

The Hazardous Waste Regulations 2005: Consignment Note



CARRIER'S COPY

PART A Notification details

1 Consignment note code: /

2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile):

3 Premises code (where applicable):

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

5 The waste producer was (if different from 2) (name, address, postcode, telephone, e-mail, facsimile):

PART B Description of the waste

If continuation sheet used, tick here

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 all of the information given below must be completed for each EWC identified)

Description of waste	List of wastes (EWC code)(6 digits)	Quantity (kg)	The chemical/biological components of the waste and their concentrations are:		Physical form (gas, liquid, solid, powder, sludge or mixed)	Hazard code(s)	Container type, number and size
			Component	Concentration (% or mg/kg)			
	<input type="text" value=""/>	<input type="text" value=""/>					
	<input type="text" value=""/>	<input type="text" value=""/>					

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

EWC code	Packing group(s)	UN identification number(s)	Proper shipping name(s)	UN class(es)	Special handling requirements
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>

PART C Carrier's certificate

PART D Consignor's certificate

(If more than one carrier is used, please attach schedule for subsequent carriers. If a 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.

1 Carrier name:
On behalf of (name, address, postcode, telephone, e-mail, facsimile):

2 Carrier registration no./reason for exemption:

3 Vehicle registration no. (or mode of transport, if not road):

Signature _____

Date Time

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

1 Consignor name:
On behalf of (name, address, postcode, telephone, e-mail, facsimile):

Signature _____

Date Time

PART E Consignee's certificate (where more than one waste type is collected all of the information given below must be completed for each EWC)

Individual EWC code(s) received	Quantity of each EWC code received (kg)	EWC code accepted/rejected	Waste management operation (R or D code)
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>

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

2 Vehicle registration no. (or mode of transport if not road): _____ Name: _____
On behalf of (name, address, postcode, telephone, e-mail, facsimile):

3 Where waste is rejected please provide details:

I certify that waste management licence/permit/authorised exemption no(s).

authorises the management of the waste described in B at the address given in A4. Signature _____

Date Time

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CONSIGNEE'S COPY

PART A Notification details	
1 Consignment note code: <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	4 The waste will be taken to (name, address and postcode):
2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile):	5 The waste producer was (if different from 2) (name, address, postcode, telephone, e-mail, facsimile):
3 Premises code (where applicable): <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	

PART B Description of the waste		If continuation sheet used, tick here <input type="checkbox"/>					
1 The process giving rise to the waste(s) was:	2 SIC for the process giving rise to the waste: <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>						
3 WASTE DETAILS (where more than one waste type is collected all of the information given below must be completed for each EWC identified)							
Description of waste	List of wastes (EWC code)(6 digits)	Quantity (kg)	The chemical/biological components of the waste and their concentrations are:		Physical form (gas, liquid, solid, powder, sludge or mixed)	Hazard code(s)	Container type, number and size
			Component	Concentration (% or mg/kg)			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
The information given below is to be completed for each EWC identified							
EWC code	Packing group(s)	UN identification number(s)	Proper shipping name(s)	UN class(es)	Special handling requirements		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		

PART C Carrier's certificate	PART D Consignor's certificate
<p>(If more than one carrier is used, please attach schedule for subsequent carriers. If a schedule of carriers is attached tick here. <input type="checkbox"/>)</p> <p>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.</p> <p>1 Carrier name: On behalf of (name, address, postcode, telephone, e-mail, facsimile):</p> <p>2 Carrier registration no./reason for exemption:</p> <p>3 Vehicle registration no. (or mode of transport, if not road):</p> <p>Signature Date <input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/> Time <input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/></p>	<p>I certify that the information in A, B and C above is correct, that the carrier is registered or exempt and was advised of the appropriate precautionary measures. All of the waste is packaged and labelled correctly and the carrier has been advised of any special handling requirements.</p> <p>1 Consignor name: On behalf of (name, address, postcode, telephone, e-mail, facsimile):</p> <p>Signature Date <input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/> Time <input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/></p>

PART E Consignee's certificate (where more than one waste type is collected all of the information given below must be completed for each EWC)			
Individual EWC code(s) received	Quantity of each EWC code received (kg)	EWC code accepted/rejected	Waste management operation (R or D code)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
1 I received this waste at the address given in A4 on: Date <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Time <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>			
2 Vehicle registration no. (or mode of transport if not road):		Name: On behalf of (name, address, postcode, telephone, e-mail, facsimile):	
3 Where waste is rejected please provide details:			
I certify that waste management licence/permit/authorised exemption no(s). <input type="text"/>			
authorises the management of the waste described in B at the address given in A4.		Signature Date <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Time <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	