UNITED
LIQUID WASTE RECYCLING, LLC
an LJP Company

Waste Stream Profile

715 Morgan Street
Clyman, Wisconsin 53016
Phone: 888-558-9611
Fax: 920-349-1500

A) Client Information

Client Name _____
Street _____
City _____ State _____ Zip_____
Contact Name _____
Phone _____ Fax _____
Email _____

Generator (if different):_____
Street _____
City _____ State _____ Zip_____
Contact Name _____
Phone _____ Fax _____
Email _____

WPDES Permit # (if applicable) _____

B) Waste Description (It is the legal responsibility of the Client and/or Generator to accurately characterize the waste.)

1) Waste is (check all that apply):

☐ Industrial Liquid Waste ☐ By-Product Solid ☐ Sewage Cake Sludge
☐ Industrial Cake Sludge ☐ Sewage Liquid Sludge ☐ Grease Interceptor-Sanitary (NR113)
☐ Food Related Waste ☐ Industrial Process Waste ☐ Grease Interceptor-Industrial (NR214)
☐ Spill Related Sewage Waste ☐ Spill Related Industrial Waste ☐ Spill Related Septage Waste
☐ Septage ☐ Other, please specify: _____

2) Describe how the waste is generated: _____
_____

3) Is this a hazardous waste under Wisconsin Administrative Code NR 518?
(*If yes, waste cannot be accepted.*) ☐ Yes ☐ No

4) Method of Shipment:
☐ Tanker ☐ Roll Off ☐ Drum-Type/Size_____ ☐ Rail ☐ Other_____

5) Frequency of Shipment: ☐ One time ☐ Monthly ☐ Annually ☐ On Call ☐ Other _____

6) Amount of Shipment: _____

7) If the waste is industrial:
a. Is it mixed with domestic/sanitary waste*? ☐ Yes ☐ No ☐ N/A
b. If mixed, does waste go through a pretreatment system? ☐ Yes ☐ No ☐ N/A
**NR 204 exempts industrial sludge, including sewage sludge generated during the treatment of industrial wastewater that is combined with domestic sewage originating at the industrial facilities*

8) Does waste contain a toxic substance such as: Mercury, Cyanide, Phenol, PCBS, etc.? ☐ Yes ☐ No
Please List:_____

C) Physical Data

1) Color_____ 2) Odor: ☐ None ☐ Mild ☐ Strong
3) Check all that applies: ☐ Wet ☐ Dry ☐ Flowable ☐ Stackable/Cake

Waste Stream Profile

D) Waste Composition

Percent Solids	_____ %
Water Content	_____ %
Total	100 %

E) Analytical

1) Sampling analytical is attached: ☐ Yes ☐ No ☐ Pending _____

F) Certification

I, _____certify on behalf of and in the capacity of an agent for _____that the information submitted above, and all attached documents contain true and accurate descriptions of the waste material and acknowledge that such information is submitted to meet all applicable laws, regulations, and permit requirements. I also certify that the waste is not a Hazardous waste, a PCB TSCA waste, or NRC Regulated Radioactive waste. The waste sample, if provided, is representative of the waste material described above. I hereby agree to indemnify and hold United Liquid Waste Recycling, LLC harmless from all costs, damages, liability or other expenses (including but not limited to attorneys and expert witness fees) resulting from any inaccurate, incomplete or misrepresented information provided herein by Generator or Client. I further understand if there are any material changes to the waste, I will promptly notify United Liquid Waste Recycling, LLC.

Generator Signature _____ Title _____ Date _____

FOR OFFICE USE ONLY:

Approved / Denied By: _____Date: _____Approval Number: _____