

GENERATOR	Waste Shipment Record		Report Date:
	Job Name & Address:	Owner's Name:	Owner's Telephone Number:
	2. Operator's name:		Operator's Phone Number:
	Operator's Address:		
	3. Waste Disposal Site (WDS):		Additional Information or F.P.C Approval Number:
	Mailing Address:		
	Physical Site Address:		
	Phone Number:		
	4. Name and address of responsible Agency:		
	5. Description of Waste:	6. Containers: Type:	Number:
8. Special handling instructions & additional information:			
9. Operator's Certification: I hereby declare that the contents of this consignment are fully and accurately described 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 and title:	Signature:	Date:	
TRANSPORTER	10. Transporter #1: (Acknowledgement of receipt of waste)		
	Printed/typed name and title:	Signature:	Date:
	Address:		Telephone Number:
	11. Transporter #2: (Acknowledgement of receipt of waste)		
	Printed/typed name and title:	Signature:	Date:
	Address:		Telephone Number:
DISPOSAL SITE	12. Discrepancy indication space:		
	13. Waste disposal site owner/operator: Certification of receipt of asbestos materials covered by this manifest except as noted in Item #12.		
	Grid Coordinates: East _____ North _____ El _____		
	Printed/typed name:	Signature:	
Title:	Date:		