



Vertex Residual Management

2323 Clear Lake City Blvd #180-184

Houston, Texas 77062

281-486-4182

Providing Environmental Compliance, Cost-Effective Strategies and Services

[www.vrmus.com](http://www.vrmus.com)

Date:

### Material Information Pick-up Request

Company Name	
Site Contact	
Contact Phone	
Email Address	
Contact Fax	
Site Address	
City/State/Zip	

Invoicing Information Same as Above?  Yes  No - if No, complete section below

Contact	
Contact Phone	
Email Address	
Contact Fax	
Contact Address	
City/State/Zip	

#### Material Description

Describe Material	
Accumulation Date	
Sampling Date	
Process generating material	
Handling Instructions	

#### Type of Container

Drum	How Many?	Type:	Drum ID #:
Roll-off Bin	How Many?	Bin 1 Volume      cu yds	Bin 2 Volume      cu yds.
Bin supplied by			
Bulk Pile	Size	Yds	
Tank	gallons		
Other			
Location of container			

#### Attachments

Generator Knowledge Statement	<input type="checkbox"/> Yes <input type="checkbox"/> No
Material Safety Data Sheet (MSDS)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Representative Sample Analysis	<input type="checkbox"/> Yes <input type="checkbox"/> No

#### Contact Information

Request Completed By			
Phone		Fax	
Email			



Vertex Residual Management  
 2323 Clear Lake City Blvd #180-184  
 Houston, Texas 77062  
 281-486-4182

Email completed Material Pick-up Request to Kory  
 Wynegar [koryw@vrmus.com](mailto:koryw@vrmus.com) or fax to 281-486-0217.

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**Material Information Pick-up Request Instructions**

Company Name	Enter the facility's company and site name, if applicable
Site Contact	Enter name of contact at facility
Contact Phone	Enter phone number of person identified above
Email Address	Enter the email address of person identified above
Contact Fax	Enter fax number of person identified above
Site Address	Enter facility address
City/State/Zip	Enter facility city, state and zip code.

Invoicing Information Same as Above?  Yes  No - if No, complete section below

Contact	Enter billing contact name
Contact Phone	Enter phone number of person identified above
Email Address	Enter email of person identified above
Contact Fax	Enter fax of person identified above
Contact Address	Enter billing address
City/State/Zip	Enter billing city, state and zip code.

**Material Description**

Describe Material	Name of material
Accumulation Date	Date material was first generated on site.
Sampling Date	Date sample was taken
Process generating material	Describe the process that generated the material and identify other materials involved in generating the material. For example, the material is the result of solvent parts cleaning, degreasing, wastewater treatment or recovery/reclaiming of solvents. OR Is the material generated from the production of petroleum refining, lead or zinc production, explosives or organic pigments. At a minimum, the generator should identify chemicals stored and/or used at the facility.
Handling Instructions	Identify any special instructions needed to handle the material, if applicable. Identify any specific instructions on the treatment of disposal of this material, if applicable.

**Type of Container**

Drum	How Many? #	Type: Steel or Plastic, etc.	Drum ID #: Number on Drum
Roll-off Bin	How Many? #	Bin 1 Volume # cu yds	Bin 2 Volume # cu yds.
Bin supplied by	Name of company supplying roll-off bins		
Bulk Pile	Size #	Yds #	
Tank	# gallons		
Other	Other container not identified above		
Location of container	Where the container is located at the facility. Any special instructions on how to get to container.		

**Attachments**

Generator Knowledge Statement	<input type="checkbox"/> Yes <input type="checkbox"/> No Check only one
Material Safety Data Sheet (MSDS)	<input type="checkbox"/> Yes <input type="checkbox"/> No Check only one
Representative Sample Analysis	<input type="checkbox"/> Yes <input type="checkbox"/> No Check only one

**Contact Information**

Request Completed By	Enter name of person completing form	
Phone	Person above phone	Fax Person above fax
Email	Person above Email address	