BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:  

EPA ID Number:  

Sec. 1  

A. Waste description:  

B. EPA hazardous waste code(s)  

C. State hazardous waste code(s)  

D. Source code  

E. Form code  

F. Quantity generated in 2014  

G. Waste minimization code  

Management Method code for Source code G25  

G. Weight

UOM  

Density:  

Sec. 2  

Was any of this waste that was generated at this facility treated, disposed, and/or recycled on site?  

☐ Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)  
☐ No (SKIP TO SEC. 3)  

ON-SITE PROCESS SYSTEM 1  

On-site Management Method code:  

Quantity treated, disposed, or recycled on site in 2014:  

ON-SITE PROCESS SYSTEM 2  

On-site Management Method code:  

Quantity treated, disposed, or recycled on site in 2014:  

Sec. 3  

A. Was any of this waste shipped off site in 2013 for treatment, disposal, or recycling?  

☐ Yes (CONTINUE TO ITEM B)  
☐ No (FORM IS COMPLETE)  

Site 1  

B. EPA ID No. of facility to which waste was shipped  

C. Off-site Management Method code shipped to  

D. Total quantity shipped in 2014  

Site 2  

B. EPA ID No. of facility to which waste was shipped  

C. Off-site Management Method code shipped to  

D. Total quantity shipped in 2014  

Site 3  

B. EPA ID No. of facility to which waste was shipped  

C. Off-site Management Method code shipped to  

D. Total quantity shipped in 2014  

Comments: