

DAVENPORT PLANT

301 E. Front Street
Buffalo, IA 52728
Cell (563) 327-2577
Fax (563) 323-7001



GAR USE ONLY SAMPLE SUBMITTED? <input type="checkbox"/> Yes <input type="checkbox"/> No
Customer #
Profile #
Date Received

Form 1 - Alternate Fuel Qualification (NonHaz Only)

A. Generator

Generator's Name		Email Address
Facility (Manifest) Address		
Street	P.O. Box	
City	State	Zip
Tech. Contact	Title	Phone No.

B. Billing (Marketer)

Marketer Name		Email Address
Street		
		P.O. Box
City	State	Zip
Tech. Contact	Title	Phone No.

C. General Waste Information

Waste Description _____

Process Generating Waste _____

Can waste be heated to improve flow? Yes No

Anticipated Handling Problems (odor, dusty, sticky, large chunks, foreign material) _____

Is the Waste: Liquid % Moisture Sludge % Free Liquid: Solid Other Describe: _____

Is this material pumpable with centrifugal pump? Yes No Varies, Explain: _____

Shipping Container **Check all that apply** Bulk Walking Floors Gaylords/Pallets Rolloff Belt Trailer

Shipping Volume/Frequency _____ Gal _____ Lbs _____ Tons Weekly Monthly

D. Attach MSDS or Current Analysis if Available

MSDS attached Any know H&S Precautions? _____ Analysis attached No attachments

E. Chemical Composition/Waste Constituents

List components; use reverse side of document if needed	Concentration Range (Units)	Typical %
_____	_____ to _____	_____ %
_____	_____ to _____	_____ %
_____	_____ to _____	_____ %
Total		100 %

F. Required Certifications (Must be signed for acceptance by GAR) Must Submit Sample

Regarding the waste material submitted for acceptance to GAR, I certify all of the following:

- 1) I certify that the waste shipment meets NONE of the definitions or descriptions of PCBs, PCB items, or PCB contaminated materials found in 40 CFR 761.1, 761.3, and 761.70.
- 2) I certify that the waste does not exhibit the characteristic of hazardous waste or is not a listed hazardous waste as defined under RCRA, 40 CFR 261.
- 3) The waste does not contain Hg at concentrations equal to or greater than 3.1 mg/kg.

I further certify that all information submitted in this and all attached documents contains true and accurate descriptions of the waste. Any sample submitted is representative. All relevant information regarding known or suspected hazards in the possession of the generator has been disclosed to GAR.

Name (Printed): _____ Title: _____ Date: _____

Signature of Generator's Company Representative _____

Please submit this profile to the address above with a one quart sample for liquids/sludge and two gallon Ziploc bag for solids