

HAZARDOUS
WASTE COLLECTION

Your Company Name,
Logo and Details Here

PART A: Notification details

1. Consignment note code:

4. The waste will be taken to (name, address, postcode):

2. The waste described below if to be removed from
(name, address, postcode, phone, e-mail):

5. The waste producer was (if different) (name, address, postcode, phone, e-mail):

3. Premises code (Where applicable)

PART B: Description of the waste

1. The process giving rise to the waste(s) was:

2. SIC for the process giving rise to the waste:

3. WASTE DETAILS (where more than one waste type is collected):

Description of waste	List of wastes (EWC code)	Quantity (Kg)	The chemical/biological components in their waste concentrations are:		Physical form	Hazard Code	Container type, number, size
			Component	Concentration			
	<input type="text"/>						
	<input type="text"/>						

The information given below is to be completed for each EWC identified

List of wastes (EWC code)	UN Identification Number(s)	Shipping Name(s)	UN Class(es)	Packing Groups	Special handling Requirements
<input type="text"/>					
<input type="text"/>					

PART C: Carriers Certificate

(If more or one carrier is used, please attached schedule; for subsequent carriers, If schedule of carriers is attached, tick here)

I certify that I today collected the consignment and that the details in A2, A4, and B3 are correct and I have been advised of any specific handling requirements.

Where this note is comprises part of a multiple collection the round number and collection number are:

1. Carrier name: On behalf of (name, address, postcode, phone, e-mail):

2. Carrier registration no.:

3. Vehicle registration no.:

Signature:

Date: Time:

PART D: Consigners Certificate

I certify that the information in A, B and C has been completed and is correct, that the carrier is registered or exempt and was advised of the appropriate precautionary measures. All waste is packages and labelled correctly and the carrier has been advised of any special handling requirements.

I confirm that I have fulfilled my duty to apply the was hierarchy as required by Regulation 12 of the Waste Regulations 2011.

1. Consigner name: On behalf of (name, address, postcode, phone, e-mail):

Signature:

Date: Time:

PART E: Consignee's Certificate

List of wastes (EWC code)	Quantity of each EWC code received (kg)	EWC code accepted/rejected	Waste Management Operation (R or D code)
<input type="text"/>			
<input type="text"/>			

1. I received this waste at the address given in A4 on: Date: Time:

2. Vehicle registration number (or mode of transport if not): Name: On behalf of (name, address, postcode, phone, e-mail):

3. Where waste is rejected please provide details:

I certify that waste permit/exempt waste operation number: authorises the management of the waste described in B at the address given in A4.

Signature: Date: Time: