

Waste Shipment Record

Manifest #: _____

GENERATOR INFORMATION																																																								
Generator Name: _____ Address: _____ Contact Name: _____ Phone Number: _____	Job #: _____ Location: _____ Address: _____																																																							
Description of Waste: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 30%; text-align: center;">Description</th> <th style="width: 15%;"></th> <th style="width: 25%;"></th> </tr> </thead> <tbody> <tr> <td>Friable</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Non-Friable</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Both</td> <td>_____ % Friable</td> <td>_____</td> <td>_____</td> </tr> <tr> <td></td> <td>_____ % Non-Friable</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Grit & Bar Screen</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Stabalized Sludge</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Contaminated Soil</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Contam Soil Bury</td> <td>_____ Other</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Auto Fluff</td> <td>_____ Description: _____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>		Description			Friable	_____	_____	_____	Non-Friable	_____	_____	_____	Both	_____ % Friable	_____	_____		_____ % Non-Friable	_____	_____	Grit & Bar Screen	_____	_____	_____	Stabalized Sludge	_____	_____	_____	Contaminated Soil	_____	_____	_____	Contam Soil Bury	_____ Other	_____	_____	Auto Fluff	_____ Description: _____	_____	_____	<table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <thead> <tr> <th style="width: 30%; text-align: center;">Containers Quantity</th> <th style="width: 30%; text-align: center;">Type</th> <th style="width: 40%; text-align: center;">Volume in Cubic Yards</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> Vehicle License No./State _____ Disposal Facility Permit Number _____ Truck _____ Rolloff _____	Containers Quantity	Type	Volume in Cubic Yards												
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TRANSPORTER #1	DESTINATION (Disposal Facility)																																																							
Transporter Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ DEC/EPA Permit #: _____ Name of Driver (print): _____	Disposal Facility's Name: <u>Broome County Landfill</u> Address: <u>286 Knapp Road</u> City, State, Zip: <u>Binghamton, NY 13905</u> Phone #: <u>607-763-4434</u> 6NYCRR 360 Permit #: <u>7-0399-0027/00002</u> Name of Authorized Agent (Print): _____																																																							
I hereby warrant that the above named and described material was from the owner on the date of receipt referenced below.	I hereby warrant that the above named and described material was accepted from the transporter on the date of receipt referenced below.																																																							
Signature of Driver _____ Date of Receipt _____	Signature of Disposal Facilities _____ Date of Receipt _____ Authorized Agent _____																																																							
I hereby warrant that the above named and described material was delivered without incident or contamination on the date of delivery referenced below.	The material delivered by the transporter has been rejected for disposal at this disposal site.																																																							
Signature of Driver _____ Date of Receipt _____	Signature of Disposal Facilities _____ Date of Receipt _____ Authorized Agent _____ Landfill Ticket Number: _____																																																							