

San Luis Valley Regional Solid Waste Authority  
P.O. Box 861  
Monte Vista, Co 81144  
719-852-3810 Fax 719-852-9740  
Landfill Manager: Leonard Brown  
Office Manager: officemanager@slvlandfill.com

**GENERATOR'S WASTE PROFILE SHEET**

This form is to be used to comply with the requirements of "The Special Waste Management Plan" of SLVRSWA.

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**A. Waste Generator Information**

Company Transporting Waste: \_\_\_\_\_  
Contact Phone: \_\_\_\_\_  
Generator Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Generator Address (site of waste generation): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Technical Contact: \_\_\_\_\_  
Contact Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**B. Waste Stream Information**

Name of Waste: \_\_\_\_\_  
Annual Amounts/Units: \_\_\_\_\_  
Process generating waste: \_\_\_\_\_  
Free of Liquids: \_\_\_\_\_ Yes \_\_\_\_\_ No  
If one time disposal, total amount: \_\_\_\_\_  
Lab results enclosed \_\_\_\_\_ Yes \_\_\_\_\_ No

**Generator Certification**

**By signing this profile sheet, the Generator certifies:**

This waste is not a "Hazardous Waste" as defined by USEPA or other Federal regulation and /or the state regulations. This waste does not contain regulated radioactive materials or regulated concentrations of PCB's (Polychlorinated Biphenyls). This sheet and attachments contain true and accurate descriptions of the waste material. All relevant information regarding known or suspected hazards in the possession of the Generator has been disclosed. The analytical data presented herein or attached hereto were derived from testing a representative sample taken in accordance with 40 CFR 261.20© or equivalent rules. If any changes occur in the character of the waste, the Generator shall notify the SLVRSWA prior to providing the waste to the landfill.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Date: \_\_\_\_\_

**SAN LUIS VALLEY REGIONAL SOLID WASTE AUTHORITY  
GENERATOR ANALYTICAL TEST REPORT**

NAME OF LAB: \_\_\_\_\_ PHONE #: \_\_\_\_\_

CONTENT: \_\_\_\_\_

**Attachments:**

Mark all that apply

- ☐ Lab report for (BTEX) – EPA method 8021 for diesel or gasoline
- ☐ Lab report for (TPH) for gasoline EPA method 8015 GRO
- ☐ Lab report for (TPH) for Diesel EPA method 8015 DRO
- ☐ Lab report for (VOC) volatile organic compounds EPA method 8260C
- ☐ Lab report for paint filter test EPA method 9095 B no free liquid
- ☐ Lab report for ignitability test

**Guide lines for Benzene:**

For total benzene in soil – (less than) 5.1 mg/kg – okay (greater than) 5.1 mg/kg – need TCLP to determine it is considered hazardous and a written approval from the CDPHE prior to acceptance.

For non-friable or deconstruction material and special waste

- ☐ Lab test or certification statement on the friability of asbestos material.
- ☐ Completed manifest (**copy to be processed for all loads**)

For other material as required by the landfill

- Specify: \_\_\_\_\_
- Specify: \_\_\_\_\_

# ATTACHMENT C

## ACCEPTANCE – REJECTION FORM

**COMPANY NAME:** \_\_\_\_\_

**CONTACT NAME & NUMBER:** \_\_\_\_\_

**COMPANY TRANSPORTING WASTE:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**GENERATOR NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **CELL:** \_\_\_\_\_

**OFFICE USE ONLY**      **WASTE STREAM REFERRED TO IN PROFILE SHEET HAS BEEN:**

**ACCEPTED** \_\_\_\_\_ **REJECTED** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ACCEPTED WITH CONDITIONS LISTED BELOW:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**GPS-Lat:** \_\_\_\_\_ **Long:** \_\_\_\_\_

**THE FOLLOWING INFORMATION OR TESTS NEED TO BE PROVIDED TO THE FACILITY MANAGER BEFORE A DECISION CAN BE MADE.**

**INFORMATION REQUESTED:** \_\_\_\_\_

**ADDITIONAL TESTING REQUESTED:**

\_\_\_\_\_  
\_\_\_\_\_

**CONDITIONS OF ACCEPTANCE:**

\_\_\_\_\_  
\_\_\_\_\_

**REASONS FOR REJECTION:**

\_\_\_\_\_  
\_\_\_\_\_

**THE FEE FOR ACCEPTANCE OF THE WASTE STREAM WILL BE:**

**\$** \_\_\_\_\_ **PER CUBIC YARD, TON, CONTAINER, OTHER**

**SLVRSWA FACILITY MANAGER – PRINT NAME:**

\_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

# Special Waste Manifest

# Manifest Document No.

Generator's Name	Generator's Address	Generator's Telephone No. <b>Email:</b>	
Origin of Special Waste (Project or Spill Location)			
Contractor/Company Name	Address	Telephone No. <b>Email:</b>	
<b>Contact Person:</b>	<b>Cell #</b>	<b>Email:</b>	
Waste Disposal Site /Site Address San Luis Valley Regional Solid Waste Authority 1600 County RD.44 Monte Vista, CO 81144		Telephone No. 719-852-3810	
Type and Proper name of special waste	Containers: Number    Type	Total Quantity	Unit Wt./Vol
Additional Descriptions for Special Waste Listed Below			
Special Handling Instructions			
<p>CONTRACTOR OR GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described above by type and proper name of the special waste, and that such waste has been managed, packaged, containerized and labeled in accordance with the requirements of 20.9.8 NMAC (Special Waste Requirements) in addition to any other applicable federal, state, or local regulations.</p>			
Printed/Typed Name	Signature		Date
<i>Transporter 1 Acknowledgement of Receipt of Special Waste</i>			
Printed/Typed Name	Signature		Date
<i>Transporter 2 Acknowledgement of Receipt of Special Waste</i>			
Printed/Typed Name	Signature		Date
Rejected Materials (if any)	Destination		
Discrepancy Indication Space			
<p>SLVRSWA Representative: <i>I hereby acknowledge receipt of the special waste as indicated upon this manifest, except as noted above in the Discrepancy Indication Space.</i></p>			
Printed/Typed Name	Signature		Date