

**WASTE MANAGEMENT PLAN  
REMEDATION TEAM ACTIVITIES**

**FORMER WILLOW RUN ASSEMBLY PLANT  
WILLOW RUN BUSINESS CENTER AND  
COMPANY VEHICLE OPERATIONS SITES**

**YPSILANTI, MICHIGAN**

**PREPARED FOR ENCORE**

**CVO - MIK468293311  
WRBC - MIK591512488**

**JULY 26, 2007**

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## LIST OF ACRONYMS

|          |                                                                       |
|----------|-----------------------------------------------------------------------|
| CERCLA   | Comprehensive Environmental Response, Compensation, and Liability Act |
| CFR      | Code of Federal Regulations                                           |
| COC      | Chain of Custody                                                      |
| CRA      | Conestoga-Rovers & Associates                                         |
| CVO      | Company Vehicle Operations                                            |
| ENCORE   | Environmental Corporate Remediation                                   |
| GM       | General Motors Corporation                                            |
| HASP     | Health and Safety Plan                                                |
| ID       | Identification                                                        |
| LQG      | Large Quantity Generator                                              |
| MDEQ     | Michigan Department of Environmental Quality                          |
| NAPL     | Non-Aqueous Phase Liquid                                              |
| PAOC     | Potential Area of Concern                                             |
| PCB      | Polychlorinated Biphenyls                                             |
| POTW     | Publicly Owned Treatment Works                                        |
| PPE      | Personal Protective Equipment                                         |
| ppm      | Parts Per Million                                                     |
| RI       | Remedial Investigation                                                |
| RCRA     | Resource Conservation and Recovery Act                                |
| RWSA     | Remediation Waste Storage Area                                        |
| SAA      | Satellite Accumulation Area                                           |
| SQG      | Small Quantity Generator                                              |
| TCLP     | Toxicity Characteristic Leaching Procedure                            |
| TSCA     | Toxic Substances Control Act                                          |
| U.S. DOT | U.S. Department of Transportation                                     |
| U.S. EPA | U.S. Environmental Protection Agency                                  |
| WRBC     | Willow Run Business Center                                            |
| WMP      | Waste Management Plan                                                 |
| WWTP     | Wastewater Treatment Plant                                            |
| WSG      | Waste Services Group                                                  |

## WASTE MANAGEMENT PLAN ACKNOWLEDGMENT SHEET

This is to certify that I have reviewed this Waste Management Plan (*Willow Run Business Center and Company Vehicle Operations Sites*) and I understand its contents. My failure to follow and comply with the requirements contained in this plan may result in disciplinary action and/or termination.

| Print Name            | Role (per Section 2.0)                       | Signature | Date |
|-----------------------|----------------------------------------------|-----------|------|
| Fred Blickle          | CRA Project Manager                          |           |      |
| Beth Landale          | CRA Waste Coordinator                        |           |      |
| Peter Romzick         | WSG Representative                           |           |      |
| James VanAssche       | WSG Representative                           |           |      |
| Luis Alvarez          | Field Technician & Investigation Coordinator |           |      |
| Justin Jacques        | Field Technician & Investigation Coordinator |           |      |
| Evan Varnas           | Field Technician                             |           |      |
| Nicole Rathbun Shanks | Field Technician                             |           |      |
| Corrie Bondy          | Field Technician                             |           |      |
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**WASTE MANAGEMENT PLAN ACKNOWLEDGMENT SHEET**  
**(Continued)**

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| Print Name | Position | Signature | Date |
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## 1.0 INTRODUCTION

Conestoga-Rovers & Associates, Inc. (CRA) was retained by the Environmental Corporate Remediation (ENCORE), a wholly owned subsidiary of General Motors Corporation (GM), to conduct the Remedial Investigation (RI) for the Former Willow Run Assembly Plant located in Ypsilanti, Michigan. The location currently houses the Willow Run Business Center (WRBC) and Company Vehicle Operations (CVO). The Waste Management Plan (WMP) presented herein, describes policies, procedures, and protocols for the handling of waste materials generated during the RI activities at both sites. Types of wastes that may be generated include, but are not limited to the following:

- Toxic Substances Control Act (TSCA) polychlorinated biphenyls (PCB) remediation waste (includes solids and liquids from drilling and excavating activities), as defined by 40 Code of Federal Regulations (CFR) Part 761;
- Resource Conservation and Recovery Act (RCRA) hazardous waste (includes solids and liquids from drilling, excavation, and other remedial activities), as defined by 40 CFR Part 261; and
- Non-hazardous waste (includes solids and liquids from excavating activities, personal protective equipment (PPE), debris, and soil).

The procedures and protocols outlined in the following subsections of this WMP include proper management, characterization testing/sampling, storage, transportation and/or disposal of wastes generated during project activities. These procedures will be performed in conjunction with those presented in the project Health and Safety Plan (HASP). From this point forward the term “site” shall mean the WRBC and CVO unless otherwise specified. In addition, this WMP will be revised/expanded, as appropriate, while the RI work progresses to include information, methodologies and procedures associated with any changes in work scope and/or site conditions.

## 2.0 ADMINISTRATIVE ROLES AND RESPONSIBILITIES

The administrative roles and responsibilities of the project personnel are presented below.

### ENCORE Project Manager – Mr. Kenneth Richards

Mr. Kenneth Richards is the ENCORE Project Manager and is responsible for reviewing and approving this WMP and liaison between CRA, and Site managers and personnel during implementation of this WMP.

### CRA Project Manager – Mr. Fred Blickle

Mr. Fred Blickle is the CRA Project Manager and is responsible for preparation of this WMP, implementation of this WMP in a timely and cost effective manner, ensuring that the proper resources are available to complete the waste disposal activity, and having quality checks performed to ensure this WMP is being followed.

### CRA Waste Coordinator – Ms. Beth Landale

Ms. Beth Landale is the CRA Waste Coordinator and is responsible for various day-to-day waste management activities including ensuring that characterization and sampling activities are performed, liaising with the Waste Services Group, tracking the duration of on-Site waste storage, and tracking waste disposal budgets. Ms. Landale will be informed on a regular basis of all waste generated at the Site by CRA project personnel to update the on-site waste inventory. In addition, periodic internal audits of the waste handling activities will be conducted to ensure this WMP is being followed.

### CRA Waste Services Group

The CRA Waste Services Group (WSG) is responsible for overseeing waste management activities, including selecting and liaison with transportation and disposal facilities, completing the required waste documentation (e.g. waste profiles), scheduling off-site waste shipments in a timely manner, and performing project notifications to the CRA Project Manager.

WSG representatives will review and sign remediation waste profiles and manifests on behalf of ENCORE. The authorization to sign this documentation is provided in Appendix A. The WSG representatives will be responsible for manifest tracking including mailing a completed copy to the Michigan Department of Environmental Quality (MDEQ) and following up with the return copy of the manifest from the disposal facility within the timelines prescribed in 40 CFR Part 262.42.

For TSCA shipments, the WSG will contact the disposal company to verify receipt of the waste if a third party transporter is used as per 40CFR 761.208(a)(4). The WSG will

continuously update the annual PCB log and associated communication log as required by 40 CFR 761.180 and 761.208. This log will be submitted to GM by June 1<sup>st</sup> of each year, summarizing the previous years PCB waste. A copy of the GM PCB Annual Log is provided in Appendix B.

#### CRA Field Technicians & Investigation Coordinators – CRA Project Personnel

Investigation Coordinators are responsible for communicating with the Waste Coordinator prior to initiating work that will generate waste to determine the type of sample analysis and containment that may be required. Following completion of work the Investigation Coordinators are responsible for informing the Waste Coordinator of the generated wastes for tracking purposes and inclusion in the waste inventory.

Field Technicians, CRA project personnel who perform field activities at the site, are responsible for providing the Investigation Coordinators with a summary of all wastes generated during the field activities in writing. The summary shall include:

- Type and amount of waste (soil, water, PPE, etc);
- Date(s) waste was generated;
- Waste generation method and location;
- Number and capacity of containers;
- Marking/labeling on containers;
- Unique container number (17303-Year-### or 17303-Year-WRBC-###);
- Waste characterization sampling identification (ID) (if applicable); and
- Storage location.

If the field activities are short in duration (less than 1 week) a summary of waste generated during those activities will be submitted at the conclusion of the activities. If the work is ongoing (more than one week) the summary will be submitted once a week.

At the conclusion of the waste generation activities, the containerized waste will be sampled for waste characterization using the protocol presented in Section 7.0.

In addition, CRA project personnel will inspect the appropriate Remediation Waste Storage Areas (RWSA) routinely.

### 3.0 WASTE MATERIALS

Waste materials generated as part of the RI activities, summarized in Section 1.0, may include:

- Drummed and/or containerized aqueous wastes consisting of decontamination water, purged groundwater and dewatering of excavations, and/or trenches;
- Drummed and/or containerized non-aqueous phase liquid (NAPL) and used absorbents;
- Drummed and/or containerized solid waste from drilling, trenching, and excavating (may include a mixture of soils, PPE, debris, and cleared vegetation); and
- Stockpiled solid wastes from drilling, trenching, and excavation activities.

None of the above wastes are considered to be explosive or shock-sensitive, therefore, provisions for these types of waste are not presented, herein. A detailed inventory by waste types/categories of all wastes produced during performance of the RI activities will be maintained by CRA's Waste Coordinator.

### 3.1 RI GENERATED WASTES

Excavated bulk soil will be staged in accordance with the site work plans. Other RI generated wastes may include drummed or containerized waste which will be stored daily at the area being investigated or remediated, while the drums/containers are still being filled. Once full or upon completion of the activity, all drummed or containerized wastes will be transferred to the appropriate on-site RWSA pending off-site treatment/disposal.

Waste intended for off-site disposal will be sent to a GM approved disposal facility once waste profiles have been approved. Bulk and/or containerized RCRA hazardous waste will be staged on-site for a maximum of 90 days due to large quantity generator (LQG) status. This time period may be extended to 180 days if the generator status is changed to a small quantity generator (SQG). The locations for waste storage are presented on Figure 3.1.

The current generator status for the sites are:

- ENCORE CVO (MIK468293311) - LQG (hazardous waste); and
- ENCORE WRBC (MIK591512488) - Liquid Industrial Waste Generator (non-hazardous waste only).

If waste volumes or types change the generator status will be revised as necessary.

## **4.0 DRUM AND CONTAINERIZED WASTE HANDLING PROTOCOLS**

### **4.1 GENERAL**

This section applies to all activities involved in the handling of the generated waste drums and containers. All drum and container handling activities will be conducted in accordance with the HASP.

### **4.2 SAFETY EQUIPMENT/HANDLING EQUIPMENT**

During the handling of drums or containers, PPE as specified in the HASP will be worn at all times. All lifting and transporting of drums or containers will be performed with mechanical equipment whenever possible. Spill kits contained in eighty-five gallon overpack drums will be stored on-site and contain spill response equipment such as absorbent booms, towels, a non-sparking shovel, waste labels, quick dry, plastic bags and general PPE. Spill kits will be stored at the applicable RWSAs and the satellite accumulation areas located in potential area of concern (PAOC) 18.

Equipment and materials will be maintained on-site at all times for control/cleanup in response to any spill, release, or discharge. Immediately following the identification of a large release the CRA Project Manager and ENCORE Project Manager will be notified. If the spill is located at CVO the internal emergency notification procedure described in the Contingency Plan for CVO will also be followed. A large release is defined as any release that cannot be cleaned with the equipment and materials that are maintained on-site.

### **4.3 DRUM HANDLING**

#### **4.3.1 DRUM STAGING AND HANDLING**

Drummed or containerized waste generated during RI activities will be stored daily at the area being investigated or remediated, while the drums/containers are still being filled. Once full or upon completion of the activity, all drummed or containerized wastes will be transferred to the appropriate RWSA (see Figure 3.1) pending off-site treatment/disposal.

All drums containing waste will be transferred to the appropriate RWSA using mechanical equipment whenever possible. Drums will be moved by grapppler,

non-metallic slings, within a backhoe bucket or front-end loader or by other means that will minimize damage to the drums and the potential release of contents. All drums that contain liquid or are suspected to be a RCRA hazardous waste or contain PCBs at concentrations over than 50 parts per million (ppm) will be placed in overpacks or some other form of secondary containment that meets the applicable regulations. The drums will be oriented to permit sampling and inspection of each individual drum, if necessary.

All drums containing waste will be marked to include waste generation method, date produced (first date waste placed in drum), and unique drum number. All drums will be recorded by entering the container information in the detailed inventory maintained by the CRA Waste Coordinator. The CRA Waste Coordinator will be informed of any waste generated on Site on a regular basis by the CRA project personnel as described in Section 2.0.

Subsequent to completing waste sampling and characterization, as discussed in Sections 6.0 and 7.0, all drums containing TSCA and or RCRA hazardous waste will be labeled appropriately and manifested, as discussed in Section 5.0. Each container of hazardous waste shall be clearly labeled with the words "Hazardous Waste" and the appropriate waste codes and accumulation start date (first date waste placed in drum). Drums stored in Satellite Accumulation Areas (SAA) will be labeled with the words "Hazardous Waste" and the appropriate waste codes. The accumulation start date will be added once 55 gallons of waste has been accumulated.

Containers/drums with TSCA waste will be stored at the Remediation Waste Storage Area for a period of up to 30 days from the initial waste generation date prior to shipment. Drums which are more than 30 days old will be overpacked to provide secondary containment thereby allowing the storage time to be extended to ensure disposal in a period of less than 1 year. The TSCA containers more than 30 days old will be inspected for leaks pursuant to 40 CFR Part 761.

Containers and drums with RCRA hazardous waste not in satellite accumulation will be stored on-site for a maximum of 90 days (unless generator status is revised to SQG). RCRA hazardous wastes in satellite accumulation (less than 55 gallons of hazardous wastes or one quart of acutely hazardous wastes) may be stored on-Site for greater than 90 days if stored at the point of generation and under the control of the operator (40 CFR 262.34(c)(1)). Additional requirements including labeling and relocating the 55-gallon drum when full can be found at 40 CFR 262.34(c)(1).

RCRA storage requirements generally require secondary containment and inspections to detect any leaks. The requirements vary depending on whether the material is stored in containers or tanks. Title 40 CFR 265 Subpart I applies to containers only and Subpart J applies to tanks only. Subparts AA, BB, and CC apply to both containers and tanks. The CRA Waste Coordinator will coordinate with CRA project personnel to ensure any required inspections are being conducted for ENCORE waste that is stored at the RWSAs. The RWSAs will be inspected routinely by CRA project personnel.

#### **4.3.2      SPILL PREVENTION AND RESPONSE**

The handling and transport of drummed and/or containerized waste will be, at all times, conducted in a controlled and safe manner which will minimize damage to the containers and prevent release of the contents. The RWSAs will be inspected routinely by CRA project personnel to ensure drums are intact and are not leaking. If drummed and/or containerized waste is stored outside of the RWSAs (SAA or other, as needed) CRA project personnel will periodically inspect the conditions of the drums and/or containers.

Immediately following the identification of a large release, the internal emergency notification procedure described in the Contingency Plan for CVO will be followed. If a large release is identified at the WRBC the ENCORE and CRA Project Managers will be notified. A large release is defined as any release that cannot be cleaned with the equipment and materials that are maintained on-site. The spilled liquids will be confined to the immediate area of the spill. The released liquids will be collected utilizing a vacuum truck if the release is greater than 55 gallons. If the release is less than 55 gallons, the released liquid will be collected utilizing a portable hand pump and/or absorbent and deposited, into a drum or container. Any leaking drums will be placed in an overpack.

The spilled liquids will be confined by diking around the spill with native material or with an inert absorbent or absorbent booms. Any residual liquids which cannot be pumped will be absorbed with a sufficient quantity of inert absorbent to ensure that no free liquids remain. If the spill occurs on soil, outside of a previously identified contaminated area, CRA's Site Representative will immediately consult with CRA's Project Manager and the ENCORE Project Manager to determine the appropriate response. If the spilled liquid consisted of decontamination water, the decision to excavate the visibly affected soils will be based on whether the water was generated from a source known to exhibit contamination. However, if a decontamination water spill occurred on soil within a previously identified contaminated area, the affected soil may not be excavated since the soils in these identified areas are under investigation.

This decision will be made after consultation with the ENCORE and CRA Project Managers.

All spills presenting a current or potential threat will be reported to the United States Environmental Protection Agency (U.S. EPA) by the ENCORE Project Manager and spills above reportable quantities will be reported to the MDEQ according to the Michigan regulations, after consultation with GM personnel. In the absence of the ENCORE Project Manager, Sandy Kramarich (GM Corporate Environmental) would be responsible for reporting the release.

## **5.0 WASTE TRANSPORTATION AND DISPOSAL**

### **5.1 MANIFESTING AND LABELING**

All wastes designated for off-Site disposal will be labeled and manifested prior to leaving the Site for off-Site treatment/disposal facilities. The manifest forms and records will be consistent with 40 CFR Part 262 " U.S. EPA Hazardous Waste Generator Standards", 40 CFR Part 263 "EPA Hazardous Waste Transporter Standards", 40 CFR Part 268, "Land Disposal Restriction Standards", 40 CFR Part 761, "EPA Polychlorinated Biphenyls Rules", Michigan Act 451, Part III Hazardous Waste Management, and Michigan Act 451, Part 212 Liquid Industrial Wastes. Appendix C presents example waste labels. Appendix D presents example manifests.

The waste identification numbers are ENCORE CVO - MIK468293311 and ENCORE WRBC - MIK591512488. These will be used on all manifests for the respective site.

### **5.2 PREPARATION OF OFF-SITE TRANSPORT VEHICLES**

All off-site transport vehicles will be prepared as appropriate prior to receiving drummed or bulk waste. Drummed/containerized wastes will be loaded and secured in a manner that will prevent damage to and movement of the containerized materials. The transporter will be responsible for ensuring that the waste being transported directly from an ENCORE investigation/remediation area is properly loaded and secured prior to transport.

Most of the generated waste will be transported off-site to a disposal facility via an enclosed transport unit. In some instances (i.e. shipment of roll-off boxes) waste may be transported to a disposal facility via an open transport unit equipped with a weatherproof tarp (used to secure shipment).

Transport drivers will remain in their vehicle cabs while they are in an Exclusion Zone, temporary Exclusion Zone, or Contaminant Reduction Zone if the material is being live loaded (i.e. soils loaded by excavator) into the truck, as defined in the task specific work plan. Following tarping, each transport vehicle will enter the decontamination facility if leaving an Exclusion Zone, temporary Exclusion Zone, or Contaminant Reduction Zone. Each vehicle will be decontaminated to ensure that no loose soil, sludge or other material is tracked off-site. Particular attention will be paid to removing materials from the tires, under carriage and portions of vehicles, which may have been in contact with waste material during loading operations. Decontamination activities will include sweeping, brushing and/or steam cleaning, as appropriate.

CRA project personnel will inspect and document that each vehicle leaving the decontamination area has been decontaminated properly, tarps are secured, proper placards are in place, manifest/documents are correct and there are no visible signs of leaks from the drums/containers that have been loaded onto the vehicles.

### **5.3        AUTHORIZED TRANSPORTERS**

Only transporters with a U.S. EPA hazardous waste identification number will be used for the transport of hazardous waste. Transporters will be in compliance with applicable state and federal hazardous waste transportation requirements (i.e., 40 CFR Part 263). If shipments are scheduled for facilities outside of the State of Michigan, transporters will be required to be licensed in the appropriate State(s) as well as comply with other applicable Federal laws including United States Department of Transportation (U.S. DOT) requirements.

If wastes are deemed to be non-hazardous and non-TSCA, then transporters will be licensed for general transportation of Subtitle D waste or as required by the State of Michigan for the transport of Special Waste. These wastes may be disposed of in an appropriate Subtitle D landfill or a permitted wastewater treatment facility (WWTP), as appropriate.

### **5.4        TRANSPORTATION ROUTES**

Transportation routes to off-site treatment and/or disposal facilities will be pre-determined by the authorized transporter prior to commencing off-site transport of waste materials. The transporter is responsible for consulting the appropriate State and interstate officials will be consulted as to whether any proposed routes are scheduled for construction or seasonal closures, which will occur during implementation of this project. Transportation route maps shall be provided to CRA prior to initiating material transport.

### **5.5        OFF-SITE TREATMENT/DISPOSAL**

Off-site treatment and/or disposal facilities will be selected only if they comply with applicable state and federal regulations.

### **5.5.1      APPROVED TREATMENT/DISPOSAL FACILITIES**

Off-site treatment and/or disposal facilities will be approved by GM/ENCORE prior to commencing transport. All facilities identified for hazardous waste treatment/disposal will be Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) approved, RCRA compliant and/or TSCA compliant, as applicable.

Any wastes deemed to be non-hazardous and non-TSCA regulated may be transported to a Subtitle D landfill and/or Publicly Owned Treatment Works (POTW) system, as applicable, for disposal.

## **6.0 WASTE SAMPLING**

### **6.1 GENERAL**

Waste characterization and testing will be conducted as required on containerized liquid and solid wastes designated for off-site disposal at permitted facilities, to determine the appropriate disposal mode and ensure compliance with 40 CFR Part 261, 40 CFR Part 268, 40 CFR Part 761, and/or the Michigan Regulations. Soil/sediments may also be characterized and delineated in-situ then removed and transported in bulk based on the in-situ characterization.

The following subsections describe the procedures that will be implemented for sampling containerized liquids and/or solids for disposal characterization purposes.

### **6.2 SAMPLE COLLECTION PROTOCOLS**

#### **6.2.1 DRUMMED/CONTAINERIZED MATERIAL SAMPLING**

This section describes the general procedures that will be followed when sampling drummed or bulk waste containers.

##### **6.2.1.1 SAFETY EQUIPMENT**

During the sampling of containerized materials, PPE as specified within the HASP will be worn at all times.

##### **6.2.1.2 SAMPLING EQUIPMENT**

Materials and equipment that may be required for sampling are as follows:

1. Chain of Custody (COC) data sheets.
2. Glass sampling thief or bailer for collection of liquid samples.
3. Stainless steel trowel, spoon, hand auger or trier for collection of solid or sludge samples, if applicable.
4. Bung wrench.

All drums will be sampled at the appropriate RWSA or at the location where the drums were initially filled (prior to transport to the appropriate RWSA).

#### **6.2.1.3      SAMPLING PROCEDURES**

The following procedures will be adhered, in general, during sampling of containerized liquid waste.

1. Remove cover from sample container and remove lid/bung from the drum.
2. Insert sampling thief (or other appropriate sampling equipment, as specified in Section 6.2.1.2) almost to the bottom of the drum or until a solid layer is encountered. If the liquid in the drum is a single phase, a representative sample of the liquid in the entire drum will be collected for compatibility testing, if necessary, and waste characterization. If more than a single phase of liquid is determined to be present in the drum, each phase of liquid will be sampled separately.
3. Allow the liquid waste in the drum to reach its natural level in the tube.
4. Carefully remove sampling device from drum and deposit sample into sample container. Repeat the above steps until sufficient volume has been collected for analysis. Sampler will be cautious not to spill any sample on the outside of the sample container.
5. Cap the sample container tightly and place pre-labeled sample container in a carrier.
6. Transport the sample to the laboratory for analysis.

Sampling of drummed and/or containerized solids or sludges will, in general, conform to the preceding procedures with the following exceptions:

1. Sample collection will be accomplished using a stainless steel trowel, spoon, hand auger or trier. All sampling equipment will be cleaned prior to use. Reusable sampling equipment will be cleaned between subsequent drums using the protocol presented in Section 8.0.
2. A representative sample of drummed and/or containerized solids or sludges, will be collected, if practical. If stratification is evident, a sample trier/hand auger or device capable of collecting from the entire vertical profile will be utilized. Samples from each unique layer will be collected.
3. The sample collected will be a composite of a minimum of four 25-gram samples collected from representative locations throughout the containerized material

unless it is known that the containerized material is homogeneous in nature (e.g. soil cuttings, spent carbon). In this case, only one sample will be collected from the drum or container.

Samples collected from containerized waste containing the same material may be composited during sample collection into one sample for disposal characterization purposes.

#### **6.2.2      SAMPLE SHIPMENT/CHAIN-OF-CUSTODY**

All sample shipments will follow appropriate COC procedures.

## 7.0 WASTE CHARACTERIZATION

The physical and chemical testing protocols which may be required to meet the general testing requirements of various treatment/disposal facilities vary. The waste characterization requirements will be confirmed following selection and identification of the treatment and/or disposal facility(ies).

In general, a representative sample will be analyzed for Toxicity Characteristic Leaching Procedure (TCLP) constituents and PCBs. If applicable, investigative soil samples will also be utilized for waste characterization purposes. Analytical laboratory results for total constituent concentrations (not leachable concentrations) will be compared to 20 times the RCRA TCLP limits and the TSCA PCB regulatory limits. Should a total result for a RCRA parameter exceed 20 times the RCRA TCLP limit, a waste characterization sample will be collected from the container in question and the sample will be analyzed for TCLP for the parameter(s) in question. This approach is subject to change based on generator knowledge of the waste (Title 40 CFR 262.11) and project timing (time constraints may require total constituent analysis and TCLP analysis simultaneously).

Appendix E presents copies of waste profiles forms for waste disposal facilities used at the time this WMP was prepared.

## 8.0 EQUIPMENT CLEANING

Since samples are being collected for waste characterization for disposal purposes, all sampling equipment and tools (other than pre-cleaned disposable tools) will be decontaminated prior to the collection of samples using the following rinse sequence:

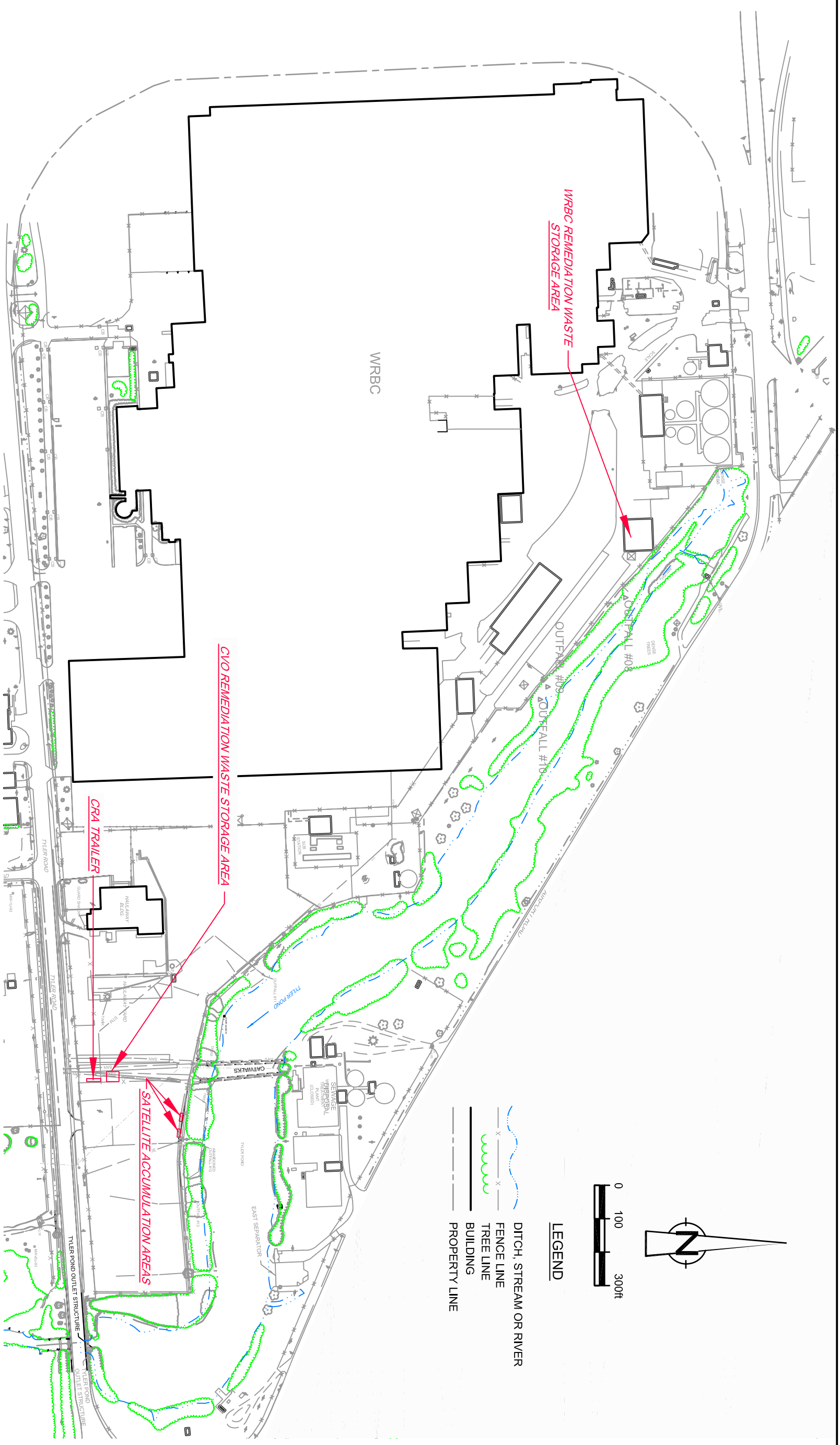
- i) Knocking soil/mud from the sampling equipment;
- ii) Water rinsing using solution of water and Alconox;
- iii) Scraping and brushing with long-handled brushes to remove remaining soils;
- iv) A final water rinse; and
- v) Air dry.

The following cleaning procedures are required for decontaminating the equipment being used for environmental investigation activities areas impacted with PCBs:

- i) Wash equipment with potable water and laboratory detergent (Alconox or Liquinox or similar solution);
- ii) Rinse thoroughly with potable water;
- iii) Rinse thoroughly with de-ionized water;
- iv) Rinse equipment with 1/10 dilution of hexane. Use a laboratory style bottle for hexane to avoid splashing in eyes. Do not use a spray bottle;
- v) Rinse equipment with 1/10 dilution of acetone. Use a laboratory style bottle for acetone to avoid splashing in eyes. Do not use a spray bottle; and
- vi) Rinse thoroughly with de-ionized water and allow to air dry.

Fluids used for cleaning will not be recycled. All wash water and rinse water will be transferred to drums on Site pending final disposal.

Following final rinse, sampling equipment will be visually inspected to verify that they are free of soil particulates and other solid material which may contribute to possible sample cross-contamination. Dedicated equipment which is used only once (e.g. glass thieves) will not be subject to the above decontamination procedures.



## APPENDIX A

### AUTHORIZATION TO PREPARE HAZARDOUS WASTE MANIFEST



**Worldwide Facilities Group  
Environmental Services Group  
Remediation Team**

To: Conestoga-Rovers & Associates, Inc.  
Waste Services Group  
1811 Executive Drive, Suite O Indianapolis, Indiana 46241

Re: **Delegation of Signatory Authority for Non-Hazardous and Hazardous Waste  
Transportation and Disposal for the following ENCORE Project Sites:  
Willow Run Business Center -2625 Tyler Road, Ypsilanti, MI  
Company Vehicle Operations Property - 2901 Tyler Road, Ypsilanti, MI**

Conestoga-Rovers & Associates, Inc.(CRA) is hereby authorized to act as agent for and on behalf of Environmental Corporate Remediation (ENCORE), a wholly owned subsidiary of General Motors Corporation (GM) to prepare profiles and sign non-hazardous and hazardous waste manifests required by law for the transportation and/or disposal of materials from ENCORE project sites located in Ypsilanti, Michigan. In accepting this authorization, CRA agrees to perform its responsibilities in accordance with all applicable laws and regulations governing transportation and/or disposal of the material. CRA also agrees to indemnify and hold GM harmless from and against any and all claims to the extent arising from its sole negligence or the sole negligence of its employees while carrying out the acts authorized hereunder. ENCORE/GM acknowledges that CRA is not the Arranger, Operator, Generator, or Transporter of such materials, as defined under applicable laws, and that CRA has neither created nor contributed to the existence of such materials at the ENCORE project sites. The authorized employee of CRA who signs manifests shall sign such individual's name and the words "As Agent for ENCORE ". CRA designates Sean K. Grady, Frederick Blickle, Pete Romzick or the WSG's authorized employees.

Copies of all transportation/disposal documentation, including signed returned manifests from the disposal facilities will be provided to the appropriate ENCORE project manager and a legible copy will also be maintained by CRA, to be available for inspection if requested.

This authorization may be terminated at any time. Obligations and rights under this authorization shall survive termination or completion of services to ENCORE.

Date: 07/20/2007

ENVIRONMENTAL CORPORATE REMEDIATION

By: Edward Peterson

Print: Edward Peterson

Title: Superfund Program Mgr.

Date: 7-18-07

CONESTOGA-ROVERS & ASSOCIATES, INC.

By: F.W. Blickle, III

Print: F.W. Blickle, III

Title: V.P.

