



RETURN LOGISTICS

International Corporation

Material Characterization Request

INSTRUCTIONS: Complete this Material Characterization Request (MCR) form, providing detailed information and supporting documentation. Attach MSDS, Packing Inserts, Analytical Data and TCLP results if available. For additional information and definitions, please refer to the MCR Information Sheet. Incomplete or unsigned MCRs will not be approved. MCR approval numbers are required prior to shipping to RLIC.

Section I - Generator's Information

a. Generator's Name	_____	d. Contact Name	_____
b. Generator's Facility Address	_____	e. Contact Phone	_____
	_____	f. Contact Fax	_____
c. Generator's Federal Tax ID	_____	g. Generator's SIC	_____

Section II - Waste Description

a. Waste Name _____

b. Physical Form

<input type="checkbox"/> Consumer packaged products	<input type="checkbox"/> Nonhazardous repacks, QA/QC samples
<input type="checkbox"/> Bulk solid pressed pills, capsules and tablets	<input type="checkbox"/> Bulk intermediate solid waste and filters
<input type="checkbox"/> Bulk solid active and inactive ingredients	<input type="checkbox"/> Debris/production scrap/packing scrap
<input type="checkbox"/> Bulk creams, pastes, lotions or liquids	<input type="checkbox"/> Granular solid
<input type="checkbox"/> Bulk finished formulations/powders/granules	<input type="checkbox"/> Shredded plant trash

c. Consistency

<input type="checkbox"/> Solid	<input type="checkbox"/> Liquid, Pourable	<input type="checkbox"/> Powder	<input type="checkbox"/> Other, specify _____
<input type="checkbox"/> Slurry	<input type="checkbox"/> Granular	<input type="checkbox"/> Sludge	
<input type="checkbox"/> Waxy solid	<input type="checkbox"/> Liquid, Non-Pourable	<input type="checkbox"/> Cream/Paste	

d. Physical Characteristics

Odor	_____	Describe	_____
Color	_____	Describe	_____
Higher Heating Value	_____	BTU/lb.	Solid _____ %
Flash Point	_____	° F	Powder _____ %
Ignition Point	_____	° F	Liquid _____ %
pH	_____		Layers _____

e. Process Generating Waste _____

f. Additional Categories

<input type="checkbox"/> Aerosols	<input type="checkbox"/> Contains crystalline forms of silica
<input type="checkbox"/> Polychlorinated biphenyl's (PCB) ≥ 50 PPM	<input type="checkbox"/> Etiological agents
<input type="checkbox"/> Dioxin or Furan	<input type="checkbox"/> DOT Regulated - Placard required
<input type="checkbox"/> FIFRA Regulated Material	<input type="checkbox"/> Pathogens
<input type="checkbox"/> Sharps	<input type="checkbox"/> DEA controlled substances
<input type="checkbox"/> TSCA Regulated Material	<input type="checkbox"/> Antineoplastics
<input type="checkbox"/> Biological materials	<input type="checkbox"/> Personal Protective Equipment required
<input type="checkbox"/> Contains fibers problematic if inhaled	
<input type="checkbox"/> Viable organisms	

Section III - Waste Composition

Identify the total concentration of constituent listed below. Do not consider packaging. If a constituent is not present, please identify this by noting "N/A".

a. Constituents

_____ Bromine	_____ Cadmium	_____ Silver
_____ Chlorine	_____ Chromium	_____ Thallium
_____ Fluorine	_____ Cobalt	_____ Vanadium
_____ Iodine	_____ Copper	_____ Zinc
_____ Nitrogen	_____ Lead	_____ Aluminum
_____ Sulfur	_____ Manganese	_____ Silicates
_____ Antimony	_____ Mercury	_____ Silicone
_____ Arsenic	_____ Nickel	_____ Soil
_____ Barium	_____ Selenium	_____ Titanium Dioxide
_____ Beryllium		

The above was determined based upon: Analytical Data Analytical Generator Knowledge

b. Composition

Component	CAS	% by Vol.
Total % (Must equal 100)		

* Attach TCLP results if available

Section IV - Packaging

a. Packaging

<input type="checkbox"/> Consumer packaging	<input type="checkbox"/> Pallets
<input type="checkbox"/> Small cardboard containers	<input type="checkbox"/> Fiber drums
<input type="checkbox"/> Paper	<input type="checkbox"/> Totes
<input type="checkbox"/> Large cardboard containers	<input type="checkbox"/> Plastic drums
<input type="checkbox"/> Metal drums	<input type="checkbox"/> Foil _____ %

Section V - Certification

I certify as the generator, or authorized agent of the generator, that all information submitted in this and all attached documents contain true and accurate descriptions of this waste and that all relevant information regarding known or suspected hazards associated with this material have been disclosed. I further certify that this waste is not a listed hazardous waste or characteristic of a hazardous waste in accordance with 40 CFR 261, does not contain more than 49 PPM of PCB's, and does not present a serious public safety or health threat.

Should the Generator or Service Company intentionally or accidentally, with or without knowledge, supply RLIC and/or related disposal facilities with non-acceptable or hazardous waste/materials, the Generator or Service Company will hold RLIC harmless and will indemnify it for any and all liability and expense resulting from such action and the Generator or Service Company will immediately clean up the contaminated area and remove the material/waste.

Printed Name

Signature

Date

Section VI - RLIC Internal Use

a. Review Date _____

d. Approval Date _____

b. Reviewed By _____

e. Approved By _____

c. Signature _____

f. Approval Number _____

g. Comments _____
