

F10, Forgeside House, Cardiff Bay Business Centre, Lewis Road, Cardiff, CF24 5FA

Statement of Cleanliness Completion Certificate

Client:	RHONI	DDA HO	USING ASSO	CIATION		
Site address:	24	PARRY S	TREET, TYLORSTO	SWN, FERNDAL	E, CF4]	3AT.
Location on Site:	MITCH	EN CEIL	INC-			
Project No:	220195	0694R 1031R	Date project commenced:	4-6-21	Date project completed:	4-6-21
Client contac name:	t		Client contact phone No:		Mobile:	
Preliminary ir client:	nspection for	Date:	4-6-21	Preliminary inspection for company:	Date:	4-6-21
		Name:			Name:	R.J. SARREP
		Signature:			Signature:	R.J. SARRER
	, Description	7				
Description of	f work carried	out: REM	SUAC UNID DIS	ESAL OF LOG	SE TEX	TURED COATH
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Completion ac	cceptance for	Date:	4-6-21	Completion acceptance for company:	Date:	4-6-21
		Name:			Name:	R.S. BARRETT

Signature:

Signature:

The Hazardous Waste Regulations 2005: Consignment Note



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): 2 Y CARCKY STREET, THE WASTE PART B Description of the waste 1 The process giving rise to the waste(s) was: STREET was to component in the process giving rise to the waste: STREET was to component in the waste (s) was: STREET was to component in the waste (s) was: STREET was to component in the waste (s) was: STREET was to component in the waste (s) was: STREET was to component in the waste (s) was: STREET was to component in the waste (s) was to component in the waste and their concentrations are gas, included of mixed or mixed (w) or mg/kg) The information given below is to be completed for each EWC identified EWC code UN identification number(s) UN class(es) Packing group(s) Special handling requirements The information given below is to be completed for each EWC identified EWC code UN identification proper shipping name(s) UN class(es) Packing group(s) Special handling requirements UN class (s) Packing group(s) Special handling requirements UN
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PART B Description of the waste 1 The process giving rise to the waste(s) was: Carrier's certificate Event Solution of the waste (soluted all of the information given below must be completed for each EWC identified) Description of waste List of wastes List of wastes (EWC code) (6 digits) (leg) (RWC code) (6 digits) (leg) The chemical/biological components in physical form (gas, liquid, solid, solid, or mixed) (RWC code) (6 digits) (leg) The information given below is to be completed for each EWC identified EWC code Windentification Proper shipping name(s) UN class(es) Packing group(s) Special handling requirements UN class(es) Part D Consignor's certificate (If more than one carrier's used, please attach schedule for subsequent carriers. If schedule of carrier's attached tick here. Correct and I have been advised for any specific handling requirements. I carrier name: On behalf of (name, address, postcode, telephone, e-mail, facsimile): 2 Carrier registration no. (or mode of transport, if not road): IST I G-WW SWANGE CHUSSON TO THE ASS OF T
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the waste and their concentrations are: (gas, liquid, solid, powder, sludge or mixed) Component Concentration (% or mg/kg) Concentration (%
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On behalf of (name, address, postcode, telephone, e-mail, facsimile): Vehicle registration no. (or mode of transport, if not road): 13121 G-UW On behalf of (name, address, postcode, telephone, e-mail, facsimile):
2 Carrier registration no./reason for exemption: CSDUCISITE 3 Vehicle registration no. (or mode of transport, if not road): ISTZIG-UW
3 Vehicle registration no. (or mode of transport, if not road): 131-216-44
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Signature (Signature Signature Signa
Date 0 6 2021 Time 1 200 Date 0 6 2021 Time 1 200
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 Quantity of each EWC code received (kg) EWC code code(s) received Code(s) received EWC code accepted/rejected
171016015 10K6 (A) DIS
1 I received this waste at the address given in A3 on: Date 706 2021 Time 1150
2 Vehicle registration no. (or mode of transport if not road):
On behalf of (name, address, postcode, telephone, e-mail,
3 Where waste is rejected please provide details: facsimile): MOOKLAND TAV
Lead to the true star permit forward from a provider provider
I certify that waste permit/exempt waste operation number:
EPR/AB3132AH.
authorises the management of the waste described in B at the address given in A3. Where the consignment forms part of a multiple collection,