



ILLINI
Environmental, Inc.

8895 California Drive, PO Box 387
 Caseyville, IL 62232
 Phone: 618-397-1234
 Fax: 618-397-3234

For Office Use Only	MGMT Code:
Rec'd By:	
Approved By:	
Approval Date:	
Recert Date:	
Approval #:	

V.092021

GENERATOR INFORMATION (Material Origin)	
Generator Name:	Contact Name:
Generator Address:	Work Phone #:
Generator City:	Cell Phone #:
Generator State:	Fax Number:
Generator Zipcode:	Email:
Is the waste generated at the above address? Yes <input type="checkbox"/> No <input type="checkbox"/>	Generator EPA ID:
If No, Please List Address:	Generator State ID:
	Site Location ID Number (if different from above):
Hours of Operation:	

BILLING INFORMATION (same as above) <input type="checkbox"/>	TRANSPORTER INFORMATION
Billing Name:	Name:
Address:	Address:
City: State: Zip:	City: State: Zip:
Contact Name:	US EPA Hauler ID #:
Phone Number:	IL SWH ID#
Fax Number:	Sales Representative:
Email:	Contact Number:
P.O. Number: N/A <input type="checkbox"/>	Email:

CHARACTERIZATION OF MATERIAL / WASTE (Material Information)					
Name of Material / Waste:					
Process Generating Material / Waste:					
Physical State:	Liquid: <input type="checkbox"/>	Solid: <input type="checkbox"/>	Sludge: <input type="checkbox"/>	Powder: <input type="checkbox"/>	Other: <input type="checkbox"/>
Viscosity:	Low: <input type="checkbox"/>	Med: <input type="checkbox"/>	High: <input type="checkbox"/>	N/A: <input type="checkbox"/>	Odor: Mild <input type="checkbox"/> Strong <input type="checkbox"/> N/A <input type="checkbox"/>
Free Liquids:	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	Free Liquids:	%	Is the pH within Illini's 3 - 11 range? Yes <input type="checkbox"/> No (please explain) <input type="checkbox"/>
Specific Gravity:			Total Solids:	%	
Layering:	Single: <input type="checkbox"/>	Bi-layer: <input type="checkbox"/>	Multi: <input type="checkbox"/>	Flash Point: Exact: _____	
Color:			<73°: <input type="checkbox"/> 73° - <140°: <input type="checkbox"/> >140°: <input type="checkbox"/>		

CHEMICAL COMPOSITION		RANGE			
		to	%		%
		to	%		%
		to	%		%
		to	%		%
		to	%		%
			TOTAL:		
				TOTAL:	

ANALYTICAL DATA					
Do you have analytical data for the waste stream? Yes <input type="checkbox"/> No <input type="checkbox"/>					
If Yes, please check all that apply: TCLP <input type="checkbox"/> Totals <input type="checkbox"/> BTEX <input type="checkbox"/> Other <input type="checkbox"/> _____					
Please Check Yes or No In Regards to Metals:					
Arsenic	>5.0 ppm	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Barium	>100 ppm	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Cadmium	>1.0 ppm	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Chromium	>5.0 ppm	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Lead	>5.0 ppm	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Mercury	>0.2 ppm	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Selenium	>1.0 ppm	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Silver	>5.0 ppm	Yes <input type="checkbox"/>	No <input type="checkbox"/>		

SHIPPING INFORMATION					
Packaging:	Drum: <input type="checkbox"/>	Tote: <input type="checkbox"/>	CYB: <input type="checkbox"/>	Bulk: <input type="checkbox"/>	Lab-Pack <input type="checkbox"/>
Frequency:	One-Time: <input type="checkbox"/>	Ongoing: <input type="checkbox"/>	Anticipated Volume:		
Is this waste considered a US DOT Hazardous Material? Yes: <input type="checkbox"/> No: <input type="checkbox"/>					
U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number and Packing Group):					
Shipping Name:					
Hazard Class:					
ID Number:					
Packing Group:					
Does this waste contain Federal / State EPA Hazardous Waste Codes: Yes: <input type="checkbox"/> No: <input type="checkbox"/>					
List all Waste Codes (If Any):					

Has the non-hazardous waste stream been declassified by the EPA?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "No", please complete the non-hazardous waste code section.		

NON-HAZARDOUS WASTE CODES	
Each waste stream itemized on the e-manifest is to be accompanied by a waste code. Non-hazardous special waste codes to be used are identified below. Please check which code applies to the waste stream being identified above.	
IL01 - Leaking underground storage tank contaminated soil, sand and clay	<input type="checkbox"/>
IL02 - Other contaminated soil, sand and clay	<input type="checkbox"/>
IL03 - Other contaminated materials	<input type="checkbox"/>
IL04 - PCB solids such as capacitors/carcasses	<input type="checkbox"/>
IL05 - PCB liquids such as transformer & capacitor oils	<input type="checkbox"/>
IL06 - Lab packs	<input type="checkbox"/>
IL07 - Leachate	<input type="checkbox"/>
IL08 - Ashes, incinerator or boiler	<input type="checkbox"/>
IL09 - Municipal WW treatment sludges	<input type="checkbox"/>
IL10 - Industrial WW treatment sludges	<input type="checkbox"/>
IL11 - Food processing waste, off-spec food products	<input type="checkbox"/>
IL12 - Antifreeze	<input type="checkbox"/>
IL13 - Waste/used oil	<input type="checkbox"/>
IL14 - Other organic liquids	<input type="checkbox"/>
IL15 - Other organic solids or sludges	<input type="checkbox"/>
IL16 - Liquids with other metals	<input type="checkbox"/>
IL17 - Solids or sludges with other metals	<input type="checkbox"/>
IL18 - Other inorganic liquids	<input type="checkbox"/>
IL19 - Other inorganic solids or sludges	<input type="checkbox"/>
IL20 - Containerized gas	<input type="checkbox"/>
IL21 - Household hazardous waste from collections	<input type="checkbox"/>

GENERATOR CERTIFICATION:

Does this waste contain any of the following? (Check All That Apply):		
PCBs <input type="checkbox"/>	Radioactive <input type="checkbox"/>	Benzene <input type="checkbox"/>
Asbestos <input type="checkbox"/>	Listed Waste <input type="checkbox"/>	Reactive Cyanide/Sulfide <input type="checkbox"/>
Explosives <input type="checkbox"/>	Pesticide <input type="checkbox"/>	Infectious/Sanitation Waste <input type="checkbox"/>
Halogens <input type="checkbox"/>	Herbicide <input type="checkbox"/>	PFAS (Polyfluoroalkyl Substance) <input type="checkbox"/>
Phenolics <input type="checkbox"/>	TCLP Toxics <input type="checkbox"/>	NONE <input type="checkbox"/>

Is the waste represented by the profile a RCRA Hazardous Waste? Yes No

How has the generator determined this waste material? (Check all that apply)
 Generator Knowledge MSDS (attached) Analytical (Attached) No Attachments

Are there any specific disposal restrictions / handling requirements / requests / exemptions? Explain.

I hereby confirm that I am familiar with the information contained in this and attached documents. The information contained herein is true, accurate and complete. No material fact has been omitted as to make this information misleading. I understand that others may rely on these representations for the safe and legal handling and processing of the materials described herein. I certify that the sample (if submitted) is representative of the actual material in all respects. I will notify Illini Environmental, Inc, in writing, of any waste generating process changes and/or changes to the aboved profiled material prior to shipment. As Generator or Generator's representative, I understand there may be significant penalties for misrepresenting or failure to correctly identify a waste's characteristics.

SIGNATURE (type name for e-signature)

DATE

PRINT NAME

COMPANY / TITLE

NOTES

- * All fields are required to be completed before an approval is granted.
- * A sample with all profiles is preferred, but not required. The only time a sample would be required is at the Technical Service Manager's request.
- * A complete and executed copy of the profile must be obtained prior to delivering material to Illini Environmental, Inc.
- * Profiles cannot be approved without all necessary federal and state ID #s issued.
- * This profile will expire one year from the day that it is approved at Illini Environmental, Inc.
- * THE INFORMATION CONTAINED HEREIN SHALL BE INCORPORATED BY REFERENCE IN AND SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED IN THE SIGNED, APPROVED "PROPOSAL".