The Hazardous Waste Regulations 2005: Consignment Note



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PART A Notification details										
1 Consignment note code: PHHENV / 4 20 RW 3 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):)	
33 union street										
The waste producer was (if different from 2) (name, address, postcode, telephone, e-mail, facsimile):										
CFL3 41-10 PHH ENVIronMental LTD Lieuis road Cordiffs CF24 SFA										
PART B Description of the waste If continuation sheet used, tick here										
1 The process giving rise to the waste(s) was: Removals 2 SIC (2007) for the process giving rise to the waste: 39 . 00 /										
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 was		The chemica				Physical fo		Hazard	Container type, number	
14 130es	(kg)	Component	nt Concentration powder, sludge ar			and size				
1 1 1 2 2		al	1	(% or ı	or mg/kg) or mixed)			7 3		
textured 170	602	chrysot	ile	_3	J%	\rightarrow olid	λ	47	⊃m,	
coating										
The information given below is to be completed for each EWC identified										
EWC code UN identification number(s)	Proper shipping name((s)	UN class(es)		Packing group(s)		Special handling requirements			
1700052590	52590 moste ASD chrysoli		9	9 1		manu		ual ha	1	
DADT C Comit also different	<u> </u>				20275				U	
PART C Carrier's certificate					PART D	Consignor'	s certif	icate		
(If more than one carrier is used, please attach schedule for subsequent carriers. If schedule of carriers is attached tick here. Certify that the information in A, B and C has been completed and is correct, that the carrier is registered or										
I certify that I today collected the consignm			B3 are		exempt an	d was advise	d of the	appropriate	precautionary	
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: handling requirements. 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: Record						hierarchy as required by Regulation 12 of the Waste (England and Wales) Regulations 2011.				
On behalf of (name, address, postcode, telephone, e-mail, facsimile):					1 Consignor name:					
On behalf of (name, address, postcode, telephone, e-ma facsimile):							ephone, e-mail,			
2 Carrier registration no./reason for exemp	otion: Cbdu C	215 1	7/.		80					
3 Vehicle registration no. (or mode of transport, if not road):										
Signature Signature Signature						gnature Association				
Date 16062021 Time 1530						e 1530				
PART E Consignee's certificate (whe		ype is collecte	d all of th	e inform	ation given	below must b	e comple	eted for eacl	h EWC)	
Individual EWC Quantity of each EWC of code(s) received	code received (kg)	(22.00	VC code cepted/r	eiected	Waste m	anagement o	peration	(R or D cod	le)	
i Atology leceived			1)	0,5					
	()		<u> </u>	/		<i>'</i>	ري			
1 I received this waste at the address given in A3 on: Date 706 2021 Time										
2 Vehicle registration no. (or mode of transport if not road): Name:										
On behalf of (name, address, postcode, telephone, e-mai								phone, e-mail,		
3 Where waste is rejected please provide details: facsimile):								w		
I certify that waste permit/exempt waste operation number:										
EPR AB 3132A.A.										
authorises the management of the waste described in B at the address given in A3. Signature										
Where the consignment forms part of a multi as identified in Part C, I certify that the total I consignments forming the collection are:					Date 1	7062	2	Tim	M 9 30	



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

Statement of Cleanliness Completion Certificate

Client:	RH	A			
Site address: 3	5 UY	lion Street			
Location on Site:	ourse	Céllins			
Project No: 2220 AS2	39 R-13 139 R-A	Date project commenced	16.06.2021	Date project completed:	16-06.2021
Client contact name:		Client contact phone No:		Mobile:	
Preliminary inspection for client:	Date: Name: Signature:	9. Pacestork	Preliminary inspection for company:	Date: Name: Signature:	16:06.2021 Source Barres
removed/ ceiling/	TO LOS	Kitchen		remove Patch Cand reposed	
NSFECTION W	and to	TOVAL AND DISP (WATER DAMM) IN THEN WALL IT THEN WALL IT THEN WALL THEN WALL THEN WALL TO ISE	AGO OF Textured AGG ARGA TO AGG ARGAS ARGAS IN TOLLOWS SATISTACTORY	LOUNGE WORK WAS ZO VIACUUG D BY A	CELING- E IMZ CARRICD IZ. MED CLEIAN VISUAC
Completion acceptance for lient:	Date:	16.062021	Completion acceptance for company:	Date:	16.06.3071
	Name: Signature:	G-ROSSILO		Name: Signature:	Same Burel