

FOR EEI USE ABS: _____ Profile Log: _____ Entered by: _____ Date: _____	ENVIRONMENTAL ENTERPRISES, INC. CONFIDENTIAL WASTE PROFILE Page 1 of 2	EEI Approval/Profile # <i>(completed by EEI)</i> _____ Sales Code: _____
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Customer Reference # **PART (A) - GENERAL INFORMATION**

Generator Name: <u>US EPA</u>										Billing Name: <u>Clean Management Environmental</u>									
Contact Name: <u>TOBY V.</u>										Contact Name: <u>Scott Bridgeman</u>									
Address: <u>396 STATE HIGHWAY 34 EAST</u>										Address: <u>P.O. Box 1606</u>									
City: <u>WINNSBORO</u>										City: <u>Walterboro</u>									
State: <u>SC</u> Zip: <u>29180</u>										State: <u>SC</u> Zip: <u>29488</u>									
Area Code + Phone #		<u>313</u>		<u>446</u>		<u>-</u>		<u>6325</u>		Area Code + Phone #		<u>843</u>		<u>538</u>		<u>-</u>		<u>8131</u>	
Area Code + Fax #						<u>-</u>				Area Code + Fax #		<u>843</u>		<u>538</u>		<u>-</u>		<u>7845</u>	
USEPA ID#		<u>S</u>		<u>C</u>		<u>D</u>		<u>0</u>		<u>9</u>		<u>1</u>		<u>3</u>		<u>1</u>		<u>8</u>	
		<u>2</u>		<u>0</u>		<u>4</u>													

PART (B) - GENERAL WASTE INFORMATION

Name of Waste:	HCL
Process Generating:	UNWANTED MATERIAL
Anticipated Volume:	<div style="display: flex; align-items: center;"> <input checked="" type="checkbox"/> _____ Units: <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> Drums _____ Tons </div> <div style="margin-left: 20px;"> <input type="checkbox"/> Gallons _____ Yards </div> <div style="margin-left: 20px;"> <u>Frequency:</u> <div style="display: flex; align-items: center;"> <input type="checkbox"/> Monthly _____ Yearly </div> <div style="margin-left: 20px;"> <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One Time </div> </div> </div>
Size and Type of Container:	55 GALLON DRUMS
DOT Shipping Name:	WASTE CORROSIVE LIQUID, ACIDIC INORGANIC N.O.S
Hazard Class:	<div style="display: flex; justify-content: space-between;"> <u>8</u> UN/NA # <u>UN3264</u> Packing Group: <u>II</u> Samples Included? <input type="checkbox"/> Y <input checked="" type="checkbox"/> X <input type="checkbox"/> N </div>
Special Handling or Precautions:	_____

PART (C) - RCRA CHARACTERISTICS

RCRA Waste Codes: D002						F001 - F005 Solvent Waste:						<input type="checkbox"/>	Y	<input checked="" type="checkbox"/>	X	N				
						Waste is used in electroplating:						<input type="checkbox"/>	Y	<input checked="" type="checkbox"/>	X	N				
Form Code: W						Spill Cleanup						<input type="checkbox"/>	Y	<input checked="" type="checkbox"/>	X	N				
Virgin Product or Chemical:						<input type="checkbox"/>	Y	<input type="checkbox"/>	N	Debris						<input type="checkbox"/>	Y	<input checked="" type="checkbox"/>	X	N
MSDS Attached:						<input type="checkbox"/>	Y	<input type="checkbox"/>	N	Other Information _____										

PART (D) - CHEMICAL COMPOSITION

[illegible]