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Dedicated to Serving God and Country

WASTE PROFILE APPLICATION

FOR LANDFILL USE ONLY

APPROVAL CODE:

A. Generator Information

Provide the legal name and mailing address of the individual, business, partnership, corporation, or public entity responsible for generating the waste.

1. Name: _____

2. Mailing Address: _____

3. City: _____ State: _____ Zip: _____

4. Contact Person: _____ Phone: (____) _____

5. Generator's EPA ID. No.: _____ SIC Code: _____

6. Location of Waste Generation (if different from above address): _____

7. County of Waste Generation: _____

B. Waste Stream Information

1. Waste Name/Description: _____

2. Process/Source Generating Waste: _____

3. Is this a characteristically hazardous waste as defined in 401 KAR 31:030? Yes No
4. Is this waste a listed hazardous waste as defined in 401 KAR 31:040? Yes No
5. Is this waste mixed with a hazardous waste? Yes No
6. Is this waste derived from a hazardous waste? Yes No
7. Is this a treatment residue from a previously restricted hazardous waste? Yes No
8. Does this waste contain polychlorinated biphenyls (PCBs)? Yes No
9. Does this waste contain asbestos? Yes No Friable Non-friable
10. Does this waste contain any radioactive material? Yes No
11. Does this waste contain any form of sulfur? Yes No

C. Waste Properties

1. Waste condition upon generation: Solid Semi-solid Powder Liquid
2. Waste condition upon disposal: Solid Semi-solid Powder Liquid
3. Has this waste been treated? Yes No If yes, describe:

4. Density: _____ g./cc. _____ lbs./gal. _____ lbs./cu.yd.
5. Color: _____
6. Odor: _____
7. Anticipated Volume: _____; _____ Tons _____ Yards _____ Gallons _____ Drums Other _____
8. Disposal Frequency: _____ One Time _____ Weekly _____ Monthly _____ Yearly Other _____

D. Waste Characteristics

1. Does this waste exhibit any of the following **reactive** properties? Check where applicable:
 - Acid Reactive Alkaline Reactive Water Reactive Oxidizer
 - Explosive Shock Sensitive Thermally Sensitive Pyrophoric
 - Autopolymerizable None

2. Does this waste exhibit any of the following characteristics of a hazardous waste as described in 401 KAR 31:030?

Ignitability: Yes No If suspect, provide Flashpoint: _____ F

Corrosivity: Yes No If suspect, provide pH _____

Reactivity: Yes No If suspect, provide (mg/kg) H₂S _____ HCN _____

Toxicity: Yes No If suspect, provide TCLP analyses.

3. Does this waste pass the paint filter test? Yes No If suspect, provide test analysis.

E. Supplemental Waste Documentation

1. Indicate what additional information, data or documentation is included with this form.

MSDS(s) Lab Results Chain of Custody None

Other, describe _____

F. Generator's Certification

The certification statement must be signed by an authorized agent such as the owner, operator or senior official with management responsibility for the person (or persons) completing the form. The authorized agent may not be a consultant or broker.

“I certify under penalty of law that this document and all attachments, were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for such violations.”

1. Name _____ Date _____

2. Signature _____ Title _____

G. Laboratory Information

1. Laboratory Name: _____
2. Mailing Address: _____
3. City: _____ State: _____ Zip: _____
4. Lab Contact: _____ Phone: (____) _____
5. E-mail: _____

H. Sampling Information

1. Sample Collector's Name: _____ Title: _____
2. Company Affiliation: _____ Phone: (____) _____
3. Container Type: ___ Glass ___ Plastic ___ Other (describe) _____

4. Sample Type: ___ Grab ___ Composite ___ Other (describe) _____

5. Sample Collector's Certification:

"I certify that the sample for which the analytical results were generated is representative of the above described waste and was collected and preserved in a manner consistent with accepted technical standards."

1. Collector's Name _____ Date _____
2. Collector's Signature _____ Title _____