

Waste Shipment Record Instructions

WASTE GENERATOR SECTION (ITEMS 1-9)

1. Enter the name of the facility in which asbestos waste is generated and the address where the facility is located. In the appropriate spaces, enter the name of the owner of the facility and the owner's phone number.
2. Enter the name, address and license number (if applicable) of the Abatement Operator (Contractor) performing the asbestos removal. If no contractor is used, owner acts as abatement operator performing work. In the appropriate spaces, enter their phone, email and fax number.
3. N/A – Information already entered
4. N/A – Information already entered
5. Indicate the type of asbestos waste materials generated.
6. Enter the number and type of containers checked in Item 5. See codes below:
 - DM – Metal drums, barrels
 - DP – Plastic drums, barrels
 - BA – 6 mil (minimum) plastic bags or wrapping
7. Enter the total cubic yards of material in all shipping containers listed in Item 6.
8. Use this space for additional information or specialty handling instructions.
9. To be completed by the Abatement Operator (Contractor).

TRANSPORTER SECTION (ITEM 10)

10. To be completed by primary or first transporter of asbestos waste.

DISPOSAL SITE SECTION (ITEMS 11-13)

11. To be completed by Kootenai County Solid Waste personnel.
12. To be completed by Kootenai County Solid Waste personnel.
13. To be completed by Kootenai County Solid Waste personnel.

NOTE: Upon disposal, the original record will be retained by Kootenai County Solid Waste and a copy will be given or mailed to the Abatement Operator within 35 days.

WASTE SHIPMENT RECORD

KOOTENAI COUNTY SOLID WASTE FIGHTING CREEK LANDFILL

OFFICE USE ONLY	Location: RTS PTS
	Date:
	Time In:
	Initials:

◇ GENERATOR

1. Work Site Name and Mailing Address:		Owner's Name:	Owner's Telephone #:
2. Abatement Operator (Contractor's) Name & Mailing Address:		Abatement Operator's:	
Operator's License Number:		Telephone #:	
		Email:	
		Fax #:	
3. Waste Disposal Site Name & Mailing Address:		Disposal Telephone #:	
Kootenai County Fighting Creek Landfill 22089 S. Highway 95 Coeur d'Alene, ID 83814		(208) 446-1450 (208) 446-1432 (Fax)	
4. Name and Mailing Address of Responsible Agency:		Agency Telephone #:	
US EPA, Region 10 1200 Sixth Avenue, Suite 155 Seattle, WA 98101		(206) 553-1200 1-800-424-4372	
5. Types of Materials:	6. Number & Type of Containers:	7. Total Cubic Yards of Shipping Containers:	
<input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable	Number: Type: _____ _____		
8. Special Handling Instructions & Additional Information:			
9. Abatement Operator's (Contractor's) Certification: I hereby declare that the contents of this consignment were generated within Kootenai County, State of Idaho, are fully and accurately described above by proper shipping name and are classified, packed, labeled, and are in all respects in proper condition for transportation by highway according to applicable International, Federal and State regulations.			
Printed Name & Title		Signature	Month/ Day / Year

◇ TRANSPORTER

10. Transporter (Acknowledgment of Receipt of Material)		
Company Name, Address & Phone	Name & Title	Month/ Day / Year
	Signature	

◇ DISPOSAL SITE (Office Use Only)

11. Discrepancy Indication Space: <input type="checkbox"/> None <input type="checkbox"/> Improperly Contained <input type="checkbox"/> Improperly Labeled <input type="checkbox"/> Quantity			
12. Disposal Record:	Disposal Date:	Supervisor's Initials:	
GPS Northing:	GPS Easting:	Elevation:	
13. Waste Disposal Site or Operator: Certification of receipt of asbestos materials covered by this manifest except as noted in Item 12.			
Printed Name & Title		Signature	Month/ Day / Year