WASTE SHIPMENT RECORD

ASBESTOS CONTAINING MATERIAL			24 Hour Response Telephone Number:			
	1. Work Site Name and Mailing Address:		Owner's Phone No.			
GENERATOR	2. Operator's Name and Address:			Operator's Phone No.		
	3. Waste Disposal Site (WDS) Name, Mailing Address, and Physical Site L			ocation: WDS Phone No.		
	4. Name and Address of Responsible Agency:					
	5. Description of Materials: 6. Containers:				7. Total Quantity:	
		No.	Туре		m3	(yd3)
	8. Special Handling Instructions and Additional Information:					
	9. OPERATOR'S CERTIFICATION: I hereby declare that the contents of the consignment are fully and accurately					
	described as above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.					
	Printed/Typed Name & Title:					
	10. Transporter 1 (Acknowledgement of Receipt of Materials)					
TRANSPORTATION	Printed/Typed Name & Title:	Signature:		Month/Day/Year:		
	Address & Telephone No.:					
	11. Transporter 2 (Acknowledgement of Receipt of Materials)					
	Printed/Typed Name & Title:		Signature:		Month/Day/Year:	
	Address & Telephone No.:					
	12. Discrepency Indication Space:					
DISPOSAL	13. Waste Disposal Site Operator: Certification of receipt of asbestos materials covered by this manifest					
SP	13. Waste Disposal Site Operator: Certific Printed/Typed Name & Title:	signature:		y this manifest Month/Day/Year:		
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