

SPECIAL WASTE PROFILE FORM

Oswego County Department of Solid Waste
BRISTOL HILL LANDFILL
3125 NYS 3, Fulton, NY 13069
Phone: (315) 591-9200 Fax: (315) 591-9203
DEC Permit# 7-3558-0012/00011

Special Waste Email Submissions to Carl Schmidt at carl.schmidt@oswegocounty.com

Directions

- Complete Special Waste Profile Form, Sections 1.0 - 8.0 in its entirety, print legibly.
- Refer to Appendix A, Special waste Analytical Testing Requirements, for information on special materials.
- Refer to Appendix B, Analytical Methods, Parameters and Standards for testing protocols.
- To expedite process, submit request to e-mail above to initiate approval process.

SPECIAL WASTE PROFILE

THIS FORM IS FOR DISPOSAL OF NON-HAZARDOUS WASTE ONLY
(Incomplete or missing information will delay approval process)

1.0 ORIGIN OF WASTE (PHYSICAL SITE ADDRESS WHERE WASTE ORIGINATED - NO PO BOX)

Business / Property Owner's Name			
Address		City	State Zip
County	Phone	Fax	
Contact Person		Title	Email
EPA ID # (if applicable)		State ID # (if applicable)	

2.0 GENERATOR INFORMATION (CHECK HERE IF SAME AS ABOVE)

Business / Property Owner's Name			
Address		City	State Zip
County	Phone	Fax	
Contact Person		Title	Email
EPA ID # (if applicable)		State ID # (if applicable)	

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3.0 BILLING INFORMATION

Company Name		OCSDW Account:	
Mailing Address	City	State	Zip
Contact Person	Phone	Fax	

4.0 AUTHORIZED HAULER (PRIMARY)

Company Name			
Address	City	State	Zip
Email	Phone	Fax	
Contact Person	Title		
NYS DEC Waste Transporter Permit #	OCDSW Waste Hauler Permit #		

5.0 AUTHORIZED HAULER (SECONDARY)

Company Name			
Address	City	State	Zip
Contact Person	Phone		
Email	Fax		
NYS DEC Waste Transporter Permit #	OCDSW Waste Hauler Permit Sticker #		

6.0 WASTE CHARACTERIZATION

Name of Waste:	Type of Waste (soil, sludge, process waste, etc.)
Estimated Delivery Date:	Odor <input type="checkbox"/> None <input type="checkbox"/> Mild <input type="checkbox"/> Strong
Is the Waste Stream: <input type="checkbox"/> Stored above ground <input type="checkbox"/> To be excavated <input type="checkbox"/> Stored in container	
Minimum % Solids: Attached lab report(s) verify solids content. Percent of solids must exceed 20% - no free liquids evident	
<input type="checkbox"/> One time ONLY - Approximant Tons _____ <input type="checkbox"/> Ongoing - Monthly Tons _____ <div style="text-align: center;">Maximum Daily Tons _____</div>	

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6.0 WASTE CHARACTERIZATION CONTINUE

Process that generated waste and personal protective handling requirements (be specific):
Was waste generated from a leak or spill? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please answer all questions below:
Amount of Contaminate released, if known: (Gallons)
DEC Spill # (if greater than five gallons):
Type of Contamination: <input type="checkbox"/> Gasoline <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Diesel <input type="checkbox"/> Kerosene <input type="checkbox"/> Waste Oil <input type="checkbox"/> Unknown
Was this site ever suspected of having hazard materials? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, continue to Section 7 If Yes, please answer all questions below:
What was the source of the hazardous materials?
Which compounds were suspected?
Has testing been performed to quantify these compounds? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, provide copies of analysis of sampling and analysis plan.
Was the SAP approved by the NYSDEC and NYSDOH? <input type="checkbox"/> Yes <input type="checkbox"/> No
What conclusions were made regarding lab data? (attach additional detail if necessary)
Is the site a registered Superfund Site? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, provide registration number: _____
Does this facility currently generate any hazardous waste? <input type="checkbox"/> Yes <input type="checkbox"/> No
If hazardous wastes are generated, does management feel that adequate controls are in place to control/separate waste streams? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, a detailed explanation must be attached _____ _____ _____

SPECIAL WASTE PROFILE FORM

7.0 GENERATOR'S CERTIFICATION TO OSWEGO COUNTY DEPARTMENT OF SOLID WASTE (OCDSW)

I / We hereby certify that all of the information that we have presented to the OCDSW on this form or any attachments is an accurate representation of our waste stream.

I / We hereby certify that the OCDSW can contact the laboratory directly to discuss our attached waste stream.

I / We hereby certify that the waste stream that we are applying for disposal at the OCDSW's Solid Waste Management Facility is not a listed known hazardous waste. In addition, none of the components of the process, or any residue generated, are known hazardous wastes.

I / We agree that a representative of the OCDSW may at any time visit the site of contamination and sample the material to be disposed.

I / We agree to indemnify, defend and hold harmless the OCDSW, its employees, affiliates, successors and assigns from and against any and all losses, liabilities, damages, claims, fines, causes of action deficiencies, costs and expenses (including reasonable attorneys' fees and other litigation expenses) based upon, arising out of or otherwise related to the disposal of our waste stream.

Printed Name: _____ Signature: _____

Title: _____ Date: _____

Please Do Not write below the Line _____

**OCSDW
Approved: _____ Date: _____**

APPENDIX A - SPECIAL WASTE PROFILE FORM

8.0 CERTIFICATION OF REPRESENTATIVE SAMPLE

Generator's Name:			
Waste Name:			
Sample Date:		Time Sampled:	
Laboratory Name:			
Address		City	State Zip
Contact Person		Title	
Email	Phone		Fax

It is mandatory that the testing laboratory receive a representative sample of the waste stream that you intend to dispose of at the OCDSW Bristol Hill Landfill. Sampling instructions can be obtained from your ELAP and / or another approved laboratory. Please follow the instruction carefully.

Analytical test results must be submitted with profile. Please refer to our Special Waste Analytical Requirement- Appendix A, for the required laboratory tests. These are the general sampling quantities and may be modified at our discretion.

1-500 Tons	One (1) Sample Required
> 500 Tons and ≤ 1000 Tons	Two (2) Samples Required
>1000 Tons and ≤ 1500 Tons	Three (3) samples Required
>1500 Tons and ≤ 2000 Tons	Four (4) Samples Required
> 2000 Tons	Determined by OCDSW

Sampler's Certification

I hereby certify that I personally collected a representative sample of the waste stream at the location, date and time as listed above.

Printed Name: _____ **Date:** _____

Signature: _____

Company: _____

Generator Witness: _____

APPENDIX A - SPECIAL WASTE ANALYTICAL REQUIREMENTS

PCB Impacted Material	Total PCBs	<25 ppm
SLUDGES & RELATED WASTES		
Waste Product	Testing Requirements	Acceptable Level
POTW Grit / Screening POTW Sludge ^{2,3}	TCLP Metals TCLP Volatiles Total PCBs Reactivity Paint Filter Liquids Test Flash Point / Ignitability Corrosivity	Refer to Appendix B Refer to Appendix B < 25 ppm Results to be reviewed on case-by-case basis No Present >140°F Non-Ignitable pH>2 and <12.5
Petroleum Contaminated Soil; Petroleum Derived Sludge Other Industrial Sludge ^{2,3}	TCLP Metals TCLP Volatiles TCLP Semi - Volatiles Total PCBs Reactivity Paint Filter Liquids Test Flash Point / Ignitability Corrosivity	Refer to Appendix B Refer to Appendix B Refer to Appendix B < 25 ppm Results to be reviewed on case-by-case basis No Present >140°F Non-Ignitable pH>2 and <12.5
Food Processing Sludge ³	Paint Filter	Not Present
COMBUSTION RESIDUE		
Waste Product	Testing Requirements	Acceptable Level
Coal Ash (Bottom & Fly Ash)	No Testing Required	N/A
Medial & Incinerator Ash MSW Incinerator Ash	TCLP Metals Paint Filter	Refer to Appendix B Not Present
Refractory Material (brick, flue lining, etc.)	None, if fuel source is fossil fuel based	
	TCLP metals, if fuel source is waste oil or if furnace is associated with an industrial process	Refer to Appendix B
METALLURGICAL PROCESS RESIDUES		
Waste Product	Testing Requirements	Acceptable Level
Foundry Sand	TCLP Metal Total Phenols Paint Filter Liquids Test	Refer to Appendix B < 10 ppm Not Present
	TCLP Volatiles TCLP Semi-Volatiles, If coolants or solvents are used in the process	Refer to Appendix B Refer to Appendix B
Grindings / Shavings	TCLP Metals Reactivity Paint Filter	Refer to Appendix B Results to be reviewed on case-by-case basis Not Present
	TCLP Volatiles TCLP Semi-Volatiles, If coolants or solvents are used in process	Refer to Appendix B Refer to Appendix B

