Material Profile Form
Passyunk Wash Plant

Passyunk Wash Plant acceptance criteria pursuant to PADEP Soil Waste Processing Facility Permit #301391. Criteria subject to change in accordance with PADEP requirements.

A.	Waste Generator		Donor Site Information
1	Generator Name:	8	Donor Site Name:
2	Generator Address:	9	Donor Site Address:
3	Generator City/St/Zip	10	Donor Site City/St/Zip:
4	Generator Phone:	11	Donor Site County:
5	Generator Contact:	12	Donor Site Phone:
6	Generator Email:	13	Donor Site Contact:
7	Generator Notes:	14	Donor Site Email:

	Billing Contact Information		Same as Generator?
15	Customer Name:	18	Customer Phone:
16	Customer Address:	19	Customer Contact:
17	Customer City/St/Zip	20	Customer Email:

	Generator Authorization Form required if the Customer and Generator are not the same			
21	Estimated Volume:		Tons or Cubic Yards:	
22	Estimated Start Date:			
23	Duration of Project:		One- Time?	Recurring:

B.	Property History	
1	Current use:	
2	Former use:	
3	AOC specific soil source (if applicable):	
4	Is the property enrolled in state or Federal cleanup program (i.e. NJ SRP, PADEP Act 2, MDE VCP)?	If Yes, provide program name and ID:
5	Is the site a State or Federal Superfund Site?	If Yes, provide program name and ID:

C.	**Waste Stream Information: Clean Fill**		
1	Does the material qualify as PA Clean Fill pursuant to PADEP Management of Fill Policy Document No.: 258-2182-773	Yes	No
	If No, proceed to Section D.		
2	Has the material been treated or blended to achieve clean certification?	Yes	No
3	Was the material sampled?	Yes	No
	If No, provide justification (attach due diligence reporting):		
4	Number of clean fill samples analyzed:		
5	Analytical parameters include TCL/TAL for all samples?	Yes	No
	If No, explain:		
6	Do the lab results meet PA clean fill requirements?	Yes	No
	If Yes, proceed to Section F.		
	If No, proceed to Section D.		
	Clean Fill Sample Frequency: first 125 cy require 2 composite/grab samples. *Sources with up to 3,000 cy require 3 composite/grabs* *Each additional 1,000 cy requires 1 composite and grab* *Out-of-State Sampling: Four (4) discrete grabs can be substituted for one composite sample.*		
	All soils failing to meet PA Clean Fill criteria require Form U and PADEP approval.		

D.	**Waste Stream Information: Regulated Fill (RF)**					
1	How many samples fail CFCL?	Sample IDs:				
2	Do any samples fail the RFCL?				Yes	No
	If Yes, proceed to Section E for Residual Waste. Otherwise continue.					
3	Are all compounds below the RFCL and Trigger Values?				Yes	No
	If Yes, TCLP is optional for the analyzed parameters.					
	If No, proceed to Section E.					
4	Were all compound classes run for total (mg/kg) results?				Yes	No
	Required compound lists:					
	Metals	SVOCs	VOCs	Pesticides	PCBs	Herbicides
	If Yes, continue.					
	If No, TCLP is required for the missing compounds.					
5	Were RCRA Characteristics analyzed for all samples with CFCL exceedances?				Yes	No
	If No, additional parameters needed.					
6	If Yes, were any exceedances identified?				Yes	No
7	Do all regulated fill samples pass the hazardous waste classification?				Yes	No
	Clean Fill Sample Frequency: first 125 cy require 2 composite/grab samples. *Sources with up to 3,000 cy require 3 composite/grabs* *Each additional 1,000 cy requires 1 composite and grab* *Out-of-State Sampling: Four (4) discrete grabs can be substituted for one composite sample.*					

E.	Waste Stream Information: Residual Waste (RW)		
1	Number of waste characterization samples analyzed:	# of samples	
	Multiply # of samples by 750 tons. What tonnage was characterized?	tons	
	Required Residual Waste (RW) Sample Frequency: 1 composite and grab = 500 cy (750 tons) *Out-of-State Sampling: Four (4) discrete grabs can be substituted for one composite sample.*		
2	Were the following waste characterization parameters analyzed and meet definition of non-hazardous?		
	pH	Yes	No
	Ignitability	Yes	No
	Reactive Sulfide	Yes	No
	Reactive Cyanide	Yes	No
	TCLP (40 compounds + pH of extract)	Yes	No
	If Yes, continue.		
	If No for any parameters, list here:		

	Sample ID	***Parameter***

3	Were total PCBs analyzed and reported greater than 5 mg/kg?	Yes	No
	If Yes, what was the highest reported concentration?		
4	Is the waste represented in this profile generated as a result of corrective action taken under RCRA underground storage tank regulations (40 CFR Part 280)?	Yes	No
5	Is the waste a dioxin bearing waste?	Yes	No
6	Is the waste a treatment by-product or residue from a previously listed or characteristic hazardous waste?	Yes	No
7	Is the material known or suspected to be naturally occurring radio nuclide material (NORM); any other radiological characteristics resulting in the material having radioactivity above any background level or which could pose a health of environmental concern under any circumstance; and/or which could cause the materials to be regulated in any manner for a radioactive characteristic by any state or Federal agency?	Yes	No
	If Yes, describe (attach additional documentation if necessary):		
8	Is the material regulated pursuant to the Atomic Energy Act or any regulations for radioactive materials administered by the Nuclear Regulatory Commission (NRC) or other agencies, and/or classified as technologically enhanced naturally occurring radionuclide material (TENORM)?	Yes	No
	If Yes, describe (attach additional documentation if necessary):		

F.	Documentation Review			
1	Lab report included?		Yes	No
2	Lab Name:			
3	Lab Cert ID:			
4	Sample location diagram included?		Yes	No
5	Summary table(s) of results included?		Yes	No

G.	Composition of Soil Matrix			
1	Gradation and/or Proctor test results available?		Yes	No
	If yes:			
	Silt	Clay	Sand	Gravel
	Should equal 100%			

H.	Application Certification
	I hereby certify that the information provided herein as well as additional documents I have provided as evidence to the above information are true and accurate. I also understand that the facility and the PADEP reserve the right to investigate any, and all information provided for this material. While conducting an investigation, it may be necessary to contact the parties responsible for providing this information including, but not limited to, the Generator, Environmental Engineer, Site Contractor, or Environmental Laboratory to verify the accuracy of the information provided.

Name _____ Signature _____

Company _____ Date _____