

WASTE SHIPMENT RECORD

GENERATOR	1. Work site name and address	Owner's name	Owner's Telephone No.
	2. Operator's name and address		Operator's Telephone No.
	3. Waste disposal site (WDS) name, mailing address, and physical site location: Northern Tier Solid Waste Authority US Route 6, PO Box 10 Burlington, Pa 18814		WDS Phone No. 570-297-4177
	4. Name, and address of responsible agency. Pa Department of Environmental Protection 208 West Third Street, Suite 101 Williamsport, Pa 17701		
	5. Description of materials	6. Containers: No: Type:	7. Total Quantity (yd ³)
8. Special handling instructions and 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 area 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	Month Day Year	
10. Transporter 1 (acknowledgement of receipt of materials).			
_____	_____	_____	
Printed/typed name and title	Signature	Month Day Year	
11. Transporter 2 (acknowledgement of receipt of materials)			
_____	_____	_____	
Printed/typed name and title	Signature	Month Day Year	
12. Discrepancy indication space:			
13. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12.			
_____	_____	_____	
Printed/typed name and title	Signature	Month Day Year	

TRANSPORTER

DISPOSAL SITE