

Product Profile Form

Internal Use Only

Approval # _____

Generator Information

Company	<input style="width: 95%;" type="text"/>	
Address	<input style="width: 95%;" type="text"/>	
City	<input style="width: 95%;" type="text"/>	
State	<input style="width: 95%;" type="text"/>	Zip/Postal Code
Contact	<input style="width: 95%;" type="text"/>	
Phone Number	<input style="width: 95%;" type="text"/>	
Site Name	<input style="width: 95%;" type="text"/>	
Site Address	<input style="width: 95%;" type="text"/>	
Site Contact	<input style="width: 95%;" type="text"/>	
Cell Phone	<input style="width: 95%;" type="text"/>	

Invoice Information

Company	<input style="width: 95%;" type="text"/>	
Address	<input style="width: 95%;" type="text"/>	
City	<input style="width: 95%;" type="text"/>	
State	<input style="width: 95%;" type="text"/>	Zip/Postal Code
Contact	<input style="width: 95%;" type="text"/>	
Phone Number	<input style="width: 95%;" type="text"/>	
Fax Number	<input style="width: 95%;" type="text"/>	
Email	<input style="width: 95%;" type="text"/>	
PO #	<input style="width: 95%;" type="text"/>	

Type of Oil

#2	#4	#6	Kerosene	Diesel	Blend Stock (Black Oil)	Mineral Other	Transformer	Jet A
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Characteristics

Color Appearance Clear Opaque	Oil: % Water: % Sulfur: % Sediment: %	Total Halogens-ppm BTU/lb. Gravity/API (@60 F) PCBs: mg/kg	Arsenic: mg/kg Cadmium: mg/kg Chromium: mg/kg Lead: mg/kg
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Did load or portion of load originate at a utility? YES NO

(If this load originates at a utility, you must send in PCB analysis. Max PCB concentration mst be less 2.0 ppm.)

Does this waste contain greater than 2 ppm PCB's or PCB's derived from a source greater than 2ppm? YES NO

Shipping Information

Transporter: WJL Corp. Same as: Generator Invoice Entity

Proper Shipping Name

Anticipated Volume/Units Frequency Daily Weekly Monthly Yearly One Time

Method of Shipment Bulk Liquid Drum Other

Certification

I hereby certify that all information submitted in this and all attached documents is true and accurate, based on my inquiry of those individuals immediately responsible for obtaining this information. I believe that the submitted information is true and complete to the best of my knowledge and that all suspected hazards have been disclosed. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

Signature Name & Title: Date: