



NewStream

Waste Profile Form

NewStream ID: _____

NewStream, LLC
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Please Note: This Waste Profile Form must be complete and must be accompanied by a Certified Lab Analysis for all compounds known or suspected by the Generator to be contained in the waste stream. Thank you!

GENERATOR'S NAME & ADDRESS:

GENERATOR CONTACT & PHONE NO:

CUSTOMER NAME & PHONE NO:

WASTE NAME:

SPECIAL HANDLING: NO YES (Attach Details)

VOLUME (GALS):

FREQUENCY: 1x WK MO YR

SOURCE & PROCESS DESCRIPTION (Describe name of process, how wastewater is generated and materials in contact with wastewater (e.g. – surfactants, metals, acids, alkalis, lubricants, etc.). Attach extra page if needed:

GENERAL WASTE CHARACTERISTICS:

pH:	% Solids:	% Oils:
Color:	% Settled:	% Free oil:
Odor:	% Suspended:	% Emulsified:

RCRA/TCLP METALS – MG/L:

Arsenic (As):	Barium (Ba):	Cadmium (Cd):	Chromium (Cr):
Lead (Pb):	Mercury (Hg):	Selenium (Se):	Silver (Ag):

OTHER METALS – MG/L:

Aluminum (Al):	Copper (Cu):	Nickel (Ni):	Molybdenum (Mo):
Tin (Sn):	Titanium (Ti):	Vanadium (V):	Zinc (Zn):

ORGANICS & BIO-NUTRIENTS – MG/L:

VOC:	COD:	Nitrogen (N):	Ammonia (NH3):
SVOC:	BOD:	Phosphorous (P):	Other:

OTHER COMPOUNDS – MG/L:

Pesticides:	PCB's:	Halogens:	Sulfides:
Herbicides:	Phenolics:	Cyanides:	Other:

GENERATOR CERTIFICATION: I HEREBY CERTIFY THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED IN THIS AND ALL ATTACHED DOCUMENTS BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THAT THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND ABILITY AND THAT ALL KNOWN AND SUSPECTED HAZARDS HAVE BEEN DISCLOSED.

Authorized Signature:	Title:
Printed Name:	Date: