

***THIS FORM IS TO BE COMPLETED BY THE GENERATOR ONLY IF THE WASTE TO BE DISPOSED OF AT
COVANTA _____***

NAME OF WASTE (AS NOTED IN SECTION 2.1 OF THE MATERIAL CHARACTERIZATION FORM):

As an authorized representative of _____,
I certify that the above referenced waste stream consigned to
Covanta _____ for destruction by incineration is not
subject to regulations as hazardous waste under the Federal
Resource Conservation and Recovery Act (RCRA) Regulations, 40
CFR Part 260 et seq., or the California Administrative Code, Title
22, Division 4.5, Chapter 11.

The foregoing determination is based upon generator knowledge
and / or analytical data , and the information supporting such
determination will be made available to Covanta _____
and Covanta within two business days of the date of request.

AUTHORIZED REPRESENTATIVE

Name: _____

Title: _____

Signature

Date