## APPENDIX B

### GM ANNUAL PCB LOG

**General Motors Corporation  
US Facilities**

**PCB Annual Document Log**

Due: Each July 1 for the previous calendar year

Return To: Teri Kline  
M/C: 483-520-194  
2000 Centerpoint Parkway  
Pontiac, MI 48341  
Lotus notes: Teri L. Kline/US/GM/GMC@GM  
email: teri.l.kline@gm.com  
fax: 248-753-5832

Plant: ENCORE - Company Vehicle Operations  
2901 Tyler Road

EPA ID No: MIK 468 293 311

Name of  
person  
completing  
form:

Phone:

GM/ENCOR

E

Representati

ve

Phone:

Date:

\_\_\_\_\_

\_\_\_\_\_

Ken Richards

248-753-5912

\_\_\_\_\_

## Section I: Summary

Calendar Year: 2007

EPA ID No: MIK 468 293 311

Address  
2901 Tyler Road  
Ypsilanti, MI

|                                                   | Remaining in service | Placed into storage for disposal or disposed |
|---------------------------------------------------|----------------------|----------------------------------------------|
| PCB Transformers:<br>(Total Number)               | None                 | None                                         |
| Total Weight of PCB's<br>(kg)                     | 0                    | 0                                            |
| Large PCB Capacitors:<br>(Total Number)           | None                 | None                                         |
| Total Weight of PCB's<br>(kg)                     | 0                    | 0                                            |
| PCB Articles (Specify<br>Type, Total Number)      | None                 | None                                         |
| Total Weight of PCB's<br>(kg)                     | 0                    | 0                                            |
| PCB Article<br>Containers: (Total<br>Number)      | None                 | None                                         |
| Total Weight of PCB's<br>(kg)                     | 0                    | 0                                            |
| PCB Containers: (Total<br>Number)                 | None                 |                                              |
| Total Weight of PCB's<br>(kg)                     | 0                    |                                              |
| Bulk PCB Waste:<br>(Total Weight of<br>PCB's, kg) | 0                    | None                                         |

Section II: PCB Transformers  
Calendar Year: 2007

EPA ID No:            MIK 468 293 311

[illegible]

EPA ID No:      MIK 468 293 311

EPA ID No:      MIK 468 293 311

[illegible]

EPA ID No: MIK 468 293 311

Calendar Year: 2007

[illegible]

Section IV: Bulk PCB Waste  
Calendar Year: 2007

EPA ID No: MIK 468 293 311

[illegible]

## APPENDIX C

### EXAMPLE WASTE LABELS

# NON- HAZARDOUS WASTE

**GENERATOR INFORMATION: (optional)**

SHIPPER \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

CONTENTS: \_\_\_\_\_

# NON-HAZARDOUS WASTE

# HAZARDOUS WASTE

FEDERAL LAW PROHIBITS IMPROPER DISPOSAL

IF FOUND CONTACT THE NEAREST POLICE OR PUBLIC SAFETY  
AUTHORITY OR THE U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERATOR INFORMATION:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

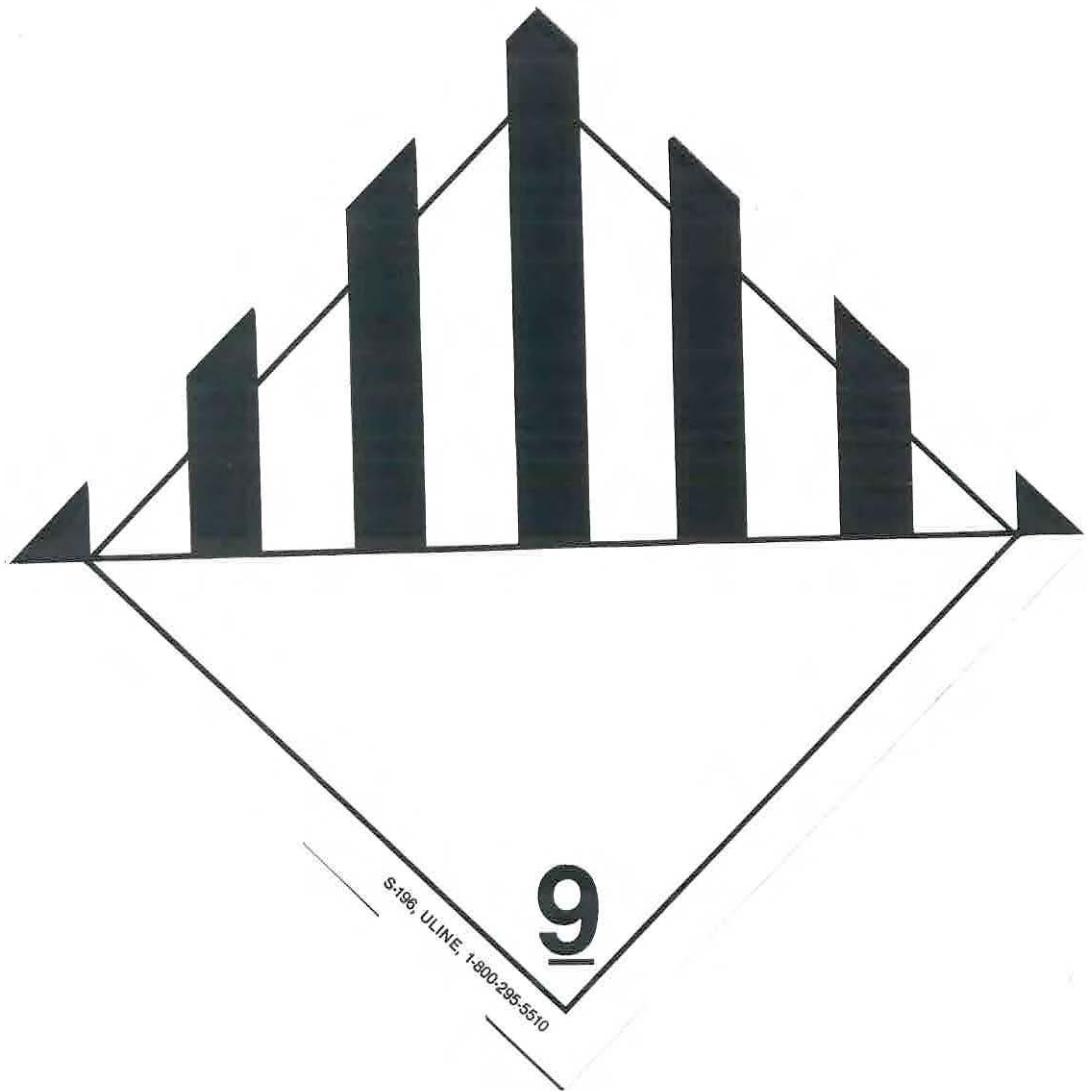
EPA / MANIFEST  
ID NO. / DOCUMENT NO. \_\_\_\_\_

ACCUMULATION  
START DATE \_\_\_\_\_ EPA  
WASTE NO. \_\_\_\_\_

[ \_\_\_\_\_ ]  
[ \_\_\_\_\_ ]  
[ \_\_\_\_\_ ]

D.O.T. PROPER SHIPPING NAME AND UN OR NA NO. WITH PREFIX

## HANDLE WITH CARE!



**CAUTION**

**CONTAINS**

**PCBs**

**(Polychlorinated Biphenyls)**

A toxic environmental contaminant requiring special handling and disposal in accordance with U.S. Environmental Protection Agency Regulations 40 CFR 761 – For Disposal Information contact the nearest U.S. E.P.A. Office.

---

In case of accident or spill, call toll free the U.S. Coast Guard National Response Center:  
800-424-8802

Also Contact: \_\_\_\_\_

Tel No.: \_\_\_\_\_

# **THIS CONTAINER ON **HOLD**** **PENDING ANALYSIS**

**CONTENTS** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ORIGIN OF MATERIALS** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CONTACT** \_\_\_\_\_

**DO NOT TAMPER WITH CONTAINER**  
**AUTHORIZED PERSONNEL ONLY**

**EMPTY**

## APPENDIX D

### EXAMPLE MANIFESTS

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|--|--------------|----------------|-----------------------------|--------------------|-----------------------------|--------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                       | 1. Generator ID Number                                                                                         |  | 2. Page 1 of |                | 3. Emergency Response Phone |                    | 4. Manifest Tracking Number |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    | 002217756 JJK               |                    |
| 5. Generator's Name and Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                       | Generator's Site Address (if different than mailing address)                                                   |  |              |                |                             |                    |                             |                    |
| Generator's Phone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| 6. Transporter 1 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    | U.S. EPA ID Number          |                    |
| 7. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    | U.S. EPA ID Number          |                    |
| 8. Designated Facility Name and Site Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    | U.S. EPA ID Number          |                    |
| Facility's Phone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| GENERATOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 9a. HM                                                                                                                                                                                                                | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |  |              | 10. Containers |                             | 11. Total Quantity | 12. Unit Wt./Vol.           | 13. Waste Codes    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              | No.            | Type                        |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 1.                                                                                                                                                                                                                    |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 2.                                                                                                                                                                                                                    |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 3.                                                                                                                                                                                                                    |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 4.                                                                                                                                                                                                                    |                                                                                                                |  |              |                |                             |                    |                             |                    |
| 14. Special Handling Instructions and Additional Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| 15. <b>GENERATOR'S/OFFEROR'S CERTIFICATION:</b> I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.<br>I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| Generator's/Offor's Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                       |                                                                                                                |  | Signature    |                |                             |                    | Month                       | Day Year           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| TRANSPORTER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____<br>Transporter signature (for exports only): _____ Date leaving U.S.: _____   |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 17. Transporter Acknowledgment of Receipt of Materials                                                                                                                                                                |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Transporter 1 Printed/Typed Name                                                                                                                                                                                      |                                                                                                                |  |              | Signature      |                             |                    |                             | Month Day Year     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Transporter 2 Printed/Typed Name                                                                                                                                                                                      |                                                                                                                |  |              | Signature      |                             |                    |                             | Month Day Year     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| DESIGNATED FACILITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 18. Discrepancy                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Manifest Reference Number: _____                                                                                                                                                                                      |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 18b. Alternate Facility (or Generator)                                                                                                                                                                                |                                                                                                                |  |              |                |                             |                    |                             | U.S. EPA ID Number |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Facility's Phone:                                                                                                                                                                                                     |                                                                                                                |  |              |                |                             |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 18c. Signature of Alternate Facility (or Generator)                                                                                                                                                                   |                                                                                                                |  |              |                |                             |                    |                             | Month Day Year     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                       | 2.                                                                                                             |  | 3.           |                | 4.                          |                    |                             |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |
| Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                       |                                                                                                                |  | Signature    |                |                             |                    | Month Day Year              |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                       |                                                                                                                |  |              |                |                             |                    |                             |                    |

## APPENDIX E

### WASTE PROFILES

**GENERATOR WASTE PROFILE SHEET**

Requested Disposal Facility: \_\_\_\_\_  
an Allied Waste Company

Waste Profile #

**I. Generator Information**

Date:

Generator Name:

Generator Site Address:

City: County: State: Zip:

Generator State ID Number: SIC Code Number:

Generator Mailing Address (if different):

City: County: State: Zip:

Generator Contact Name:

Phone Number: Fax Number:

**II. Transporter Information**

Transporter Name:

Transporter Address:

City: County: State: Zip:

Transporter Contact Name:

Phone Number: Fax Number:

State Transportation Number:

**III. Waste Stream Information**

Name of Waste:

Process Generating Waste:

Type of Waste: ☐ INDUSTRIAL PROCESS WASTE or ☐ POLLUTION CONTROL WASTE

Physical State: ☐ SOLID ☐ SEMI-SOLID ☐ POWDER ☐ LIQUID ☐ OTHER: \_\_\_\_\_

Method of Shipment: ☐ BULK ☐ DRUM ☐ BAGGED ☐ OTHER: \_\_\_\_\_

Estimated Annual Volume: ☐ CUBIC YARDS: \_\_\_\_\_ ☐ TONS: \_\_\_\_\_ ☐ OTHER: \_\_\_\_\_

Frequency: ☐ ONE TIME ☐ DAILY ☐ WEEKLY ☐ MONTHLY ☐ OTHER: \_\_\_\_\_

Special Handling Instructions:

**IV. Representative Sample Certification**

☐ NO SAMPLE TAKEN

Is the representative sample collected to prepare this profile and laboratory analysis, collected in accordance with U.S. EPA 40 CFR 261.20(c) guidelines or equivalent rules?

