



PART I. SOIL GENERATOR INFORMATION

- a. Generator Name: _____
- b. Generator Address: _____ c. Zip Code _____
- d. Address of Soil Generation: _____
- e. Address of Soil Storage (if different from generator address): _____
- f. Type of Facility Soil has been generated from: _____
- g. State DOH Facility ID#: _____
- h. Contact: _____ i. Phone _____

PART II. SOIL INFORMATION

- a. Describe the circumstances by which the soil has been generated.

- b. Describe the method used to determine the presence or absence of contaminants in the soil.

- c. Name of consultant performing sampling

- d. Name of analytical laboratory

- e. Was the sampling and analysis performed in accordance with the DOH Office of Hazard Evaluation and Emergency Response Technical Guidance Manual? Yes No *(If No, explain)*

- f. Site map and map of sample locations attached? Yes No

- g. Sampling source (e.g. drum, pit, stockpile, in site, etc.):

- h. Analytical results attached? Yes No *(If No, explain)*

- i. Amount of Soil (tons and/or cubic yards):

- j. Type of Soil:

- k. Soil Moisture Wet Damp Dry

- l. Soil Color (Munsell Color Chart Code if available):

- m. Strong incidental odor? Yes No *(If yes, describe)*

- n. pH

- o. Is the soil ignitable? Yes No

- p. Is this a federal or state hazardous waste? Yes No

- q. Does this waste contain heavy metals? Yes No

- r. Does the waste contain PCBs? Yes No

- s. Is the waste TSCA waste? Yes No

- t. Is the waste CERCLA or HRS Chapter 128D waste? Yes No

- u. Is the waste the result of a UST removal or response action? Yes No

- v. Does the waste represented by this profile contain dioxins? Yes No

- w. Does the waste represented by this profile contain asbestos? Yes No

- x. Does the waste contain debris? Yes No *(If yes, list debris type)*

y. Personal Protective Equipment Requirements:

z. Does the soil contain radioactive material or disposal regulated by the NRC? Yes No

aa. Does the waste profile and all attachments contain true and accurate descriptions of the waste material, and has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed to the contractor? Yes No

PART III. TRANSPORTATION INFORMATION

a. Method of Shipment Bulk Solid Drum/Box Other: _____

b. Name of Hauler: _____ Phone No. _____

c. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? Yes No

PART IV. ENVIRONMENTAL REPRESENTATIVE'S CERTIFICATION

a. Name: _____ b. Title: _____

c. Employer: _____

The environmental representative's signature certifies that sampling and analysis attached hereto was performed in accordance with the DOH HEER Technical Guidance Manual.

Environmental Representative's Signature

PART V. GENERATOR'S CERTIFICATION

- a. This soil is not a "Hazardous Waste" as defined by EPA or the State of Hawaii.
- b. This waste does not contain regulated concentrations of PCB's (Polychlorinated Biphenyls).
- c. The statements and attachments contain true and accurate descriptions of the soil. All relevant information regarding known or suspected hazards in the possession of the Generator has been disclosed.
- d. The sampling and analysis attached hereto was performed in accordance with the DOH HEER Technical Guidance Manual.
- e. If any changes occur in the character of the soil, the Generator shall notify a Landfill representative immediately.

I have read, understand, and certify the soil being disposed meet the guidelines above and will notify a PVT Landfill representative immediately if any changes occur:

Signature Date

Print Name & Title Company

WASTE DISPOSAL DECISION (For PVT Office use only)

Waste Disposal	<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	
Disposal Method	<input type="checkbox"/> Asbestos Pit	<input type="checkbox"/> Landfill and	<input type="checkbox"/> Phase I or <input type="checkbox"/> Phase II Date: _____
Precautions, Special Handling Procedures, or Limitations on Approval: _____			
Clearance No. _____	Reviewed by: _____	Date: _____	
	Approved by: _____	Date: _____	