



WASTE MANIFEST PROFILE

Email completed form to: specialwaste@regenmonterey.org

SECTION 1 – WASTE GENERATOR (*Waste Generator to complete*)

Company Name _____ Contact Name _____

Site Address _____ City _____ Zip _____

Email Address _____ Phone No. _____

SECTION 2 – TRANSPORTER (*Hauler or Waste Generator to complete*)

Company Name _____ Contact Name _____

Phone No. _____ Address _____

Transported By: Debris Box Dump Truck Vacuum Truck Drum (size/type) _____ Other _____

SECTION 3 – WASTE DESCRIPTION (*Waste Generator to complete*)

Project Description _____

Waste Description _____

Estimated Weight or Volume _____ (choose units:) Tons Cubic Yards Gal

Waste Properties (*Check all that apply*)

Solid Liquid Semi-Solid Sludge C&D Debris (mixed) Color(s) _____

Soil Powder Percent Solids _____ Other _____

Laboratory Analysis (*ReGen Monterey may require the Generator to perform additional analytical testing*)

Sampling Date _____ Laboratory _____

Analysis Performed (*check all that apply*)

CA Title 22 Metals Volatile Organics TPH Gas/Diesel BTEX

Semi-volatile Organics Herbicides/Pesticides Other _____

SECTION 4 – Generator Certification (*Waste Generator to complete*)

	YES	NO	N/A
1. Is the waste represented by this waste manifest profile a "Hazardous Waste" as defined by USEPA?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Does the waste represented by this waste manifest profile contain regulated radioactive material or regulated concentrations of Polychlorinated Biphenyls (PCBs)?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Does this waste manifest profile and all attachments contain true and accurate descriptions of the waste material?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Is the analytical data attached hereto derived from testing a representative sample in accordance with 40 CFR 261.20(c) or equivalent rules?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This is to certify that the waste material described herein is classified as Non-Hazardous and is not subject to Federal and California regulations for reporting proper disposal of hazardous waste. Our company hereby agrees to fully indemnify ReGen Monterey against any damages resulting from this certification being inaccurate or untrue.

Printed Name & Title of Authorized Agent _____

Signature of Authorized Agent _____ Date: _____

FOR ReGen MONTEREY USE ONLY (*Weighmaster to complete*)

Weighmaster Signature _____ Weigh Ticket No. _____ Date: _____



WASTE MANIFEST PROFILE

INSTRUCTIONS

SECTION 1 – WASTE GENERATOR *(Waste Generator to complete)*

Company Name Name of company (if applicable) Contact Name Name of responsible party
 Site Address Address of waste origin City _____ Zip _____
 Email Address Email address of responsible party Phone No. Phone number of responsible party

SECTION 2 – TRANSPORTER *(Hauler or Waste Generator to complete)*

Company Name Name of transport company Contact Name Name of transporter responsible party
 Phone No. Phone number of transport company Address Address of transport company
 Transported By: Debris Box Dump Truck Vacuum Truck Drum (size/type) _____ Other _____
Define the type of vehicle transporting the waste material

SECTION 3 – WASTE DESCRIPTION *(Waste Generator to complete)*

Project Description Describe the project that generated the waste.
 Waste Description Describe the waste with as much detail as possible.
 Estimated Weight or Volume Estimated amount of material (choose units:) Tons Cubic Yards Gal

Waste Properties *(Check all that apply)* Check the box(es) that best describe(s) the waste
 Solid Liquid Semi-Solid Sludge C&D Debris (mixed) Color(s) _____
 Soil Powder Percent Solids _____ Other _____

Laboratory Analysis *(ReGen Monterey may require the Generator to perform additional analytical testing)*

Sampling Date Date analysis performed (if applicable) Laboratory Laboratory which performed testing (if applicable)

Analysis Performed *(check all that apply)* Indicate which analytic tests performed, and attach reports (if applicable)
 CA Title 22 Metals Volatile Organics TPH Gas/Diesel BTEX
 Semi-volatile Organics Herbicides/Pesticides Other _____

SECTION 4 – Generator Certification *(Waste Generator to complete)*

Read each question carefully and check box for accurate answer.

	YES	NO	N/A
1. Is the waste represented by this waste manifest profile a "Hazardous Waste" as defined by USEPA?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Does the waste represented by this waste manifest profile contain regulated radioactive material or regulated concentrations of Polychlorinated Biphenyls (PCBs)?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Does this waste manifest profile and all attachments contain true and accurate descriptions of the waste material?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Has all relevant information within the possession of the Generator regarding known or suspected hazards pertaining to the waste been disclosed?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Is the analytical data attached hereto derived from testing a representative sample in accordance with 40 CFR 261.20(c) or equivalent rules?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This is to certify that the waste material described herein is classified as Non-Hazardous and is not subject to Federal and California regulations for reporting proper disposal of hazardous waste. Our company hereby agrees to fully indemnify ReGen Monterey against any damages resulting from this certification being inaccurate or untrue. After reading the certification statement, provide the printed name, title, and signature of the responsible party indicating an agreement of the statement.

Printed Name & Title of Authorized Agent _____

Signature of Authorized Agent _____ Date: _____

FOR ReGen MONTEREY USE ONLY *(Weighmaster to complete)* ReGen Monterey Staff use only.

Weighmaster Signature _____ Weigh Ticket No. _____ Date: _____