



Ottawa Valley Waste Recovery Centre
900 Waioto Station Road RR # 4 Pembroke, Ontario K8A 6W5
Phone: 613-735-7537 Fax: 613-735-1837

Contaminated Soil Acceptance Form

Date Form Submitted: _____

Company: _____ Contact Person: _____

Telephone: _____ Fax: _____

Name of Ministry Official: _____

Telephone: _____ Fax: _____

Location of Spill (Address): _____

Date of Spill: _____ Time of Spill: _____

Estimated tonnes for Delivery: _____ No. Loads Expected: _____

Type of Contaminants in Waste Soil Material

- Gasoline Diesel/Middle Distillate Waste Oil Unknown Petroleum
 Solvent Heavy Metals Other or unknown Contamination

Petroleum Hydrocarbon Contaminated Soil

Laboratory Analysis on Soil Provided: Yes No (Must include data on TPH – gas/diesel/heavy oil and flashpoint as a minimum)

Laboratory Analysis on Leachate Provided: Yes No (Must include data on cadmium, chromium, lead, PCB's on TCLP Leachate and Volatile Organic Compounds on the Leachate as a minimum)

Other Types of Contaminated Soil

Laboratory Analysis on Soil Provided: Yes No and on Leachate: Yes No
(For contaminants other than Petroleum Hydrocarbons (eg. Metals, PAH's, solvents) must include data on site-specific contaminants of concern in the soil and all associated leachate parameters on Schedule 4, Reg. 558)

Lab Testing on Spill Completed, Yes/No: _____

Lab Testing Exempt from Regulation 675/98, Yes/No: _____

Reason for Exemption: _____

Please note that all contaminated soil will not be received on site until Lab Testing Results are approved from OVWRC personnel unless an exemption under O.Reg.675/98 has been given.

Additional Comments: _____

Delivery Date Being Requested: _____ Time of Delivery: _____

I _____ (print name), have completed the Contaminated Soil Acceptance Form and understand that all information I have provided is correct.

Signature /Company Name: _____ Date: _____

Authorized OVWRC For Delivery

Date Authorized