## **The Hazardous Waste Regulations 2005: Consignment Note**



PART A Notification details								
	19 RH	3 The waste	will be taken to	o (name, a	ddress and po	stcode):		
2 The waste described below is to be removed from (nampostcode, telephone, e-mail, facsimile):	ne, address,	Whit!	13 Per	1446121	noot c	e, address,		
STOOK STREET		4 The waste	producer was	(if different	1B from 2) (name	e. address.		
CLYDIACH VIACE, TONYPANE	) <b>/</b> .^	posicode.	telephone, e-n	nail, racsim	ille):			
CF40 ZDT.		iéwis	Road		5, 12	al SFA		
PART B Description of the waste					ntinuation she	eet used, tick here		
1 The process giving rise to the waste(s) was:	2 S	SIC (2007) for the	process giving	g rise to the	waste: 3c	1001		
3 WASTE DETAILS (where more than one waste type is col	llected all of the inform	nation given belo	w must be com	pleted for	each EWC ide	ntified)		
	(g) the waste a					ard Container e(s) type, number and size		
TEXTURED 17060S	o chai	- · · · · - · · · · · · · · · · · · · ·		Sola	1 17	7 3m²		
	0	3	0,0					
The information given below is to be completed for each E	WC identified							
EWC code UN identification Proper shippir number(s)	Proper shipping name(s)		Packing grou	roup(s) Specia		al handling		
170605 2590 wate A	ish chexadil	e G	III		manual	handling		
					•	. 0		
PART C Carrier's certificate	2000		PART D Co	nsignor'	s certificate			
(If more than one carrier is used, please attach schedule for subsequent carriers. If schedule of carriers is attached tick here. (a)  I certify that I today collected the consignment and that the details in A2, A3 and B3 are correct and I have been advised of any specific handling requirements.  Where this note comprises part of a multiple collection the round number and collection number are formulated by the carrier has been advised of any special handling requirements.  I certify that the information in A, B and C has been completed and 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.  I confirm that I have fulfilled my duty to apply the waste								
1 Carrier name: R - S - RARRETT On behalf of (name, address, postcode, telephone, e-ma	hierarchy as required by Regulation 12 of the Waste (England and Wales) Regulations 2011.  1 Consignor name: On behalf of (name, address, postcode, telephone, e-mail, facsimile):							
2 Carrier registration no./reason for exemption:		l l	raesiiiie).			v		
3 Vehicle registration no. (or mode of transport, if not road): BRZIGUU  Signature Ray & Signa								
Date 1506 Ze Zi Time 1600			Date 1 506 2021 Time [ ]					
PART E Consignee's certificate (where more than one	e waste type is collecte	d all of the inform	-	- III				
Individual EWC Quantity of each EWC code received (k	(g) EV	VC code cepted/rejected			peration (R or I			
170605 60	Ca	ecepted"	3	Di	5			
		i						
1 I received this waste at the address given in A3 on: Da	te 150620	221 Tim	e090E	30	//			
<ul><li>2 Vehicle registration no. (or mode of transport if not road)</li><li>3 Where waste is rejected please provide details:</li></ul>	:		Name: On behalf of (facsimile):	Culc name, addi	ess, postcode	emmell t, telephone, e-mail,		
y more made to rejected preude provide details.			M 00,	elan	d (	ENV		
I certify that waste permit/exempt waste operation number:		,			11	_, , ,		
authorises the management of the waste described in B at t given in A3.	the address		$C_{0}$	0/10/1	1			
Where the consignment forms part of a multiple collection,			Signature	- 500	mel	/		
as identified in Part C, I certify that the total number of consignments forming the collection are:			Date 15	062	021	Time 0905		



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

## **Statement of Cleanliness Completion Certificate**

	State	incirc	or cicariiiic33	Completion	CCICIII	<u> </u>				
Client:	2HA									
Site address:	5	7 0	PAK SHEE	et						
Location on Site:	GROUNID	FLOOR	HALL CELLING,							
Project No:	2220AS	1104R	Date project commenced:	15-6-21	Date project completed:	15-6-21				
Client contac	t		Client contact phone No:		Mobile:					
Preliminary inspection for client:  Date: Name:		Date:	15-6-20	Preliminary inspection for company:	Date:	15-6-21				
		Name:	reil Las &		Name:	R.J. BARRE				
		Signature:	NEIL Francis		Signature:	16 Borreto				
	15-6-6	RELICUCIO CHACCIO.	H							
CEILING RECULA CLEAN V	TROM TIONS Z RND IAU DED, IAR	HALL, AL DER, URI DEROSCO CEA VISC	SUBLIAND DISPOSE  LE WORK CARRIED  NI COMPLETENI OT  SUBTACES WIFE  LIANTY IN SPECTED	D OUT US PER = REMOVAL WOR ED DOWN, CEIL	THE CONT BLL AREA LING WA	ROLOF ABOS VIACULMED STHEN				

**Completion acceptance** 

for company:

Date:

Name: Signature:

Completion acceptance for

client:

Date:

Name:

Signature: