

# ASBESTOS DISPOSAL MANIFEST FORM

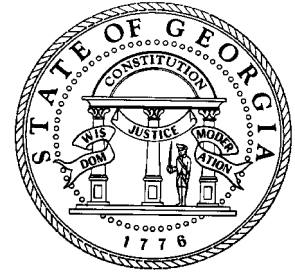
Please complete and return with completion form.

## I. PROJECT INFORMATION:

Asbestos Project: \_\_\_\_\_

Project Address: \_\_\_\_\_

City: \_\_\_\_\_ State: Georgia County: \_\_\_\_\_ Project Dates: \_\_\_\_\_



Removal Contractor (Agent Name): \_\_\_\_\_ License No/Expiration: \_\_\_\_\_

Removal Contractor/Company Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_

## II. WASTE HAULER INFORMATION:

Waste Hauler Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

License No: \_\_\_\_\_ Telephone No: \_\_\_\_\_

\_\_\_\_\_  
Signature of Driver

\_\_\_\_\_  
Date

## III. LANDFILL INFORMATION:

Landfill Name: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Volume Asbestos Received: \_\_\_\_\_ SQ/FT \_\_\_\_\_ LN/FT \_\_\_\_\_ CU/YD

Type of Containers: \_\_\_\_\_

Condition of Container: \_\_\_\_\_

Were Containers Labeled (asbestos waste): EPA/OSHA: Yes: \_\_\_\_\_ No: \_\_\_\_\_

**I CERTIFY THAT \_\_\_\_\_ HAS BEEN APPROVED FOR THE DISPOSAL OF ASBESTOS-CONTAINING MATERIAL AND THAT THE DELIVERED MATERIAL WILL BE DISPOSED IN ACCORDANCE WITH LOCAL, STATE AND FEDERAL REGULATIONS.**

\_\_\_\_\_  
Signature of Landfill Operator

\_\_\_\_\_  
Date