

# Generation and Management Answer Sheet

**GM**

Please enter your RCRA Site ID number and your site name in the box below, before making as many two-sided copies of this answer sheet as you will need to report each of your waste streams. Complete one answer sheet for each waste stream that was generated. Reference the instructions as you complete this form. Please type or print legibly in blue or black ink.

Your RCRA Site ID Number: \_\_\_\_\_

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

**For DEQ Use Only:**

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



State of Oregon  
Department of  
Environmental  
Quality

**Hazardous Waste**  
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**A. Description of Hazardous Waste Stream****Sequence  
number: \_\_\_\_\_**

**A-1.** What is your waste stream identification? (optional) \_\_\_\_\_

**A-2.** Briefly describe the hazardous waste stream: \_\_\_\_\_

**A-3.** Which EPA hazardous waste codes are associated with this waste stream? \_\_\_\_\_

**A-4.** Which Oregon state-only hazardous waste code is associated with this waste stream? \_\_\_\_\_

**A-5.** Which source code best describes the type of process or activity from which this waste stream was generated?  
G \_\_\_\_\_

**A-5.a.** If you specified source code G25 in question A-5, please enter the management method code from the on-site hazardous waste management system:  
H \_\_\_\_\_

**A-5.b.** If you specified source code G62 in question A-5, please enter the country of origin from which this waste was received: \_\_\_\_\_

**A-6.** Which form code best corresponds to the physical form or chemical composition of this waste stream?  
W \_\_\_\_\_

**A-7.** If there were toxic substances in this waste stream that your facility reported on the most recent Toxic Chemical Release Inventory (TRI) Reporting Form (Form R), please provide the CAS numbers reported: \_\_\_\_\_

**A-8.** Did this waste stream contain mercury?  Yes  No

**A-8.a.** If you answered yes to question A-8, please provide a reasonable estimate of the percentage of mercury in this waste stream: \_\_\_\_\_

**B. Hazardous Waste Management Activities**

**B-1.** What is the total amount of this waste stream generated in the reporting year and what is the unit of measure?  
Quantity: \_\_\_\_\_  Pounds  Gallons  Tons  Cubic Yards  Kilograms

**B-1.a.** If the waste stream is measured in gallons or cubic yards, what is its density?  
Density: \_\_\_\_\_  Pounds/gallon  Specific gravity  Pounds/cubic yard

**B-2.** Was the waste stream managed on-site, off-site or both?  On-site  Off-site  Both

**B-3.** If all or part of this waste stream was managed on-site, how much was managed on-site and how was it managed?  
Quantity \_\_\_\_\_ Management Method Code H \_\_\_\_\_

**B-4.** Indicate the quantity of this waste stream that was remaining on-site at the end of the calendar year you are reporting:  
\_\_\_\_\_

**B-5.** Indicate the quantity of this waste stream that was carried forward from the previous reporting year:  
\_\_\_\_\_