☐ YES or ☐ NO

Sample Date: Type of Sample: ☐ COMPOSITE SAMPLE ☐ GRAB SAMPLE

Sampler's Employer:

Sampler's Name (printed): Signature:

**GENERATOR WASTE PROFILE SHEET (continued)**

Waste Profile #

**V. Physical Characteristics of Waste**

Characteristic Components

% by Weight (range)

1.

2.

3.

|        |                  |                                                                                                |           |     |                          |                     |
|--------|------------------|------------------------------------------------------------------------------------------------|-----------|-----|--------------------------|---------------------|
| Color: | Odor (describe): | Free Liquids:<br><input type="checkbox"/> YES or <input type="checkbox"/> NO<br>Content _____% | % Solids: | pH: | Flash Point:<br>_____ °F | Phenol<br>_____ ppm |
|--------|------------------|------------------------------------------------------------------------------------------------|-----------|-----|--------------------------|---------------------|

**Attach Laboratory Analytical Report (and/or Material Safety Data Sheet)  
Including Required Parameters Provided for this Profile**

|                                                                                                                                                                                                                                                                 |                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| Does this waste or generating process contain regulated concentrations of the following Pesticides and/or Herbicides: Chlordane, Endrin, Heptachlor (and it epoxides), Lindane, Methoxychlor, Toxaphene, 2,4-D, or 2,4,5-TP Silvex as defined in 40 CFR 261.33? | <input type="checkbox"/> YES or <input type="checkbox"/> NO |
| Does this waste or generating process cause it to exceed OSHA exposure limits from high levels of Hydrogen Sulfide or Hydrogen Cyanide as defined in 40 CFR 261.23?                                                                                             | <input type="checkbox"/> YES or <input type="checkbox"/> NO |
| Does this waste contain regulated concentrations of Polychlorinated Biphenyls (PCBs) as defined in 40 CFR Part 761?                                                                                                                                             | <input type="checkbox"/> YES or <input type="checkbox"/> NO |
| Does this waste contain regulated concentrations of listed hazardous wastes defined in 40 CFR 261.31, 261.32, 261.33, including RCRA F-Listed Solvents?                                                                                                         | <input type="checkbox"/> YES or <input type="checkbox"/> NO |
| Does this waste contain regulated concentrations of 2,3,7,8-Tetrachlorodibenzodioxin (2,3,7,8-TCDD), or any other dioxin as defined in 40 CFR 261.31?                                                                                                           | <input type="checkbox"/> YES or <input type="checkbox"/> NO |
| Is this a regulated Toxic Material as defined by Federal and/or State regulations?                                                                                                                                                                              | <input type="checkbox"/> YES or <input type="checkbox"/> NO |
| Is this a regulated Radioactive Waste as defined by Federal and/or State regulations?                                                                                                                                                                           | <input type="checkbox"/> YES or <input type="checkbox"/> NO |
| Is this a regulated Medical or Infectious Waste as defined by Federal and/or State regulations?                                                                                                                                                                 | <input type="checkbox"/> YES or <input type="checkbox"/> NO |
| Is this waste generated at a Federal Superfund Clean Up Site?                                                                                                                                                                                                   | <input type="checkbox"/> YES or <input type="checkbox"/> NO |

**VI. Generator Certification**

I hereby certify that to the best of my knowledge and belief, the information contained herein is a true and accurate description of the waste material being offered for disposal. I further certify that by utilizing this profile, neither myself nor any other employee of the company will deliver for disposal or attempt to deliver for disposal any waste which is classified as toxic waste, hazardous waste or infectious waste, or any other waste material this facility is prohibited from accepting by law. Our company hereby agrees to fully indemnify this disposal facility against any damages resulting from this certification being inaccurate or untrue. I further certify that the company has not altered the form or content of this profile sheet as provided by Allied Waste Industries, Inc.

AUTHORIZED REPRESENTATIVE NAME AND TITLE (Printed)

COMPANY NAME

AUTHORIZED REPRESENTATIVE SIGNATURE

DATE

**VII. Allied Waste Decision**☐ Approved☐ Rejected

Expiration: \_\_\_\_\_

Conditions:

Name, Title

Signature

Date

To change data in this form, use the EQ WCR Application.  
To download the EQ WCR Application please visit [www.EQOnline.com/Services/Software](http://www.EQOnline.com/Services/Software).

Tracking # \_\_\_\_\_

## EQ - The Environmental Quality Company

### WASTE CHARACTERIZATION REPORT

☐ I authorize EQ - The Environmental Quality Company to choose the appropriate method of waste management, from the technologies offered, at the EQ facilities identified below.

|                                                                                                                |                                                                                                    |                          |
|----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|--------------------------|
| <input type="checkbox"/> <b>Michigan Disposal Waste Treatment Plant</b><br>(Stabilization and Treatment)       | 49350 N. I-94 Service Drive, Belleville, MI 48111<br>Phone: 800-592-5489 Fax: 800-592-5329         | EPA ID # MID 000 724 831 |
| <input type="checkbox"/> <b>Wayne Disposal, Inc. Site #2 Landfill</b><br>(Stabilization and Treatment)         | 49350 N. I-94 Service Drive, Belleville, MI 48111<br>Phone: 800-592-5489 Fax: 800-592-5329         | EPA ID # MID 048 090 633 |
| <input type="checkbox"/> <b>EQ Detroit, Inc.</b><br>(Stabilization, Wastewater Treatment)                      | 1923 Frederick Street, Detroit, MI 48211<br>Phone: 313 923-0080 Fax: 313-923-3375                  | EPA ID # MID 980 991 566 |
| <input type="checkbox"/> <b>EQ Resource Recovery, Inc.</b><br>(Solvent Recycling, Fuel Blending, WW Treatment) | 36345 Van Born Road, Romulus, MI 48174<br>Phone: 866-373-8357 Fax: 734-326-4033                    | EPA ID # MID 060 975 844 |
| <input type="checkbox"/> <b>EQ North Carolina</b><br>(Stabilization, Treat., Labpack Decommissioning)          | 1004 Investment Blvd, Apex, NC 27502<br>Phone: 919-363-4700 Fax: 919-363-4714                      | EPA ID # NCD 982 170 292 |
| <input type="checkbox"/> <b>EQ Florida, Inc.</b><br>(Drum Consolidation, Labpack Decommissioning)              | 7202 East 8 <sup>th</sup> Ave, Tampa, FL 33619<br>Phone: 813-623-5463 Fax: 813-628-0842            | EPA ID # FLD 981 932 494 |
| <input type="checkbox"/> <b>EQ Transfer &amp; Processing</b><br>(Drum Transfer/Non-Hazardous Waste Processing) | 1010 Old Rawsonville Rd., Ypsilanti, MI 48198<br>Phone: 734-547-1000 Fax: 734-480-9195             | EPA ID # MI0 000 263 871 |
| <input type="checkbox"/> <b>EQ Indianapolis</b><br>(Drum Transfer/Non-Hazardous Waste Processing)              | 4000 West 10 <sup>th</sup> Street, Indianapolis, IN 46222<br>Phone: 317-247-7160 Fax: 317-247-7170 | EPA ID # MI0 000 263 871 |
| <input type="checkbox"/> <b>EQ Atlanta</b><br>(Drum Transfer/Non-Hazardous Waste Processing)                   | 5600 Fulton Industrial Blvd SW, Atlanta, GA 30336<br>Phone: 404-494-3520 Fax: 404-494-3560         | EPA ID # MI0 000 263 871 |
| <input type="checkbox"/> <b>EQ Augusta, Inc.</b><br>(Wastewater Treatment)                                     | 3920 Goshen Industrial Blvd, Augusta, GA 30906<br>Phone: 706-771-9100 Fax: 706-771-9124            | EPA ID # GAR 000 011 817 |

Waste Common Name: \_\_\_\_\_

#### Section 1 - Generator & Customer Information

SIC/NAICS\* \_\_\_\_\_

Generator EPA ID # \_\_\_\_\_

Generator \_\_\_\_\_

Facility Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

County \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Generator Contact \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Internal Use Only: EQ Division \_\_\_\_\_

EQ Customer No. \_\_\_\_\_

Invoicing Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_

Invoicing Contact \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Technical Contact \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mobile \_\_\_\_\_ Pager \_\_\_\_\_

Email \_\_\_\_\_

\* For a list of NAICS codes, please refer to Section 9 of the EQ Resource Guide.

#### Section 2 - Shipping & Packaging Information

2.1) Shipping Volume & Frequency \_\_\_\_\_ ☐ One Time Only ☐ Year ☐ Quarter ☐ Month

2.2) DOT Shipping Name \_\_\_\_\_

2.3) Is this waste surcharge exempt? ☐ Yes ☐ No (If yes, please attach a surcharge exemption form, found in Section 2 of the EQ Resource Guide.)

## 2.4) Packaging (check all that apply)

- ☐ Bulk Solid (Yd<sup>3</sup> < 2000 lbs/yd<sup>3</sup>) ☐ Bulk Solid (Ton > 2000 lbs/yd<sup>3</sup>) ☐ Bulk Liquids (Gallon)  
☐ Totes, Size \_\_\_\_\_ ☐ Cubic Yard Boxes/Bags ☐ Drums  
☐ Other (palletized, 5 gal. Pail, etc.) \_\_\_\_\_

Quoted bulk disposal charges for solid materials will be billed by the cubic yard, if the waste density is less than 2,000lbs./cubic yard. If waste density is greater than 2,000 lbs./cubic yard, then bulk disposal charges will be billed by the ton, regardless of the approved container.

