



SPENT ACTIVATED CARBON PROFILE SHEET

Carbonair Environmental Systems, Inc.

Service Office locations

Brooklyn Park, Minnesota
Salem, Virginia
San Marcos, Texas
Jacksonville, Florida

*For assistance in completing this form, please contact
Chris Riddle at 763-315-4771 ext. 25*

Mail, fax or email your completed form to:

Carbonair Environmental Systems, Inc.
7500 Boone Avenue North
Brooklyn Park, MN 55428

Fax: 763-315-4614

Email: criddle@carbonair.com

NOTICE

The information reported on the Spent Activated Carbon Profile Sheet is required to insure that your spent activated carbon is safely recycled in compliance with applicable Federal and State laws. All generators must complete this Spent Activated Carbon Profile Sheet before Carbonair can accept a spent carbon candidate for regeneration.

Please fill out this form completely, answering each question. Include supplemental information and analyses when requested or when necessary. An incomplete profile, or one containing inaccurate information, will delay the acceptance process and could result in violations of waste management regulations.

Please ship the original copy of this form, a representative sample* of the spent activated carbon, and chain-of-custody documentation to the above shipping address. Retain a copy of this form for your records.

*Not required for potable water certification or certain non-hazardous SAC candidates.

Additional instructions attached

Spent Activated Carbon Profile Sheet

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| | |
|-------------|-----------------------|
| TSR Number: | Sales Representative: |
|-------------|-----------------------|

1. Customer Information

| | |
|-----------------------------|--|
| Customer Name | EPA ID Number: |
| Generator Facility Address: | Facility contact: |
| | Phone: Fax: |
| | Technical Contact: |
| | Phone: Fax: |
| Mailing or Billing Address: | Purchasing Contact: |
| | Phone: Fax: |
| | |

2. Spent Activated Carbon (SAC) Generation Information

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|---|--|
| Describe your treatment process using the activated carbon (attach additional sheet if necessary) *very important | |
| Estimated annual quantity of SAC to return (dry basis): _____ Carbon brand name if known: _____ Carbon base-type: <input type="checkbox"/> bituminous coal <input type="checkbox"/> lignite <input type="checkbox"/> wood <input type="checkbox"/> coconut <input type="checkbox"/> unknown Mesh Size (or closest approximate): <input type="checkbox"/> 4x10 <input type="checkbox"/> 8x16 <input type="checkbox"/> 8x30 <input type="checkbox"/> 12x40 <input type="checkbox"/> 8x40 <input type="checkbox"/> extruded <input type="checkbox"/> other – describe: _____ | Certification for potable water treatment. Fill out sections 1, 2 3 and 4 only. I certify that this carbon has been used to purify water from a public water supply meeting the requirements of the Safe Drinking Water Act and it is not a RCRA hazardous waste per 40 CFR 261. <input type="checkbox"/> Yes <input type="checkbox"/> No |

3. Constituents of SAC, Characteristics and Properties

* must be completed

| Physical Properties: (Check if applicable) pH Range: <input type="checkbox"/> 2 <input type="checkbox"/> 2.1 – 4 <input type="checkbox"/> 4.1 – 10 <input type="checkbox"/> 10.1 – 12.4 <input type="checkbox"/> 12.5 SAC Characteristics: <input type="checkbox"/> radioactive <input type="checkbox"/> infectious <input type="checkbox"/> shock sensitive <input type="checkbox"/> explosive SAC Contains: <input type="checkbox"/> PCB's <input type="checkbox"/> dioxins <input type="checkbox"/> DBCP <input type="checkbox"/> fluorides <input type="checkbox"/> oxidizers <input type="checkbox"/> strong odor <input type="checkbox"/> reactives <input type="checkbox"/> asbestos <input type="checkbox"/> support/foreign media <input type="checkbox"/> high level of inorganic salts | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">SAC Constituents (Anticipated Compounds Adsorbed)</th> <th style="width: 50%;">Concentration Range, ppm (in process or influent stream)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table> | SAC Constituents (Anticipated Compounds Adsorbed) | Concentration Range, ppm (in process or influent stream) | | | | | | | | | | | | | | | | |
|--|---|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| SAC Constituents (Anticipated Compounds Adsorbed) | Concentration Range, ppm (in process or influent stream) | | | | | | | | | | | | | | | | | | |
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|-------------|-----------------------|
| TSR Number: | Sales Representative: |
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4. EPA Waste Codes, Land Disposal Restrictions and Other Information