METALLURGICAL PROCESS RESIDUES (CONTINUED)

Waste Product	Testing Requirements	Acceptable Level
Sandblast Sand & Residue	TCLP Metals Paint Filter	Refer to Appendix B Not Present
Air Emission Control Dust	TCLP Metals TCLP Volatiles TCLP Semi-Volatiles Reactivity Paint Filter Flash Point / Ignitability Corrosivity	Refer to Appendix B Refer to Appendix B Refer to Appendix B Results to be reviewed on case-by-case basis No Present >140° F Non-Ignitable pH>2 and <12.5

MISCELLANEOUS

Waste Product	Testing Requirements	Acceptable Level
Railroad Ties & Creosote Treated Wood	TCLP Semi - Volatiles Total PCBs	Refer to Appendix B <25 ppm
Auto Shredder Waste, Auto Fluf 5	TCLP Metals TCLP Volatiles TCLP Semi - Volatiles Total PCBs Reactivity Flash Point / Ignitability Corrosivity	Refer to Appendix B Refer to Appendix B Refer to Appendix B < 25 ppm Results to be reviewed on case-by-case basis >140° F Non-Ignitable pH>2 and <12.5
Treated Regulated Medial Waste	A regulated medical waste treatment certificate and <i>Special Waste Profile</i> form must be completed.	
Empty Tanks	No testing is required. A statement regarding the product that tank held and how it was cleaned is required (i.e., tank closure report). Both ends need to be cut off the tanks and it must be crushed.	

ADDITIONAL INFORMATION & FOOTNOTES

1. The OCDSW will evaluate PCB contaminated waste on a case-by-case basis. In no case will PCB be accepted above 25 ppm.
2. TCLP analyses listed for municipal and industrial sludges need to be repeated on an annual basis. TCLP analyses must be repeated for Industrial sludges if the process changes anytime during the year.
3. Part 360 regulations require a minimum of 20% solids with no evidence of free liquid.
4. Herbicides & Pesticides testing may be waived upon request. To enable the OCDSW staff to waive the testing for pesticides or herbicides, a letter from the generator stating that pesticides and herbicides were never used or stored in the area of excavation or during the process is required.
5. Consult with OCDSW personnel to determine actual sampling requirements for auto shredder waste.
6. Analyses with 70% of the MCL levels may be subject to re-sampling.
7. Virgin spill contaminated soil may be accepted without testing provided a DEC virgin spill letter has been issued.

