACKAGING:
___ BULK SOLID: TYPE/SIZE _____ (AGGREGATE/BAGS/BOXES/BALED)
___ OTHER: _____
5. 5. ___ TCLP PROVIDED
6. 6. ___ MSDS PROVIDED

(NOTE: WASTE PROFILE SUBMITTALS MUST CONTAIN EITHER A TCLP OR MSDS TO BE CONSIDERED!)

- 7. 7. DOES THE WASTE REPRESENTED BY THIS PROFILE CONTAIN ANY OF THE CARCINOGENS WHICH REQUIRE OSHA NOTIFICATION? ___YES ___NO
- 8. 8. DOES THE WASTE REPRESENTED BY THIS PROFILE CONTAIN ANY DIOXINS? ___YES ___NO
- 9. DOES THE WASTE REPRESENTED BY THIS PROFILE CONTAIN ASBESTOS? ___YES ___NO
IF YES FRIABLE NON-FRIABLE
- 10. DOES THE WASTE REPRESENTED BY THIS PROFILE CONTAIN BENZENE? ___YES ___NO
IF YES, CONCENTRATION _____PPM
- 11. DOES THE WASTE CONTAIN DEBRIS? (DESCRIBE)_____ ___YES ___NO
- 12. WILL DISPOSAL OF THE WASTE REPRESENTED BY THIS PROFILE REQUIRE THE USE OF PERSONAL PROTECTIVE EQUIPMENT? ___YES ___NO
- 13. DOES THE WASTE REPRESENTED BY THIS PROFILE EASILY DISPERSE IN HIGH WINDS? ___YES ___NO
IF YES, CAN WATER BE ADDED BY GENERATOR? ___YES ___NO
- 14. PLEASE BE ADVISED THAT IN ACCORDANCE WITH 40 CRF SECTION 258.28, LIQUIDS CONTAINING FREE MOISTURE ARE BANNED FROM DISPOSAL IN LANDFILLS. FOR THIS REASON, THE CITY REQUIRES THAT A **PAINT FILTER TEST** BE PERFORMED. A 100-ML SAMPLE OF WASTE SHOULD BE PLACED IN A 400-MICRON, CONICAL PAINT FILTER. SHOULD THE WASTE YIELD ANY LIQUID THROUGH THE FILTER IN A 5-MINUTE PERIOD, THE WASTE IS DEEMED TO CONTAIN FREE MOISTURE AND THEREFORE FAILS THE ACCEPTANCE TEST. WASTES ARE SUBJECT TO RANDOM SPOT-CHECKS AT THE LANDFILL. HAS THE WASTE REPRESENTED BY THIS PROFILE PASSED THE PAINT FILTER TEST AS DESCRIBED ABOVE? ___YES ___NO



I AUTHORIZE THE CITY OF ALBANY TO OBTAIN A SAMPLE FROM ANY WASTE SHIPMENT FOR PURPOSES OF RE-CERTIFICATION. IF THIS CERTIFICATION IS MADE BY A BROKER, THE UNDERSIGNED SIGNS AS AUTHORIZED AGENT OF THE GENERATOR AND, IF APPROVED, WILL PROVIDE TO THE CITY WITH ALL NECESSARY PERMITS AND LICENSES FOR THE WASTE THAT HAS BEEN CHARACTERIZED AND IDENTIFIED BY THIS APPROVED PROFILE.

I CERTIFY THAT THE WASTE REPRESENTED BY THIS PROFILE IS NON-HAZARDOUS AND CONTAINS NO RADIOACTIVE MATERIAL OR POLYCHLORINATED BIPHENYLS (PCBs). IN ADDITION, I CERTIFY THAT THE WASTE REPRESENTED BY THIS PROFILE DOES NOT CONTAIN RECYCLABLE MATERIAL OR MATERIAL DEFINED AS UNACCEPTABLE BY THE CITY OF ALBANY'S LANDFILL PERMIT. I CERTIFY THAT I HAVE REVIEWED THE CITY OF ALBANY'S LANDFILL PERMIT AND WILL ABIDE BY ITS POLICIES. I CERTIFY THAT THIS WASTE PROFILE SHEET AND ALL ATTACHMENTS CONTAIN TRUE AND ACCURATE DESCRIPTIONS OF THE WASTE MATERIAL.

CERTIFICATION SIGNATURE: _____ TITLE: _____

NAME: _____ COMPANY NAME: _____

DATE: _____

___CHECK IF ADDITIONAL INFORMATION IS ATTACHED. INDICATE THE NUMBER OF ATTACHED PAGES ____.

FOR CITY OF ALBANY USE ONLY:	
___APPROVED ___DISAPPROVED	
COMMENTS _____ _____	
WASTE MATERIAL CODE: _____	
BILL TO #: _____	
TIP FEE QUOTE: _____	