WASTE STREAM SUBMITTAL FORM

Please complete one form for each waste stream

| Company Name: | Sample Date: |
|---|---|
| Address: | Phone: |
| Contact: | |
| Type of Industry: | |
| Objective: (Define contaminants that need to be addressed and contaminant levels that need to be achieved | |
| for discharge/ reuse) | |
| | |
| Is this a Hazardous waste? Yes / No | |
| If so define the hazard: | |
| | |
| Sample Test Data: | |
| | Suspended Solids |
| | Color: |
| | BOD: |
| Organics: | |
| Heavy Metals: | |
| Other: | |
| Note: Please attach a copy of your EPA Certified Laboratory Analysis and provide MSDS for solvents or | |
| chemicals that are known to be present in this water. | |
| Is treated water to be recycled, sewered or discharged to surface water? | |
| Briefly describe how wastewater is currently treated and the cost of treatment /hauling: | |
| | |
| Volume of water to be treated (Gal / min, Gal / hr, Gal / day, etc.) | |
| Additional Comments: | |
| If further analysis is required, testing may be pro | vided through WYO-BEN, INC. at additional cost. |
| Send minimum 2-liter samples for each waste stream and analysis to: | |

WYO-BEN, INC., Attention: Lab, 1345 Discovery Drive, Billings MT 59102