APPENDIX B - ANALYTICAL METHODS, PARAMETERS AND STANDARDS

EPA Testing Protocols (Reference SW-846)	
Corrosivity	NACE Standard TM-01-69 + pH > 2 and pH <12.5
Ignitability	Solid Phase + SW-846, Method 1030 Flashpoint (Pensky - Martens) Limit + 60°C or 140°F
Reactivity	EPA Method 9010; 9030
Paint Filter Liquids test	EPA Method 9095B; Liquid collection after 5 minutes = Not Present or "Pass"
Total PCB's	EPA Method 8082 with Detection Level of 100 ppb; not to exceed 25 ppm
Total Volatiles	EPA Method 8260, Full list, Totals (No TCLP)
Total Semi -Volatiles	EPA Method 8270, Full list, Totals (No TCLP)
TCLP Metals	EPA Method 1311
TCLP Volatiles	EPA Method 1311
TCLP Semi - Volatiles	EPA Method 1311
TCLP Herbicides	EPA Method 1311
TCLP Pesticides	EPA Method 1311

TCLP Metals		TCLP Volatiles		TCLP Semi- Volatiles	
Parameter	Limit	Parameter	Limit	Parameter	Limit
Arsenic	5 mg/l	Benzene	0.5 mg/l	o-Cresol	200 mg/l
Barium	100 mg/l	Carbon Tetrachloride	0.5 mg/l	m-Cresol	200 mg/l
Cadmium	1 mg/l	Chlorobenzene	100 mg/l	p-Cresol	200 mg/l
Chromium	5 mg/l	Chloroform	6 mg/l	Cresol	200 mg/l
Lead	5 mg/l	1,4-Dichlorobenzene	7.5 mg/l	1,4-Dichlorobenzene	7.5 mg/l
Mercury	0.2 mg/l	1,2 -Dichloroethane	0.5 mg/l	2,4-Dinitrotoluene	0.13 mg/l
Selenium	1 mg/l	1,1-Dichloroethylene	0.7 mg/l	Hexachlorobenzene	0.13 mg/l
Silver	5 mg/l	Methyl ethyl ketone	200 mg/l	Hexachlorobutadiene	0.5 mg/l
		Tetrachloroethylene	0.7 mg/l	Hexachloroethane	3 mg/l
		Trichlorethylene	0.5 mg/l	Nitrobenzene	2 mg/l
		Vinyl chloride	0.2 mg/l	Pentachlorophenol	100 mg/l
				2,4-5 Trichlorophenol	400 mg/l
				2,4,6 Trichlorophenol	2 mg/l
				Pyridine	5 mg/l

**APPENDIX B - ANALYTICAL METHODS, PARAMETERS AND STANDARDS
CONTINUED**

Total Volatiles		Total Semi- Volatiles	
Parameter	Limit	Parameter	Limit
Benzene	10 mg/l	o-Cresol	4000 mg/l
Carbon Tetrachloride	10 mg/l	m-Cresol	4000 mg/l
Chlorobenzene	2000 mg/l	p-Cresol	4000 mg/l
Chloroform	120 mg/l	Cresol	4000 mg/l
1,4-Dichlorobenzene	150 mg/l	1,4-Dichlorobenzene	150 mg/l
1,2 -Dichloroethane	10 mg/l	2,4-Dinitrotoluene	2.6 mg/l
1,1-Dichloroethylene	14 mg/l	Hexachlorobenzene	2.6 mg/l
Methyl ethyl ketone	200 mg/l	Hexachlorobutadiene	10 mg/l
Tetrachloroethylene	4000 mg/l	Hexachloroethane	60 mg/l
Trichlorethylene	10 mg/l	Nitrobenzene	40 mg/l
Vinyl chloride	4 mg/l	Pentachlorophenol	2000 mg/l
		2,4-5 Trichlorophenol	8000 mg/l
		2,4,6 Trichlorophenol	40 mg/l
		Pyridine	100 mg/l

TCLP Metals	
Parameter	Limit
Endrin	0.02 mg/l
Chlordane	0.03 mg/l
Heptachlor (and its epoxide)	0.008 mg/l
Lindane	0.4 mg/l
Methoxychlor	10 mg/l
Toxaphene	0.5 mg/l
TCLP Herbicides	
Parameter	Limit
2,4-D	10 mg/l
2,4,5-TP (Silvex)	1 mg/l