

## SPENT CARBON PROFILE FORM

**A. CALIFORNIA CARBON CUSTOMER INFORMATION**

1. Distributor Name: \_\_\_\_\_
2. Distributor Representative: \_\_\_\_\_
3. Phone Number: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Fax Number: (\_\_\_\_)\_\_\_\_-\_\_\_\_
4. Distributor P.O.# \_\_\_\_\_

**B. GENERATOR INFORMATION (Site Information)**

1. Generating Facility: \_\_\_\_\_  
(Customer's Reference for Facility)
2. Site Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. SPENT CARBON IDENTIFICATION**

1. Describe the carbon treatment system and detail the source of, or process which created the contaminants that are on this carbon (examples: system filtering gasoline leaking underground storage tank, wastewater treatment for spent solvent used for degreasing printed circuit boards, ground water cleanup of spilled chemicals from drum storage area, air filtration of office building, waste water treatment from a municipal sewage plant, etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Shipping Containers, Number and Type: \_\_\_\_\_

3. Spent Carbon Type: \_\_\_\_\_

4. Foreign Material Present (rocks, dirt, etc.) ( ) Yes ( ) No

5. A chemical analysis of the influent stream or spent carbon must be provided. Please attach. (Method 8260B, Volatile Organic Compounds (TCLP EXTRACT))

**SPENT CARBON PROFILE FORM**  
**Page 2**

**D. SPENT CARBON HAZARDOUS CHARACTERIZATION**

Questions #1, #2, #3 must be answered. If any of the answers are Yes, California Carbon cannot accept the spent carbon for reactivation.

1. Is the spent carbon a Hazardous Waste as defined by U.S. EPA regulations under the Resource Conservation and Recovery Act (RCRA) as set forth in 40 CRF, Part 261?  
( ) Yes ( ) No
  
2. Is the spent carbon a Hazardous Waste as defined by California State regulation as set forth by the Department of Health Services (Department of Toxic Substance Control)?  
( ) Yes ( ) No
  
3. Is the spent carbon a Hazardous Waste as defined by your State's regulations?  
( ) Yes ( ) No

**E. SPENT CARBON HANDLING INSTRUCTIONS**

1. Required personal protection equipment or special handling instructions: \_\_\_\_\_  
\_\_\_\_\_
  
2. Do you have MSDS(s) for all contaminants in influent stream or on spent carbon?  
( ) Yes ( ) No If "Yes", please attach to this form.

**GENERATOR CERTIFICATION**

I hereby certify that to the best of my knowledge, all information submitted in this and all attached documents is true and accurate, and that all known or suspected chemical contaminants and potential hazards have been disclosed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Type or print)

\_\_\_\_\_  
Title (Type or Print)