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|--|
| Is the SAC a RCRA hazardous waste per 40 CFR 261? <input type="checkbox"/> Yes <input type="checkbox"/> No List applicable listed waste codes below (F, K, U or P) _____ |
| Is the SAC generated from a.... <input type="checkbox"/> RCRA corrective action <input type="checkbox"/> CERCLA (superfund) site <input type="checkbox"/> foreign source <input type="checkbox"/> none of the preceding |
| Are wastes containing chlorinated dibenzofurans or chlorinated dibenzo-p-dioxins managed at this facility? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, check appropriate waste code. <input type="checkbox"/> F020 <input type="checkbox"/> F021 <input type="checkbox"/> F022 <input type="checkbox"/> F023 <input type="checkbox"/> Other (list) _____ |
| Is the SAC generated from a Medical or Veterinary facility? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Does the SAC contain benzene subject to the control requirements of the National Emissions Standard for Benzene Waste Operations (40 CFR 61 Subpart FF)? <input type="checkbox"/> Yes <input type="checkbox"/> No Quantity of benzene present in SAC (w/w on dry basis) _____ |
| OSHA Restrictions: Contains benzene regulated under 29 CFR 1910.1028? <input type="checkbox"/> Yes <input type="checkbox"/> No Contains vinyl chloride regulated under 1910.1017? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Land Disposal Restriction standard per 40 CFR 266: (check one) <input type="checkbox"/> does not meet any applicable standards <input type="checkbox"/> meets some but not all applicable standards <input type="checkbox"/> treated to meet all applicable standards <input type="checkbox"/> HOC > 1000 mg/L <input type="checkbox"/> meets all standards without treatment <input type="checkbox"/> no treatment standards apply |
| Non-regulated Waste <input type="checkbox"/> Non-hazardous under RCRA or State Regulations <input type="checkbox"/> Conditionally Exempt Small quantity Generator <input type="checkbox"/> 100-1000 mg/month generator |
| Do you have a TCLP* Analysis for this SAC? <input type="checkbox"/> Yes <input type="checkbox"/> No *Please enclose if available. Carbonair maintains the right to require a current TCLP. |

5. Shipping Information

| | | | |
|--|---------------|----------------|----------------------|
| Proper DOT Shipping Name (per 40 CFR 172.101): _____ | | | |
| DOT hazard Class: | UN/NA Number: | Packing Group: | Reportable Quantity: |
| Method of shipment: <input type="checkbox"/> Bulk Trailer <input type="checkbox"/> Bulk Bags <input type="checkbox"/> Tote Bins <input type="checkbox"/> 55-gallon drums <input type="checkbox"/> Other (specify) _____ | | | |
| Special Handling, Safety, or Other information (attach MSDS, if available): _____ | | | |
| Is manifesting of the SAC required? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list type of manifest: _____ | | | |

6. Certification

| | |
|--|--------------------|
| <p>I certify that the information presented on this form and in all attached documentation is true and accurate and that all known or suspected hazards have been disclosed. The SAC has been characterized according to 40 CFR 262.11, and, a representative sample of this SAC has been provided to Carbonair Environmental Systems, Inc. (unless exempted). I am authorized by the above listed company or agency to make this certification.</p> <p>I further certify that SAC shipped to Carbonair, both current and future, shall conform to the above description and I agree to inform Carbonair immediately, in writing, of any non-conformity or changes to the SAC or profile information. I understand that Carbonair is relying on the continuing nature of this certification.</p> | |
| _____ Name (Type or Print) | _____ Signature |
| _____ Title (Type or Print) | _____ Date |

SAC Profile Sheet Instructions

The information reported on the Spent Activated Carbon Profile Sheet (SACPS) is required for consideration of the spent activated carbon (SAC) for transportation to, storage, and reactivation at the Carbonair facility. It is used along with other pertinent information to determine whether the SAC can be transported and/or processed legally and safely. All sections are to be typed or printed clearly in ink.

Introduction Section (All Pages)

1. **TSR Number** – This number is assigned by Carbonair Environmental Systems, Inc. It is specific to each source of SAC and must be referred to in all correspondence regarding the SAC.
2. **Sales Representative** – Enter the name of your Sales Rep here.

Section I – Customer Information

1. **Customer Name** – Enter the name of the facility generating the SAC. This name is to be the same as that which will appear on the shipping papers and especially any Uniform Hazardous Waste Manifests. If the client requesting reactivation services is different from the generator of the SAC, please explain.
2. **Generator Facility Address** – Enter the address of the location where the SAC is generated. This address should be the one that corresponds to the CPA ID number for the facility.
3. **Mailing or Bill to Address** – Enter the address where correspondence and/or invoicing should be sent. If the address is the same as the facility, enter the word "same".
4. **EPA ID Number** – Enter the twelve digit EPA Identification Number assigned to the facility generating the SAC, if applicable. Include any state identification number if different from USEPA ID number.
5. **Facility Contact** – Enter the name of the individual who is knowledgeable of the SAC process and responsible for the coordination of activities involving SAC generation, removal and reactivation.
6. **Phone and Fax** – enter this data for the facility contact including area codes and any extension numbers.
7. **Technical Contact** – Enter the name of the individual to whom technical correspondence or specific questions regarding the SAC should be addressed. This person should be responsible for the characterization of the SAC at the site.
8. **Phone and Fax** – Enter this data for the technical contact including area codes and any extension numbers.
9. **Purchasing Contact** – Enter the name of the individual to whom invoicing should be addressed. This person should be responsible for procurement of activated carbon and/or SAC services for the generating site. Or, enter here any other pertinent contact.
10. **Phone and Fax** – Enter this data for the purchasing contact including area contact including area codes and any extension numbers.

