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 Environmental Protection Agency	_____ Hazardous Waste Report	
	Form WR – Waste Received from Off Site	

Generator Information

EPA I.D.:		
Name:		
Street:		
City:	State:	Zip Code:

1	A. Hazardous waste description (60 characters max.)					
B. Management Method	C. Waste form code	D. Quantity Received	E. UOM	Density		
H _____	W _____	_____	_____	_____	<input type="checkbox"/> lbs./gal <input type="checkbox"/> sg	
F. Hazardous waste codes (enter additional codes on back of page if necessary)						
						<input type="checkbox"/> more...

2	A. Hazardous waste description (60 characters max.)					
B. Management Method	C. Waste form code	D. Quantity Received	E. UOM	Density		
H _____	W _____	_____	_____	_____	<input type="checkbox"/> lbs./gal <input type="checkbox"/> sg	
F. Hazardous waste codes (enter additional codes on back of page if necessary)						
						<input type="checkbox"/> more...

3	A. Hazardous waste description (60 characters max.)					
B. Management Method	C. Waste form code	D. Quantity Received	E. UOM	Density		
H _____	W _____	_____	_____	_____	<input type="checkbox"/> lbs./gal <input type="checkbox"/> sg	
F. Hazardous waste codes (enter additional codes on back of page if necessary)						
						<input type="checkbox"/> more...


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1	Additional waste codes:							

2	Additional waste codes:							

3	Additional waste codes:							

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 Environmental Protection Agency	_____ Hazardous Waste Report		
	Form PS – Process Systems for Treatment, Disposal, or Recycling		

By system type, list the amount of waste commercially processed in each treatment, disposal, or recycling system.

1	A. Treatment, disposal, or recycling system description (60 characters max.)		
B. Management Method	C. Reporting year influent quantity	UOM	Density
H _____	Total _____ RCRA _____	—	____ . ____ <input type="checkbox"/> lbs./gal <input type="checkbox"/> sg
COMMENTS:			

2	A. Treatment, disposal, or recycling system description (60 characters max.)		
B. Management Method	C. Reporting year influent quantity	UOM	Density
H _____	Total _____ RCRA _____	—	____ . ____ <input type="checkbox"/> lbs./gal <input type="checkbox"/> sg
COMMENTS:			

3	A. Treatment, disposal, or recycling system description (60 characters max.)		
B. Management Method	C. Reporting year influent quantity	UOM	Density
H _____	Total _____ RCRA _____	—	____ . ____ <input type="checkbox"/> lbs./gal <input type="checkbox"/> sg
COMMENTS:			

4	A. Treatment, disposal, or recycling system description (60 characters max.)		
B. Management Method	C. Reporting year influent quantity	UOM	Density
H _____	Total _____ RCRA _____	—	____ . ____ <input type="checkbox"/> lbs./gal <input type="checkbox"/> sg
COMMENTS:			