



State of Ohio Environmental Protection Agency

Annual Hazardous Waste Report



ENTER GENERATOR ID NUMBER

Generator ID number input field

Form GM - Generation and Management

<b>SEC. 1</b>	A. Hazardous waste description (60 characters max.)																							
B. Hazardous waste codes																								
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C. Source code		Report the Management Method code ONLY if the Source code is <b>G25</b> .	D. Waste form code																					
<b>G</b> <input type="text"/>		<b>H</b> <input type="text"/>	<b>W</b> <input type="text"/>																					

<b>SEC. 2</b>	A. Quantity generated in the year prior to the reporting year	B. Quantity generated in the reporting year	C. UOM Density	D. Was this waste treated, disposed of, or recycled On-site ?
	<input type="text"/>	<input type="text"/>	<input type="text"/> lbs/gal <input type="text"/> sg	<input type="checkbox"/> Yes (continue to system 1) <input type="checkbox"/> No (skip to SEC. 3)
On-site system 1		On-site system 2		
RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site mgmt method		On-site mgmt method		
<b>H</b> <input type="text"/>		<b>H</b> <input type="text"/>		
Quantity treated, disposed or recycled		Quantity treated, disposed or recycled		
<input type="text"/>		<input type="text"/>		

<b>SEC. 3</b>	A. Was any of this waste shipped off-site in the reporting year?		
	<input type="checkbox"/> Yes (continue to box B) <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID of facility to which waste was shipped	C. Management Method	D. Total quantity shipped in the reporting year
Site 2	<input type="text"/>	<b>H</b> <input type="text"/>	<input type="text"/>
Site 3	<input type="text"/>	<b>H</b> <input type="text"/>	<input type="text"/>
Site 4	<input type="text"/>	<b>H</b> <input type="text"/>	<input type="text"/>
Site 5	<input type="text"/>	<b>H</b> <input type="text"/>	<input type="text"/>





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Form OI - Off-site Transporter and Receiving Facility Information

Form 1: EPA ID and Name of transporter or receiving facility

Form 1: Handler type and Address of receiving facility

Form 2: EPA ID and Name of transporter or receiving facility

Form 2: Handler type and Address of receiving facility

Form 3: EPA ID and Name of transporter or receiving facility

Form 3: Handler type and Address of receiving facility

Form 4: EPA ID and Name of transporter or receiving facility

Form 4: Handler type and Address of receiving facility

Form 5: EPA ID and Name of transporter or receiving facility

Form 5: Handler type and Address of receiving facility