---

**Section 3 - Physical Characteristics**

- 3.1) Color \_\_\_\_\_ 3.2) Odor \_\_\_\_\_
- 3.3) Does this waste contain any "Potentially Odorous Constituents" as defined in the EQ Resource Guide? (Section 3) ☐ Yes ☐ No
- 3.4) Physical State at 70°F: ☐ Solid ☐ Dust ☐ Liquid ☐ Sludge
- 3.5) What is the pH of this waste? ☐ <2 ☐ 2.1-4.9 ☐ 5-10 ☐ 10.1-12.4 ☐ >12.5
- 3.6) What is the flash point of this waste? ☐ <90°F ☐ 90-139°F ☐ 140-199°F ☐ >=200°F
- 3.7) Does this waste contain? (check all that apply) ☐ None ☐ Free Liquids ☐ Oily Residue ☐ Metal Fines  
☐ Biodegradable Sorbants ☐ Amines ☐ Ammonia ☐ Dioxins ☐ Furans ☐ Biohazard  
☐ Shock Sensitive Waste ☐ Reactive Waste ☐ Radioactive Waste ☐ Explosives ☐ Pyrophoric Waste ☐ Isocyanates  
☐ Asbestos - non-friable ☐ Asbestos - friable

---

**Section 4 - Waste Composition and Generating Process**

- 4.1) Describe the physical composition of the waste (i.e., soil, water, PPE, debris, key chemical compounds, etc.)
- |       |    |       |   |
|-------|----|-------|---|
| _____ | to | _____ | % |
| _____ | to | _____ | % |
| _____ | to | _____ | % |
| _____ | to | _____ | % |
- 4.2) Provide a detailed description of the process generating this waste (attach flow diagram if available).
- \_\_\_\_\_

---

**Section 5 - Hazardous or Non-Hazardous Waste?**

Please refer to Section 5 of the EQ Resource Guide for a list of waste codes

As determined by 40 CFR, Part 261 and State Rules:

- 5.1) Is this an EPA RCRA listed hazardous waste (F, K, P or U)? ☐ Yes ☐ No

Comments:

- 5.2) Is this an EPA RCRA characteristic hazardous waste (D001-D043)? ☐ Yes ☐ No

Comments:

- 5.3) Do any State Waste Codes apply? ☐ Yes ☐ No

Comments:

- 5.4) Is this waste intended for wastewater treatment? ☐ Yes\* ☐ No

**If you answered 'no' to 5.1, 5.2, and 5.3, please skip to Section 7. \*If you answered 'yes' to 5.4, please attach the Waste Characterization Report Addendum found in Section 7 of the EQ Resource Guide.**

---

**Section 6 - Hazardous Wastes**

- 6.1) Does this waste exceed Land Disposal Restriction levels? ☐ Yes ☐ No
- 6.1a) If this waste stream is greater than 50% soil, does it meet the alternative soil treatment standards of 40 CFR 268.49? ☐ Yes ☐ No
- 6.1b) Does this waste contain greater than 50% debris, by volume? (Debris is greater than 2.5 inches in size.) ☐ Yes ☐ No
- 6.2) Is the waste an oxidizer (D001)? ☐ Yes ☐ No
- 6.3) Does this waste contain reactive cyanide > 250 ppm (D003)? ☐ Yes ☐ No
- 6.4) Does this waste contain reactive sulfide > 500 ppm (D003)? ☐ Yes ☐ No
- 6.5) Please indicate which constituent concentrations are below or above the regulatory level. Please indicate the basis used in the determination. Either "Below" or "Above" MUST be checked for each constituent.

Based On: ☐ Generator Knowledge ☐ Analysis\* ☐ MSDS\* \* Please attach a copy.

| Code | Regulatory Level | Concentration | Code | Regulatory Level | Concentration |
|------|------------------|---------------|------|------------------|---------------|
|------|------------------|---------------|------|------------------|---------------|

|      | TCLP (mg/l)          |      | (if above)                                              |  | TCLP (mg/l) |                       | (if above)                                                    |
|------|----------------------|------|---------------------------------------------------------|--|-------------|-----------------------|---------------------------------------------------------------|
| D004 | Arsenic              | 5    | <input type="radio"/> Below <input type="radio"/> Above |  | D024        | m-Cresol              | 200 <input type="radio"/> Below <input type="radio"/> Above   |
| D005 | Barium               | 100  | <input type="radio"/> Below <input type="radio"/> Above |  | D025        | p-Cresol              | 200 <input type="radio"/> Below <input type="radio"/> Above   |
| D006 | Cadmium              | 1    | <input type="radio"/> Below <input type="radio"/> Above |  | D026        | Cresols               | 200 <input type="radio"/> Below <input type="radio"/> Above   |
| D007 | Chromium             | 5    | <input type="radio"/> Below <input type="radio"/> Above |  | D027        | 1,4-Dichlorobenzene   | 7.5 <input type="radio"/> Below <input type="radio"/> Above   |
| D008 | Lead                 | 5    | <input type="radio"/> Below <input type="radio"/> Above |  | D028        | 1,2-Dichloroethane    | 0.5 <input type="radio"/> Below <input type="radio"/> Above   |
| D009 | Mercury              | 0.2  | <input type="radio"/> Below <input type="radio"/> Above |  | D029        | 1,1-Dichloroethylene  | 0.7 <input type="radio"/> Below <input type="radio"/> Above   |
| D010 | Selenium             | 1    | <input type="radio"/> Below <input type="radio"/> Above |  | D030        | 2,4-Dinitrotoluene    | 0.13 <input type="radio"/> Below <input type="radio"/> Above  |
| D011 | Silver               | 5    | <input type="radio"/> Below <input type="radio"/> Above |  | D031        | Heptachlor            | 0.008 <input type="radio"/> Below <input type="radio"/> Above |
| D012 | Endrin               | 0.02 | <input type="radio"/> Below <input type="radio"/> Above |  | D032        | Hexachlorobenzene     | 0.13 <input type="radio"/> Below <input type="radio"/> Above  |
| D013 | Lindane              | 0.4  | <input type="radio"/> Below <input type="radio"/> Above |  | D033        | Hexachlorobutadiene   | 0.5 <input type="radio"/> Below <input type="radio"/> Above   |
| D014 | Methoxychlor         | 10   | <input type="radio"/> Below <input type="radio"/> Above |  | D034        | Hexachloroethane      | 3.0 <input type="radio"/> Below <input type="radio"/> Above   |
| D015 | Toxaphene            | 0.5  | <input type="radio"/> Below <input type="radio"/> Above |  | D035        | Methyl Ethyl Ketone   | 200 <input type="radio"/> Below <input type="radio"/> Above   |
| D016 | 2,4-D                | 10   | <input type="radio"/> Below <input type="radio"/> Above |  | D036        | Nitrobenzene          | 2 <input type="radio"/> Below <input type="radio"/> Above     |
| D017 | 2,4,5-TP (Silvex)    | 1    | <input type="radio"/> Below <input type="radio"/> Above |  | D037        | Pentachlorophenol     | 100 <input type="radio"/> Below <input type="radio"/> Above   |
| D018 | Benzene              | 0.5  | <input type="radio"/> Below <input type="radio"/> Above |  | D038        | Pyridine              | 5 <input type="radio"/> Below <input type="radio"/> Above     |
| D019 | Carbon Tetrachloride | 0.5  | <input type="radio"/> Below <input type="radio"/> Above |  | D039        | Tetrachloroethylene   | 0.7 <input type="radio"/> Below <input type="radio"/> Above   |
| D020 | Chlordane            | 0.03 | <input type="radio"/> Below <input type="radio"/> Above |  | D040        | Trichloroethylene     | 0.5 <input type="radio"/> Below <input type="radio"/> Above   |
| D021 | Chlorobenzene        | 100  | <input type="radio"/> Below <input type="radio"/> Above |  | D041        | 2,4,5-Trichlorophenol | 400 <input type="radio"/> Below <input type="radio"/> Above   |
| D022 | Chloroform           | 6.0  | <input type="radio"/> Below <input type="radio"/> Above |  | D042        | 2,4,6-Trichlorophenol | 2 <input type="radio"/> Below <input type="radio"/> Above     |
| D023 | o-Cresol             | 200  | <input type="radio"/> Below <input type="radio"/> Above |  | D043        | Vinyl Chloride        | 0.2 <input type="radio"/> Below <input type="radio"/> Above   |

6.6) If this is a characteristic hazardous waste, does it contain underlying hazardous constituents? ☐ Yes ☐ No  
If yes, please list the constituents in Section 11

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**Section 7 - Non-Hazardous Wastes***For a complete list of non-hazardous waste codes, please refer to Section 7 of the EQ Resource Guide*

7.1) Is this a Michigan non-hazardous liquid industrial waste? ☐ Yes ☐ No  
Comments: \_\_\_\_\_

7.2) Is this a Universal waste? ☐ Yes ☐ No

7.3) Is this a Recyclable Commodity? (e.g.: computer monitors, free mercury, etc.) ☐ Yes ☐ No

7.4) Is this waste a recoverable petroleum product? ☐ Yes\* ☐ No

7.5) Is this waste used oil as defined by 40 CFR Part 279? ☐ Yes\* ☐ No  
*If you answered 'yes' to questions 7.4 or 7.5 please attach the Waste Characterization Report Addendum found in Section 7 of the EQ Resource Guide.*

---

**Section 8 - TSCA Information**

8.1) What is the concentration of PCBs in the waste? ☐ None ☐ 0-5 ppm ☐ 6-49 ppm ☐ 50-499 ppm ☐ 500+ ppm

8.2) Does the waste contain PCB contamination from a source with a concentration > 50 ppm? ☐ Yes ☐ No  
*If you answered "no" to 8.1 and 8.2, please skip to Section 9.*

8.3) Has this waste been processed into a non-liquid form? ☐ Yes ☐ No  
If yes, what was the concentration of PCBs prior to processing? ☐ N/A ☐ 0-499 ppm ☐ 500+ ppm

8.4) Is the non-liquid PCB waste in the form of soil, rags, debris, or other contaminated media? ☐ Yes ☐ No

8.5) Are you a PCB capacitor manufacturer or a PCB equipment manufacturer? ☐ Yes ☐ No

8.6) Has the PCB Article (e.g., transformer, hydraulic machine, PCB-contaminated electrical equipment) been drained/flushed of all PCBs and decontaminated in accordance with 40 CFR 761.60(b)? ☐ N/A ☐ Yes ☐ No

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**Section 9 - Clean Air Act Information**

9.1) Is this waste subject to regulation under 40 CFR, Part 63, Subpart DD or 40 CFR, Part 264, Subpart CC (RCRA)? ☐ Yes ☐ No  
(Does the waste contain >500 ppm Volatile Organic Hazardous Air Pollutants - VOHAP's or Volatile Organic Compounds - VOC's?)  
*For a complete list of VOHAP's, please see Section 11 of the EQ Resource Guide*

9.2) Does this waste stream contain Benzene? ☐ Yes ☐ No  
*If you answered "no" to 9.2, please skip to Section 10*

9.3) Does the waste stream come from a facility with one of the SIC codes listed under the NESHAP?\* ☐ Yes ☐ No

9.4) Is the generating source of this waste stream a facility with Total Annual Benzene (TAB) >10 Mg/year? ☐ Yes ☐ No  
For assistance in calculating the TAB, please see the TAB Worksheet in Section 9 of the EQ Resource Guide.  
*If you answered "no" to question 9.3 and 9.4, please skip to Section 10.*

- 9.5) Does the waste contain >10% water? ☐ Yes ☐ No
- 9.6) What is the TAB quantity for your facility? \_\_\_\_\_ Mg/Year
- 9.7) Does the waste contain >1.0 mg/kg total Benzene? ☐ Yes ☐ No
- 9.8) What is the total Benzene concentration in your waste? (concentration) \_\_\_\_\_ (unit) \_\_\_\_\_.

