

HAZARDOUS WASTE DETERMINATION FORM

Hazardous Waste Determination Form #:

A. WASTE DESCRIPTION:

Generation Process:

Generation Location:	Total Quantity and/or Estimated Generation Rate:
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B. WASTE PROPERTIES, CHARACTERISTICS, and CONSTITUENTS:

<p>Physical State:</p> <input type="checkbox"/> Solid <input type="checkbox"/> Solid w/freestanding or absorbed liquid <input type="checkbox"/> Liquid (If liquid, indicate if the liquid is: <input type="checkbox"/> Single-Layer <input type="checkbox"/> Multi-Layer <input type="checkbox"/> Gas	<p>pH:</p> <input type="checkbox"/> ≤ 2 <input type="checkbox"/> > 2 but < 12.5 <input type="checkbox"/> N/A <input type="checkbox"/> ≥ 12.5 <p>Flashpoint:</p> <input type="checkbox"/> < 140 °F <input type="checkbox"/> > 140°F but < 200 °F <input type="checkbox"/> N/A <input type="checkbox"/> > 200 °F
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Characteristics:	PCB Content:	Metal Content:																				
<input type="checkbox"/> Corrosive <input type="checkbox"/> Ignitable <input type="checkbox"/> Reactive <input type="checkbox"/> Radioactive <input type="checkbox"/> Toxic <input type="checkbox"/> None	<input type="checkbox"/> > 5 ppm <input type="checkbox"/> < 5 ppm <input type="checkbox"/> None <p style="text-align: center;">Listed:</p> <input type="checkbox"/> P or U-list (DCC only**) <input type="checkbox"/> K-list <input type="checkbox"/> F-list <input type="checkbox"/> N/A <small>**DCC – discarded commercial chemical products</small>	<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Antimony*</td> <td><input type="checkbox"/> Chromium</td> <td><input type="checkbox"/> Molybdenum*</td> <td><input type="checkbox"/> Vanadium*</td> </tr> <tr> <td><input type="checkbox"/> Arsenic</td> <td><input type="checkbox"/> Cobalt*</td> <td><input type="checkbox"/> Nickel*</td> <td><input type="checkbox"/> Zinc*</td> </tr> <tr> <td><input type="checkbox"/> Barium</td> <td><input type="checkbox"/> Copper*</td> <td><input type="checkbox"/> Selenium</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Beryllium*</td> <td><input type="checkbox"/> Lead</td> <td><input type="checkbox"/> Silver</td> <td><input type="checkbox"/> None</td> </tr> <tr> <td><input type="checkbox"/> Cadmium</td> <td><input type="checkbox"/> Mercury</td> <td><input type="checkbox"/> Thallium*</td> <td></td> </tr> </table> <p><input type="checkbox"/> *Check these metals (or metal compounds) only if they are in a friable, powdered, or finely divided state.</p>	<input type="checkbox"/> Antimony*	<input type="checkbox"/> Chromium	<input type="checkbox"/> Molybdenum*	<input type="checkbox"/> Vanadium*	<input type="checkbox"/> Arsenic	<input type="checkbox"/> Cobalt*	<input type="checkbox"/> Nickel*	<input type="checkbox"/> Zinc*	<input type="checkbox"/> Barium	<input type="checkbox"/> Copper*	<input type="checkbox"/> Selenium		<input type="checkbox"/> Beryllium*	<input type="checkbox"/> Lead	<input type="checkbox"/> Silver	<input type="checkbox"/> None	<input type="checkbox"/> Cadmium	<input type="checkbox"/> Mercury	<input type="checkbox"/> Thallium*	
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Composition (list all hazardous constituents):

Constituent:	Volume % (range):	Constituent:	Volume % (range):

C. REMARKS (Attach all applicable documentation describing the waste (e.g. process knowledge statement, MSDS, sample analysis, etc.):

D. FINAL DETERMINATION:

Hazardous
 Non-hazardous
 Medical Waste
 Universal Waste
 Used Oil
 Prohibited by POTW

COMPLETED BY:	DEPARTMENT:	CONTACT No.:	DATE:
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