



ANNUAL PROFILE RECERTIFICATION

Generator Name: _____

Generator City/State: _____

Generator Contact: _____

Generator Phone No: _____ Fax No. _____

PROFILE #	WASTE DESCRIPTION	1. IS THIS WASTE CURRENTLY BEING GENERATED	2. HAS THE PROCESS GENERATING THE WASTE CHANGED	3. HAS ANY CHARACTERISTIC OF THE WASTE CHANGED <small>(Change in physical state, composition, or concentration of the waste)</small>
		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

If yes is chosen for questions 2 or 3, please explain below. Also utilize this space to indicate any change or update. Any changes may necessitate submission of a new profile.

PROFILE #	CHANGE OR UPDATE COMMENTS

I certify that this profile has been reviewed and is representative of the non-hazardous waste that is shipped to VLS Recovery Services for non-hazardous waste processing. I understand it is the generators responsibility to properly characterize waste materials in accordance with 40 CFR Part 260 and 261.

Signature: _____

Date: _____

Printed Name: _____

Title: _____