(Do not use TCLP analytical results. Acceptable laboratory methods include 8020, 8240, 8260, 602 and 624.)

|                 |                                                                                                                                                                      |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| *NESHAP<br>SIC: | 2812 2813 2816 2819 2821 2822 2823 2824 2833 2834 2835 2836 2841 2842 2843 2844 2851 2861 2865 2869 2873 2874 2875 2879 2891 2892 2893 2895 2899 2911 3312 4953 9511 |
|                 | *For a list of NAICS codes, please refer to Section 9 of the EQ Resource Guide.                                                                                      |

#### Section 10 - Fuel Blending Information

- 10.1) Is this waste intended for fuel blending? ☐ Yes\* ☐ No
- \*If yes, Heat value \_\_\_\_\_ (BTU/lb.) Chlorine (%) \_\_\_\_\_ Water (%) \_\_\_\_\_ Solids (%) \_\_\_\_\_
- 10.2) Is this waste intended for reclamation? ☐ Yes\* ☐ No (5-Gallon Sample required for all reclaim waste streams)

#### Section 11 - Constituent Information

Please identify your waste constituents from these four categories: **Underlying Hazardous Constituents (UHC's)**, **Volatile Organic Hazardous Air Pollutants (VOHAP's)**, **Volatile Organic Compounds (VOC's)** and **Toxic Release Inventory Constituents (TRI)**

| Constituent | Concentration | UHC?                      |                          |
|-------------|---------------|---------------------------|--------------------------|
| _____       | _____         | <input type="radio"/> Yes | <input type="radio"/> No |
| _____       | _____         | <input type="radio"/> Yes | <input type="radio"/> No |
| _____       | _____         | <input type="radio"/> Yes | <input type="radio"/> No |
| _____       | _____         | <input type="radio"/> Yes | <input type="radio"/> No |
| _____       | _____         | <input type="radio"/> Yes | <input type="radio"/> No |
| _____       | _____         | <input type="radio"/> Yes | <input type="radio"/> No |

Please see Section 11 of the EQ Resource Guide for a list of UHC's, VOHAP's and VOC's. For a complete list of TRI constituents, please refer to 40 CFR 372.65.

#### Section 12 - Certification

I certify that all information (including attachments) is complete and factual and is an accurate representation of the known and suspected hazards, pertaining to the waste described herein. I authorize EQ's Resource Team to add supplemental information to the waste approval file, provided I am contacted and give verbal permission. I authorize EQ's Resource Team to obtain a sample from any waste shipment for purposes of verification and confirmation. I agree that, if EQ approves the waste described herein, all such wastes that are transported, delivered, or tendered to EQ by Generator or on Generator's behalf shall be subject to, and Generator shall be bound by, the attached Standard Terms and Conditions.

Comments:

Generator Signature \_\_\_\_\_ Printed Name \_\_\_\_\_

Company \_\_\_\_\_ Title \_\_\_\_\_ Date 11/20/2006

The generator's signature **MUST** appear on the EQ Waste Characterization Report. If the generator has authorized a third party to certify this document, a written notice (on generator letterhead) must accompany this submittal. Although the EQ Resource Team is authorized to make certain modifications to the information provided on this form, the addition or removal of waste codes and waste constituents must be documented by the generator.

## **STANDARD TERMS AND CONDITIONS**

The Agreement between the Customer and EQ - The Environmental Quality Company and/or its member companies (hereinafter "EQ") related to or associated with Delivered Waste, as herein defined, shall be governed by the following Standard Terms and Conditions in addition to the terms and conditions contained in any Waste Characterization Report, Customer Approval Quote Confirmation, Generator Approval Notification, Notice of Waste Approval Expiration, and/or Credit Agreement associated with such Delivered Waste. The Customer may use its standard forms (such as purchase orders, acknowledgments of orders, and invoices) to administer its dealings under this Agreement for convenience purposes, but all provisions thereof in conflict with these terms and conditions shall be deemed stricken.

### **Definitions**

The following definitions shall apply for purposes of this Agreement:

**"Acceptable Waste"** shall mean any hazardous waste, as defined under applicable State or federal law, determined by EQ as acceptable for treatment and/or disposal in accordance with this Agreement.

**"Delivered Wastes"** shall mean all wastes (i) which are transported, delivered, or tendered to EQ by the Customer; (ii) which the Customer has arranged for the transport, delivery or tender to EQ; or (iii) ) which are transported, delivered, or tendered to EQ under a Credit Agreement between the Customer and EQ.

**"Non-Conforming Wastes"** shall mean wastes that (a) are not in accordance in all material respects with the warranties, descriptions, specifications or limitations stated in the Waste Characterization Report and this Agreement; (b) have constituents or components of a type or concentration not specifically identified in the Waste Characterization Report (i) which increase the nature or extent of the hazard and risk undertaken by EQ in treating and/or disposing of the waste, or (ii) for whose treatment and/or disposal a Waste Management Facility is not designed or permitted, or (iii) which increase the cost of treatment and/or disposal of waste beyond that specified in EQ's price quote; or (c) are not properly packaged, labeled, described, or placarded, or otherwise not in compliance with United States Department of Transportation and United States Environmental Protection Agency regulations.

### **Control of Operations.**

EQ shall have sole control over all aspects of the operation of any treatment and/or disposal facility of EQ receiving Delivered Wastes under this Agreement (hereinafter, "Waste Management Facility"), including, without limitation, maintaining EQ's desired volume of Acceptable Wastes being delivered to any Waste Management Facility by the Customer or any other person or entity.

### **Identification of Waste.**

For each waste material to be transported, delivered, or tendered to EQ under this Agreement, the Customer shall provide, or cause to be provided, to EQ a representative sample of the waste material and a completed Waste Characterization Report containing a physical and chemical description or analysis of such waste material, which description shall conform with any and all guidelines for waste acceptance provided by EQ. On the basis of EQ's analysis of such representative sample of the waste material and such Waste Characterization Report, EQ will determine whether such wastes are Acceptable Wastes. EQ does not make any guarantee that it will handle any waste material or any particular quantity or type of waste material, and EQ reserves the right to the decline to transport, treat and/or dispose of waste material. The Customer shall promptly furnish to EQ any information regarding known, suspected or planned changes in the composition of the waste material. Further, the Customer shall promptly inform EQ of any change in the characteristic or condition of the waste material which becomes known to the Customer subsequent to the date of the Waste Characterization Report.

### **Non-Conforming Wastes.**

In the event that EQ at any time discovers that any Delivered Waste is Non-Conforming Waste, EQ may reject or revoke its acceptance of the Non-Conforming Waste. The Customer shall have seven (7) days to direct an alternative lawful manner of disposition of the waste, unless it is necessary by reason of law or otherwise to move the Non-Conforming Waste prior to expiration of the seven (7) day period. If the Customer does not direct an alternative disposal, at its option, EQ may return any such Non-Conforming Wastes to the Customer, and the Customer shall pay or reimburse EQ for all costs and expenses incurred by EQ in connection with the receipt, handling, sampling, analyses, transportation and return to the Customer of such Non-Conforming Wastes. If it is impossible or impractical for EQ to return the Non-Conforming Waste to the Customer, the Customer shall reimburse EQ for all costs, of any type or nature whatsoever, incurred by EQ, solely because such Delivered Waste was Non-Conforming Waste (including, but not limited to, all costs associated with any remedial steps necessary, due to the nature of the Non-Conforming Waste, in connection with material with which the Non-Conforming Waste may have been commingled and all expenses and charges for analyzing, handling, locating, preparing for transporting, storing and disposing of any Non-Conforming Waste).

### **Customer Warranty - Acceptable Wastes.**

All Delivered Wastes shall be Acceptable Wastes and shall conform in all material respects to the description and specifications contained in the Waste Characterization Report. The information set forth in the Waste Characterization Report or any manifest, placard or label associated with any Delivered Wastes, or otherwise represented by the Customer or the generator (if other than the Customer) to EQ, is and shall be true, accurate and complete as of the date of receipt of the involved waste by EQ.

### **Customer Warranty - Title to Wastes.**

Either the Customer or the generator (if other than the Customer) shall hold clear title, free of any all liens, claims, encumbrances, and charges to Delivered Waste until such waste is accepted by EQ.

### **Customer Warranty - Compliance with Laws.**

The Customer shall comply with all applicable federal, state and local environmental statutes, regulations, and other governmental requirements, as well as directives issued by EQ from time to time, governing the transportation, treatment and/or disposal of Acceptable Wastes, including, but not limited to, all packaging, manifesting, containerization, placarding and labeling requirements.

### **Customer Warranty - Updating Information.**

If the Customer receives information that Delivered Waste or other hazardous waste described in the Waste Characterization Report, or some component of such waste, presents or may present a hazard or risk to persons, property or the environment which was not disclosed to EQ, or if the Customer or generator (if other than the Customer) has changed the process by which such waste results, the Customer shall promptly report such information to EQ in writing.

### **Customer Indemnity.**

The Customer shall indemnify, defend and hold harmless EQ, and its affiliated or related companies, and all of their respective present or future officers, directors, shareholders, employees and agents from and against any and all losses, damages, liabilities, penalties, fines, forfeitures, demands, claims, causes of action, suits, costs and expenses (including, but not limited to, reasonable costs of defense, settlement, and reasonable attorneys' fees), which may be asserted against any or all of them by any person or any governmental agency, or which any or all of them may hereafter suffer, incur, be responsible for or pay out, as a result of or in connection with bodily injuries (including, but not limited to, death, sickness, disease and emotional or mental distress) to any person (including EQ's employees), damage (including, but not limited to, loss of use) to any property (public or private), or any requirements to conduct or incur expense for investigative, removal or remedial expenses in connection with contamination of or adverse effect on the environment, or any violation or alleged violation of any statutes, ordinances, orders, rules or regulations of any governmental entity or agency, caused or arising out of (i) a breach of this Agreement by the Customer, (ii) the failure of any warranty of the Customer to be true, accurate and complete, or (iii) any willful or negligent act or omission of the Customer, or its employees or agents in connection with the performance of this Agreement.

### **Force Majeure**

EQ shall not be liable for any failure to accept, receive, handle, treat, and/or dispose of Delivered Waste due to an act of God, fire, casualty, flood, war, strike, lockout, labor trouble, failure of public utilities, equipment failure, facility shutdown, injunction, accident, epidemic, riot, insurrection, destruction of operation or transportation facilities, the inability to procure materials, equipment, or sufficient personnel or energy in order to meet operational needs without the necessity of allocation, the failure or inability to obtain any governmental approvals or to meet Environmental Requirements (including, but not limited to voluntary or involuntary compliance with any act, exercise, assertion, or requirement of any governmental authority) which may temporarily or permanently prohibit operations of EQ, the Customer, or the Generator, or any other circumstances beyond the control of EQ which prevents or delays performance of any of its obligations under this Agreement.

### **Governing Laws**

This Agreement shall in all respects be governed by and shall be construed in accordance with the laws of the State of Michigan applied to contracts executed and performed wholly within such state.



## WASTESTREAM INFORMATION PROFILE

☐ Recertification

Disposal Code \_\_\_\_\_

### Veolia ES LOCATION

☐ Invoice Address

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

ST \_\_\_\_\_

☐ Manifest from – blank if direct

Veolia ES TSDF requested \_\_\_\_\_ Technology requested \_\_\_\_\_ Generator No. \_\_\_\_\_ Generator EPA ID No. \_\_\_\_\_

1. Generator Name \_\_\_\_\_ Generator State No. \_\_\_\_\_

Address \_\_\_\_\_ State Wastestream No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country USA ZIP \_\_\_\_\_

NAICS (SIC) Code \_\_\_\_\_ Source \_\_\_\_\_ Origin \_\_\_\_\_ Form \_\_\_\_\_ System Type \_\_\_\_\_

2. Waste Name \_\_\_\_\_ Lab or Waste Area \_\_\_\_\_

3. Process Generating Waste \_\_\_\_\_

4. Shipping Name \_\_\_\_\_

Hazard Class \_\_\_\_\_ UN/NA No. \_\_\_\_\_ PG \_\_\_\_\_ RQ amt \_\_\_\_\_ lb

RQ Desc: 1. \_\_\_\_\_ 2. \_\_\_\_\_

DOT Desc: 1. \_\_\_\_\_ 2. \_\_\_\_\_

5. Waste Codes \_\_\_\_\_

Wastewater ☐ Non Wastewater ☐ Sub Category \_\_\_\_\_

### 6. Physical and chemical properties (check all that apply)

|                                                                                                                                                                                                                |                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                         |                                                                                                                     |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| <b>pH</b><br>a <input type="checkbox"/> < 2<br>b <input type="checkbox"/> 2 - 5<br>c <input type="checkbox"/> 5 - 9<br>d <input type="checkbox"/> 9 - 12.5<br>e <input type="checkbox"/> > 12.5<br>_____ exact | <b>Specific Gravity</b><br>a <input type="checkbox"/> < .8<br>b <input type="checkbox"/> .8 - 1.0<br>c <input type="checkbox"/> 1.0<br>d <input type="checkbox"/> 1.0 - 1.2<br>e <input type="checkbox"/> > 1.2<br>_____ exact | <b>Flash Point (F)</b><br>a <input type="checkbox"/> < 80<br>b <input type="checkbox"/> 80 - 100<br>c <input type="checkbox"/> 101 - 140<br>d <input type="checkbox"/> 141 - 200<br>e <input type="checkbox"/> > 200<br>f <input type="checkbox"/> no flash _____ exact | <b>Solids</b><br>_____ % suspended<br>_____ % settleable<br>_____ % dissolved<br>Free Liquid Range _____ to _____ % | _____ % ash<br>_____ water solubility<br>_____ BTU/lb |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|

#### Physical State

s ☐ solid  
m ☐ semi-solid  
l ☐ liquid  
p ☐ pumpable semi-solid  
f ☐ flowable powder  
g ☐ gas  
a ☐ aerosol  
r ☐ pressurized liquid  
d ☐ debris per 40 CFR 268.45  
h ☐ sharps

#### Hazardous Characteristics

a ☐ air reactive  
w ☐ water reactive  
c ☐ cyanide reactive  
f ☐ sulfide reactive  
e ☐ explosive  
o ☐ oxidizing acid  
p ☐ peroxide former  
r ☐ radioactive or NRC regulated  
s ☐ shock sensitive  
t ☐ temp sensitive  
m ☐ polymerization/monomer  
n ☐ OSHA carcinogen  
I ☐ infectious  
h ☐ inhalation hazard Zone: \_\_\_\_\_

#### Odor

a none ☐  
b mild ☐  
c strong ☐  
describe \_\_\_\_\_

#### Halogens

Br \_\_\_\_\_ % Bromine  
Cl \_\_\_\_\_ % Chlorine  
F \_\_\_\_\_ % Fluorine  
I \_\_\_\_\_ % Iodine

|                            |                                                 |                                               |                                                 |
|----------------------------|-------------------------------------------------|-----------------------------------------------|-------------------------------------------------|
| <b>Layers:</b>             | a <input type="checkbox"/> <b>multilayered:</b> | b <input type="checkbox"/> <b>bi-layered:</b> | c <input type="checkbox"/> <b>single phase:</b> |
| <b>Viscosity by Layer:</b> | Top Layer                                       | Second Layer                                  | Bottom Layer                                    |
|                            | <input type="checkbox"/> high (syrup)           | <input type="checkbox"/> high (syrup)         | <input type="checkbox"/> high (syrup)           |
|                            | <input type="checkbox"/> medium (oil)           | <input type="checkbox"/> medium (oil)         | <input type="checkbox"/> medium (oil)           |
|                            | <input type="checkbox"/> low (water)            | <input type="checkbox"/> low (water)          | <input type="checkbox"/> low (water)            |
|                            | <input type="checkbox"/> solid                  | <input type="checkbox"/> solid                | <input type="checkbox"/> solid                  |

#### Color

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Used oil y/n \_\_\_\_\_ HOC <1000 ppm ☐ or > 1000 ppm ☐

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WIP No. \_\_\_\_\_

7. **Chemical Composition** [M = Marine Pollutant, S - Severe Marine Pollutant, O = Ozone Depleting Substance, U = Underlying Hazardous Constituent,  
B = Benzene NESHA, T = TRI Chemical, C = OSHA Carcinogen]

| Constituents |  |  | Range | Units | Constituents |  |  | Range | Units |
|--------------|--|--|-------|-------|--------------|--|--|-------|-------|
|              |  |  |       |       |              |  |  |       |       |
|              |  |  |       |       |              |  |  |       |       |
|              |  |  |       |       |              |  |  |       |       |
|              |  |  |       |       |              |  |  |       |       |
|              |  |  |       |       |              |  |  |       |       |
|              |  |  |       |       |              |  |  |       |       |
|              |  |  |       |       |              |  |  |       |       |

Total Composition Must Equal or Exceed 100%

- Other:**
8. Is the wastestream being imported into the USA? Yes ☐ No ☐
9. Does the wastestream contain PCBs regulated by 40CFR? Yes ☐ No ☐  
PCB concentration \_\_\_\_\_ppm
10. Is the wastestream subject to the Marine Pollutant Regulations? Yes ☐ No ☐
11. Is the wastestream subject to Benzene NESHA? Yes ☐ No ☐  
If yes, is the wastestream subject to Notification and Control Requirements? Yes ☐ No ☐  
Benzene concentration \_\_\_\_\_ ppm
12. Is the wastestream subject to RCRA subpart CC controls? Yes ☐ No ☐  
Volatile organic concentration, if known \_\_\_\_\_ ppmw  
CC approved analytical method ☐ Generator Knowledge ☐
13. Is the wastestream from a CERCLA or state mandated cleanup? Yes ☐ No ☐

14. **Container Information** (Identify UN container marking if known)  
**Packaging:** Bulk Solid ☐ Type/Size: \_\_\_\_\_ Bulk Liquid ☐ Type/Size: \_\_\_\_\_ Drum ☐ Type/Size: \_\_\_\_\_  
**Other** \_\_\_\_\_  
**Shipping Frequency:** Units \_\_\_\_\_ Per Month ☐ Quarter ☐ Year ☐ One Time ☐ Other \_\_\_\_\_

15. **Additional Information:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is analytical or an MSDS available that describes the waste? Yes ☐ No ☐ If yes, please attach.

**GENERATOR CERTIFICATION**  
I hereby certify that all information submitted in this and all attached documents contains true and accurate descriptions of this waste. Any sample submitted is representative as defined in 40 CFR 261 - Appendix I or by using an equivalent method. All relevant information regarding known or suspected hazards in the possession of the generator has been disclosed. I authorize sampling of any waste shipment for purposes of recertification.

|                      |       |      |
|----------------------|-------|------|
| NAME (PRINT OR TYPE) | PHONE | DATE |
| SIGNATURE            | TITLE |      |

**FACILITY NOTIFICATION**  
If approved for management, Veolia ES has all the necessary permits and licenses for the waste that has been characterized and identified by this profile.

**TSDF PROCESSING USE ONLY: PPE REQUIRED** No \_\_\_\_\_ Yes \_\_\_\_\_ Describe \_\_\_\_\_

## **VEOLIA ENVIRONMENTAL SERVICES**

### **WIP INSTRUCTIONS**

Veolia ES requires completion of all sections of the Wastestream Information Profile (WIP). Sections not applicable to the wastestream must have N/A written in the space provided.

Documented WIP information is used to comply with TSDF Waste Analysis Plans, RCRA and DOT regulations, Emergency Planning and Community Right-to-Know Act (EPCRA), Pollution Prevention Act, Toxic Release Inventory Report and other regulatory and generator requirements.

#### **MARINE POLLUTANT**

- The wastestream is subject to the Marine Pollutant Regulations if:
  1. it is a bulk (>119 gallons) packaging with Marine Pollutant concentration  $\geq 10\%$  or Severe Marine Pollutant concentration  $\geq 1\%$   
or
  2. it is non-bulk Marine Pollutant shipped by vessel (boat) in packages larger than 5 liters (liquid) or 5 kg (solid)  
or
  3. it is a non-bulk Severe Marine Pollutant, shipped by vessel (boat) in packages larger than 0.5 liters (liquid) or 0.5 kg (solid).

Refer to the list of Marine Pollutants.

#### **OZONE DEPLETING SUBSTANCE (ODS)**

Refer to the list of Ozone Depleting Substances.

#### **UNDERLYING HAZARDOUS CONSTITUENT (UHC)**

Refer to the list of Underlying Hazardous Constituents (40 CFR 268.48)

#### **BENZENE NESHAP**

- The wastestream is subject to Benzene NESHAP notification and control requirements if it:
  1. contains > 10 ppm benzene, **and**
  2. is generated by a chemical manufacturing plant, petroleum refinery or coke by-product recovery plant, **and**
  3. the generator's Total Annual Benzene (TAB) is  $\geq 10$  Mg/yr

#### **TRI CHEMICAL**

- The wastestream is subject to Toxic Release Inventory Reporting if it contains a Section 313 Toxic Chemical and meets Qualifier requirements.

#### **OSHA CARCINOGEN**

- OSHA promulgated standards in 1974 to regulate the industrial use of 13 chemicals identified as occupational carcinogens. Exposures are to be controlled through the required use of engineering controls, work practices, and personal protective equipment, including respirators. See 29 CFR 1910.1003-1910.1016 for specific details.

#### **RCRA SUB-PART CC CONTROLS**

- Subpart CC Air Emission Control requirements apply to large quantity hazardous waste generators and to treatment, storage, and disposal facilities.
- Waste in containers greater than 0.1 cubic meters (i.e., 26.4 gallons) with greater than 500 ppm volatile organics are subject to this rule, unless otherwise exempted. Allowable controls include DOT approved containers, containers with an adequate cover and closure devices, and containers which operate with no detectable emissions (less than 500 ppm).