

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
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5. Generator's Name and Mailing Address _____ Generator's Site Address (if different than mailing address) _____

Generator's Phone: _____

6. Transporter 1 Company Name _____ U.S. EPA ID Number _____

7. Transporter 2 Company Name _____ U.S. EPA ID Number _____

8. Designated Facility Name and Site Address _____ U.S. EPA ID Number _____

Facility's Phone: _____

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		No.	Type					
1.								
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information _____

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____

16. International Shipments Import to U.S. Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____

17. Transporter Acknowledgment of Receipt of Materials
Transporter signature (for exports only): _____
Transporter 1 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____

Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____

18. Discrepancy

18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Rejection

Manifest Reference Number: _____

18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____

Facility's Phone: _____
18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. _____ 2. _____ 3. _____ 4. _____

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY