



"Setting the standard for Soil Treatment"

PROJECT PROFILE SHEET

PROJECT DATA

GENERATOR _____ INVOICE TO _____
SITE NAME _____ ADDRESS _____
ADDRESS _____

CONTACT _____
SITE OWNER _____ PHONE _____ FAX _____
ADDRESS _____ TYPE OF SOIL _____ QUANTITY _____

CONTAMINANT _____
REQUESTED SHIP DATE _____ TRANSPORT CO. _____
LABORATORY & REPORT NO. _____ P.O. NO _____

CERTIFICATION

I, _____ OF _____
(NAME, TITLE) (COMPANY)

(ADDRESS) (CITY, STATE, ZIP)

hereby certify that to the best of my knowledge and belief, the waste presently located at the job site address:

1. Originates from above ground spill or leak. Yes ___ No ___
2. Does not contain detectable levels of polychlorinated biphenyls(PCBs) and is not hazardous waste in accordance with 40CFR261
3. Was sampled for pre-burn analyses using procedures defined in Ch 62-713.510 FAC.
4. Is petroleum contaminated media subject to RCRA UST clean up regulations under Title 40 CFR part 280 YES ___ No ___

Generator/Agent and Title Date

Signature

FOR COMPANY USE ONLY

APPROVED BY _____ APPROVAL NO. _____ SCHEDULED SHIP DATE _____

