

Waste Disposal Manifest

Generator Information

Generator Company Name*: _____

Generator Address*: _____

Contact Person*: _____

Contact Phone*: _____

Contact Email: _____

Waste Details

Waste Type*: _____ > Options: Chemical, Oil, E-Waste, Biohazard, Construction Debris, Other

Waste Description*: _____

UN Code: _____

Unit*: _____ > Options: kg, L, tonnes, units

Packaging Type*: _____ > Options: Drums, Bags, IBC, Tank, Other

- Flammable
- Corrosive
- Toxic
- Oxidizer
- Reactive
- Infectious
- Radioactive
- Safety Data Sheet (SDS) Attached

Transporter Information

Transporter Company Name*: _____

Transporter License Number*: _____

Vehicle Registration: _____

Driver Name: _____

Driver Phone: _____