

Pre-Qualification Questionnaire

Transporter Name*:		
Transport Company Phone Number*:		
Transport Company Email:		
1. Generator Information		
Company Name*:		
Contact First Name*:	Last Name*:	
Contact Phone*:	Contact Email*:	
EPA Number (if applicable):		
SIC (standard industrial classification):		
Permit Number (Industrial wastewater disc	charge):	
Address*:		
City:	State:	Zip:
Description of general activities conducted		
eWaste Disposal, Inc. may not require labor cyanide, toxic organic compounds, sulfides	oratory analysis of wastes that are certified to	o contain no regulated metals,
CERTIFICATION	·	
QUESTIONNAIRE are true, correct and cominformation you have provided, eWaste Di	ed in response to the questionnaire contained applete to the best of my knowledge. I underst isposal, Inc. may require a sample of the was ior to acceptance of the waste for treatment.	and that after reviewing the te unidentified in the
Name:	Title*:	
Email*		
Date:		

Generators and Waste Haulers Please Note:

We Cannot accept waste water until the physical characteristics and waste water information has been reviewed and accepted.

Please complete the separate physical characteristics and waste description for each waste water interceptor locator at this facility.

PHYSICAL DESCRIPTION AND WASTE WATER INFORMATION SHEET

2. Generator's Process Information

GENERATOR'S PROCESS INFORMATION* (Detailed description of specific activity which created the waste or	ontained in this interceptor.)
Samples being submitted were taken from (location and ID r	umber):
Check one:* ☐ Clarifier ☐ Trap ☐ Holding Tall Other (describe):	
3. Physical Characteristics and Description of Waste Select One*: Liquid Mud Sludge	☐ Slurry ☐ Other (please describe below)
Other (describe):	
Water Concentration %*	Mud Concentration %
Other Concentration % Other Concentration %	Other Concentration %
Waste Properties	
pH (Select One)*: ☐ 0-2 ☐ 2-4 ☐ 4-6 ☐ 6-8	B □ 8-10 □ 10-12 □ 12-14
Odor (Select One)*: \square None \square Low \square Medium	☐ High
Color (Select One)*: \square Clear \square Light \square Dark	□ Black
Explosive*: YES NO Don't Know	Reactive*: \square YES \square NO \square Don't Know
Pyrophoric*: ☐ YES ☐ NO ☐ Don't Know	

Arsenic*: Yes No Maybe Approx (mg./I)	Cadmium*:
Chromium*: ☐ Yes ☐ No ☐ Maybe	Copper*: ☐ Yes ☐ No ☐ Maybe
Approx (mg./l)	Approx (mg./l)
Lead*: ☐ Yes ☐ No ☐ Maybe	Mercury*: ☐ Yes ☐ No ☐ Maybe
Approx (mg./l)	Approx (mg./l)
Nickel*: ☐ Yes ☐ No ☐ Maybe Approx (mg./l)	Silver*:
Zinc*: Yes No Maybe Approx (mg./l)	Cyanide*:
Does the waste contain (or could it contain) any mea. HYDROCARBONS?*: ☐ Yes ☐ No Constituted (Consentration (or a //) ///	
Constituent / Concentration (mg./l) (If yes, please list t	he source and approximate concentrations)
Could the waste contain SULFIDES in excess of 0.1 mg	g/l?*: Yes No She source and approximate concentrations)
constituent, concentration (ing., i) (ii yes, picase list t	