Section II – Spent Carbon (SAC) Generation Information

1. **Describe process generating the SAC** – Provide a detailed description of the process in which the SAC is generated. This entry is to include detailed information on the composition of the stream treated by the activated carbon, and process conditions. If the space provided is not enough to describe the process, attach an additional sheet.
2. **Estimated annual quantity of SAC and Carbon Type and Mesh Size (dry basis)**. Enter the quantity of SAC generated from this specific process only in a dry carbon basis. Be specific with units such as "metric tons, pounds, cubic feet". Do not use "truckloads" unless it is defined by a specific quantity. Enter the carbon type and mesh size.
3. **Certification for potable water treatment** – If the SAC is generated from the purification of a potable water supply (i.e., water supplied by a public water supply and meeting the requirements of the Safe Drinking Water Act), it may be approved using an abbreviated procedure. If this certification is not applicable check the box marked "N/A". If applicable, check the certifications box and only complete sections I, II, III and VII on the form.

Section III – Constituents of SAC, Characteristics and Properties

Physical properties – Check any boxes that apply to this SAC. Under "SAC Contains" check appropriate boxes to indicate any items that may be present in the SAC. Refer to appropriate regulation for definitions. For example, for explosive materials see 49 CFR 173.50, for PCBs see 40 CFR 761, for oxidizers see 49 CFR 173.151 and 173.127, for radioactives see 10 CFR 20.1103 and 42 USCA 2014(e). Complete the SAC Constituents table by entering each adsorbate and the range of concentration expected to be found on the SAC.

Section IV – EPA Waste codes and Land Disposal Restriction Standards

1. **Is the SAC a hazardous waste per 49 CFR 261?** – Check applicable box. If yes, enter all applicable RCRA waste codes for this SAC in the space provided.
2. **Is the SAC generated from a RCRA corrective action, a CERCLA site, foreign source, or none of the preceding?** – Check the appropriate box.
3. **Are wastes containing chlorinated dibenzofurans or chlorinated dibenzo-p-dioxins managed at this facility?** – Check appropriate boxes in this section. Refer to 40 CFR 261 to determine applicable waste codes.
4. **Is the SAC generated from a Medical or Veterinary facility or a facility treating Medical or Veterinary wastes?** – Check the appropriate box.
5. **Does the SAC contain benzene which is required to be controlled under the National Emissions Standard for Benzene Waste Operations?** – Refer to 40 CFR 61 Subpart FF to determine if applicable. Check appropriate box and state the benzene content of the SAC on the line provided, if yes.
6. **OSHA Restriction** – Refer to the referenced sections of 29 CFR and check the appropriate boxes.
7. **Land Disposal Restriction standards** – Refer to 40 CFR 268 and check the appropriate boxes as applicable. If your SAC is hazardous and subject to Land Disposal Restrictions, you will be completing a Land Disposal Notification and Certification form for each shipment of SAC to the Carbonair facility.
8. **Non-regulated waste** – Check applicable boxes.

Section V. Shipping Information

1. **Proper DOT Shipping Name** – Refer to 49 CFR 172.101 to determine the correct shipping name. Note that SAC is not the same as virgin activated carbon due to the mixture with adsorbates during use. Adsorbates can provide characteristics for which other classifications apply. If no specific names apply, the material might be classified as "Hazardous waste, solid, n.o.s.: Class 9; NA 3077". **If not regulated by DOT or EPA as hazardous, please enter "NON RCRA, Non Regulated"**.
2. **DOT Hazard Class** – See note in section I above.
3. **UN/NA Number** – See note in section I above.
4. **Packing Group** – See note in section I above.
5. **Reportable quantity** – Refer to 49 CFR 172.
6. **Method of shipment** – check appropriate box.
7. **Special Handling, Safety, or Other Information** – This section is extremely important to insure the proper and safe handling of the SAC. You are requested to make a detailed examination of not only the SAC but also the mechanical, toxicological and environmental aspects of handling and transporting the SAC. This section should contain requirements for personal protective equipment and other safety equipment. It is strongly recommended that material safety data sheets be attached for the adsorbates contained on the SAC.
8. **Is Manifesting the SAC required?** Check appropriate box. Note that 40 CFR requires the use of a Uniform Hazardous Waste Manifest to document the transportation of RCRA hazardous wastes. Other regulating bodies require the use of manifests to document the transportation of various materials. Check your state and local transportation regulation.

Section VI – Certification

Please read carefully. Only authorized personnel should complete this section