

## Material Characterization Form



To be completed by customer representative:

Sales Rep: \_\_\_\_\_ Customer Preferred FDS: \_\_\_\_\_

Quote Number: \_\_\_\_\_

☐ MCF Applies to Multiple Sites

### § Section 1 - Generator (site) Information:

Generator Name: \_\_\_\_\_ Generator #: \_\_\_\_\_  
Address: \_\_\_\_\_ Contact: \_\_\_\_\_  
City/Prov/Postal: \_\_\_\_\_ Email: \_\_\_\_\_  
Phone: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax: \_\_\_\_\_

### § Section 2 - General Waste Information:

Name of Waste: \_\_\_\_\_  
Provide a detailed description of the process that generates the waste: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### § Section 3 - Waste Characteristics: *This section is not required if supporting documentation contains the information.*

Colour: \_\_\_\_\_ Odour: \_\_\_\_\_ pH: \_\_\_\_\_ Flash Point °C: \_\_\_\_\_ % Halogens/ Sulfur: \_\_\_\_\_

Physical State:

- ☐ Liquid (pourable) ☐ Gas (aerosol can) ☐ Solid (non-powder)  
☐ Liquid (non-pourable) ☐ Gas (cylinder/ tank) ☐ Powder  
☐ Liquid (containing sludge) - % Sludge Content: \_\_\_\_\_ ☐ Other (specify): \_\_\_\_\_

Please identify any of the below characteristics that apply to this waste stream:

- ☐ Contains PCB >2ppm ☐ Organic Peroxide ☐ Narcotic or Controlled Substance  
☐ Shock Sensitive ☐ Contains Precursor ☐ Air Reactive ☐ Other (specify): \_\_\_\_\_  
☐ Explosive ☐ Pyrophoric ☐ Water Reactive \_\_\_\_\_

### § Section 4 - Shipping Details:

Material Type:  
☐ Consumer/ Pharmaceutical Packaged Goods ☐ Bulk Finished Product ☐ Bulk Raw/ Process Material  
☐ Other (specify): \_\_\_\_\_ ☐ Super Sack ☐ Tote ( \_\_\_\_\_ L)  
☐ Steel/ ☐ Poly/ ☐ Fibre ( \_\_\_\_\_ L) Drum ☐ Gaylord ☐ Lab Pack  
☐ Steel/ ☐ Poly/ ☐ Fibre ( \_\_\_\_\_ L) Pail ☐ Palletized and Shrink Wrapped  
☐ Box ( \_\_\_\_\_ Kg) ☐ Other (specify): \_\_\_\_\_  
TDG Information (if known): \_\_\_\_\_ ☐ Not Regulated

### § Section 5 - Waste Composition:

Please indicate reference materials attached: (If no attachment is available, complete the table below.)

☐ MSDS ☐ Sample ☐ Product Insert ☐ Analytical ☐ Other (specify): \_\_\_\_\_

Please complete the below table for chemical constituents. Composition (wt%) must total to 100%

Component	CAS Number	Chemical Formula	Composition (wt%)

### § Section 6 - Certification:

I hereby certify that the above and attached description is complete and accurate to the best of my knowledge, that no deliberate omissions of composition or properties exist; that all known or suspected hazards have been disclosed and that the waste has been characterized as per all applicable federal, provincial and local regulations. I hereby acknowledge that should the waste not conform with the description provided by this document, additional costs associated with appropriate management of the waste may be incurred and will be the responsibility of the generator.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### § Section 7 - For Office Use Only: To be completed by Characterization Department.

Waste Category: \_\_\_\_\_ Approved By: \_\_\_\_\_ Service #: \_\_\_\_\_  
Provincial WCC: \_\_\_\_\_ TDG Regulation: UN: \_\_\_\_\_ NOS: \_\_\_\_\_ ☐ NR  
Non-Regulated Transport Descriptions: \_\_\_\_\_  
Special Handling Method (if applicable): \_\_\_\_\_