- [PART A Notification details PRODUCER'S/HOLDER'S/CONSIGNOR'S COPY (Delete as appropriate)																			
The state of the s																				
- 1	1 Cons	gnme	nt note code	:	EX	EF	1 5	L / I 2	3 0 0	-	4 The waste will be taken to (name address and									
l	postc	oge, t	elephone, e-n	ow is nail, f	to be r acsimi	emove lo)	ed fro	om (name, add	iress,	Ī	4 The waste will be taken to (name, address and postcode): Moorland Environmental Ltd									
1	10 P Mae		Place								Unit 43 Portmanmoor Rd, Cardiff, CF24 5HB Tel: 02920 485528									
1	CF4	3 4D	-						0	-	5 The waste producer was (if different from 2) name,address,postcode,telephone, e-mail, facsimile):									
1							П				HJL Environmental Ltd Ty Capel, No5, 57 Dock View Rd, Barry, CF63 4LQ									
	The ner	vegov s	living rise to th				_													
							aste t	ASBESTOS ype is collecte	REMOVAL ed all of the infor	2 S	2 SIC for the process giving rise to the waste 3 9 . 0 0 / strong given below-must be completed for each EWC identified)									
1	ESCRIP	TION (OF WASTE		List of	wastes	(EWC	Quantity (Kd	The chemical/b	ological	colcel component of the last state									
	BAGS 1 No of Bags waste and their Component								Concentrations are Concentration (%			(gas,liquid,solid, powder, sludge or		Hazard Code(s)	- The state of the					
	Ins	Insulation Materials 1 7 0 6 0 1 Amosite/ Ch.							ysotile	or mg/kg) >40%	-	mixed solid		H7		N/A				
	Construction Materials 1 7 0 8 0 5 Jakks Chrysot								le	e <20%		solid		HP5 HP7		N/A				
			iven below is	to be	comple	ted for	each i	EWC identified							N/A					
F	EWC code Packing group(s) UN Identification num Proper shipping										(s) 1	UN	class(es)	Specia	al Handling requirements					
1		Amphibole (UN2212 V Amphibole (A	/aste A mosite	sbestos, / Crocidolite				Double Bagged/Wrapped							
H	7 0	0 6 0 5 III 2590 UN2590 Waste								Asbest	os, Chrysotile		9		Double Bagged/Wrapped					
(If I	nore the	in one	carrier is used	l, plea	se atta	ch ach	cdule	for subsequent		100	partification that the info									
Car	riers, i	asch	edule of carrie	rs is	attache	d fick h	here		b		I certify that the information in A, B and C has been completed and is correct, that the carrier is registered exempt and was advised of the appropriate precautionary measures. All of the waste is packaged and labell correctly and the carrier has been advised of correctly and the carrier has been correctly as a correctly and the carrier has been correctly as a correctly and the carrier has been correctly as a correctly and the carrier has been correctly as a correctly a									
and B3 are correct and I have been arrivised of any specific be usually in A2, A4													orrectly and the carrier has been advised of any special handling requirements.							
1.40	uireme lection	tits.	SELLE ALBERT AND	note	compr	ises pa	art of	a multiple co	lection the	1										
Ц	1 1 1										I confirm that I have fulfilled my duty to apply the wasts hisrarchy as required by Regulation 12 of the Waste									
	arrier n behalf		K Bric	e				-mall,facsiml		⊢(En	(England and Wales) Regulations 2011.									
H.	L En	nmental	td	code, i	elepho	one, e	-mall,facsiml	le):	- 1	1 Consignor name AS PER PART C - SECTION 1										
No	5 57	k View R	d, B	arry,	CF6	3 41	LQ		On behalf of (name, address, postcode, telephone, e-mail,facsimile): Ty Capel											
2 C.	nrier re	tion no./rease	on fo	r exem	ption				No5, 57 Dock View Rd											
3 V€	hicle re	gistra	tion no. (or r	node	of trai	IOS	t. if ne	of roads-		Barry										
(N68					1	or roady.		<u>CF63 4LQ</u>											
Sico	ature					_	_													
Date	. 17		202	14		_	Ti	The	(Sign	ature	_								
ndi	idual E	W.C	10			Time		///Sur	3	Date	1/1601	A 2	0 2 4	TI	mo 11/3	CHRS				
	TOUGH E	-	Quantity	of pac	th EW	code	recei	ived (kg)		1.0	code pted/rejected		Waste man	agemen	t operation (R or D COD	DE)			
7	0 6	0	-	-	BAG				KGS	1	cepted / Rejec	at				D1:	5			
1	0 6	0 5		Ĺ	BAGS	S/WR	APS	=	10 KGS	Ac	cepted / Rejec	at				D18	5			
			iste at the ad					Date	DC4 2	0 2	4	me	100	June						
Veh	icle reg	istrati	on no. (or m	ode d	f trans	port i	f not	road):				-	2	Лик э						
3 W											Name Ltu									
										On be	On behalf of (name, address, postcode, telephone, e-mail, facsimile)									
I ce	tify the	t was	te permit/exe	mpt	waste d	perati	ion n	umber:		Moorland Env Ltd										
		mit numi	ber	- EF	PR/A	\В3	132AH		Unit 43 Portmanmoor Rd, CF24 5HB											
tho yen	rises th in A4	e man	agement of (he w	aste de	escribe	ad in i	B at the above	e address	Tel: 02920 4855528 sales@moorlandenv.co.uk										
When	e the co	nstgar	ment forms par	tofa	multiple	e coller	ction, a	as identified in	Part C.	aignature										
Where the consignment forms part of a multiple collection, as identified in Part C, certify that the total number of consignments forming the collection are:											Oate									
										va	1100	4	- 2 4	T	ime	HRS				



Job LCB2300 Reoccupation visual inspection certificate Site: 10 Park Place, Maerdy, CF43 4DJ Description of type of Work: Removal AC Undercloak to Verge Quantity of asbestos removed: 3m Date on which the above-mentioned works were Completed. 16.04.2024 Specific areas of where the above-mentioned works were carried out: Roof Any additional works carried out at the request of the client: N/A The area specified above has been thoroughly cleaned and visually. inspected. The above-mentioned areas are suitable for reoccupation YESINO Signature of person completing this inspection Date: 16. 4. 2024

