



Approval No.:

# WASTE PROFILE SHEET

## INSTRUCTIONS

Please complete the following form. This form must be completed as accurately as possible. Waste cannot be accepted at our facility unless this Waste Profile Sheet has been submitted and approved.

## WASTE GENERATOR AND CONSULTANT INFORMATION

### a) Site Information

Company Name \_\_\_\_\_  
Site Address \_\_\_\_\_  
City/Province \_\_\_\_\_  
Postal Code \_\_\_\_\_

Contact Person \_\_\_\_\_  
Telephone \_\_\_\_\_  
Fax \_\_\_\_\_  
Cell \_\_\_\_\_  
Email \_\_\_\_\_

### b) Client/Broker/Consultant Information

Company Name \_\_\_\_\_  
Site Address \_\_\_\_\_  
City/Province \_\_\_\_\_  
Postal Code \_\_\_\_\_

Contact Person \_\_\_\_\_  
Telephone \_\_\_\_\_  
Fax \_\_\_\_\_  
Cell \_\_\_\_\_  
Email \_\_\_\_\_

### c) Invoice Information same as Section A same as Section B *If neither, complete Section C*

Company Name \_\_\_\_\_  
Site Address \_\_\_\_\_  
City/Province \_\_\_\_\_  
Postal Code \_\_\_\_\_

Contact Person \_\_\_\_\_  
Telephone \_\_\_\_\_  
Fax \_\_\_\_\_

**Purchase Order #:**

## SITE HISTORY

Check all that apply:

- Active Site
- Residential/Parkland/Institutional Site
- Industrial/Commercial Site
- Non-Active Site
- Agricultural Site
- Emergency Spill

Current Activities and Site Use: \_\_\_\_\_

Past Activities and Site Used: \_\_\_\_\_

Waste Origin: \_\_\_\_\_

**WASTE PROFILE**

Project Name \_\_\_\_\_ Est. Starting Date \_\_\_\_\_  
 Est. qty. of Waste \_\_\_\_\_ tonnes Transporter \_\_\_\_\_

**Please confirm if the waste contains any of the following**

Radioactive Material	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Explosives	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Biohazard	<input type="checkbox"/> YES	<input type="checkbox"/> NO	PCB	<input type="checkbox"/> YES	<input type="checkbox"/> NO

**a) Physical Profile**

Moisture Content	%	
Odour	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Dust	<input type="checkbox"/> YES	<input type="checkbox"/> NO

**MOE Carrier No.:**

**SAMPLING AND ANALYSIS REQUIREMENTS**

**TCLP (Reg. 558) \*\*** Additional analysis may be requested for sites that have potential risk for other contaminants.

**DISCLAIMER**

Acknowledgement: The customer and/or its brokers/contractors acknowledge that the information provided in this profile as well as all other supporting analytical results are a true and accurate representation of the waste to be shipped to Lafleche Environmental Inc. The customer understands and acknowledges that the failure to properly describe the waste material could result in the need for Lafleche Environmental Inc. to incur expenses (administrative, professional, legal, regulatory, penalties, fines and orders) in order to properly dispose of the waste and to comply with the applicable legislation. The customer agrees to indemnify Lafleche Environmental Inc. for all costs that may arise from the misrepresentation of the waste material.

The Customer hereby confirms that the waste material to be delivered to Lafleche Environmental Inc. meets the Ontario Ministry of the Environment Regulation 347 and Regulation 558 criteria as a solid, non-hazardous waste.

\_\_\_\_\_  
 Authorized Signature

\_\_\_\_\_  
 Date (mm/dd/yyyy)

<b>FOR OFFICE USE ONLY</b>			
Date of Receipt		Scale Notified	<input type="checkbox"/> YES <input type="checkbox"/> NO
Analysis Included	<input type="checkbox"/> YES <input type="checkbox"/> NO	More Info. Required	<input type="checkbox"/> YES <input type="checkbox"/> NO
Material Acceptable	<input type="checkbox"/> YES <input type="checkbox"/> NO If no, specify reason:		
_____ Approved By		_____ Date	

**NOTE: A COPY OF AN APPROVED FORM MUST ACCOMPANY EACH LOAD**