

INSTRUCTIONS

Waste Generator Section (Items 1–9):

1. Enter the name of the facility at which asbestos waste is generated and the address where the facility is located. In the appropriate spaces, also enter the name of the owner of the facility and the owner's phone number.
2. If a demolition or renovation, enter the name and address of the company and authorized agent responsible for performing the asbestos removal. In the appropriate spaces, also enter the phone number of the operator.
3. Enter the name, address, and physical site location of the waste disposal site (WDS) that will be receiving the asbestos materials. In the appropriate spaces, also enter the phone number of the WDS. Enter "on-site" if the waste will be disposed of on the generator's property.
4. Provide the name and address of the local, state, or EPA Regional office responsible for administering the asbestos NESHAP program.

EPA delegates regulatory authority to the Idaho Department of Environmental Quality (DEQ) to administer [40 CFR, Part 61, Subpart M "National Emission Standards for Hazardous Air Pollutants - Asbestos" \(Asbestos NESHAP\)](#) in the context of renovation and demolition activities occurring at Tier 1 major facilities. DEQ is also the administrator for regulated asbestos-containing material (ACM) originating from Tier 1 major facilities that is arriving at Tier 1 active asbestos waste disposal sites. In these cases, WSR Section 4 should be populated with the following address: Idaho Department of Environmental Quality; Air Quality Division; Stationary Source Bureau; 1410 North Hilton Street; Boise, ID 83706. A list of Tier 1 facilities can be generated on the DEQ website's [Issued Permits and Water Quality Certifications](#) page.

Conversely, EPA is the administering agency in the context of ACM waste that does not originate from a Tier 1 source, and/or waste being deposited at a non-Tier 1 asbestos disposal site. In these cases, WSR Section 4 should be populated with the following address: Asbestos NESHAP Coordinator; US EPA, Region 10; 1200 Sixth Avenue, Suite 155; Seattle, WA 98101.

5. Indicate the category of ACM generated, as well as the identity of the respective asbestos-containing building material (ACBM). The ACM categories, and common ACBM types, are as follows:
 - Friable asbestos material, including inherently friable materials like thermal system insulation, acoustical texture, and fireproofing; OR Category I and Category II non-friable materials that have been rendered friable.
 - Category I non-friable asbestos material (e.g., packings, gaskets, resilient floor covering, and asphaltic roofing products).
 - Category II non-friable asbestos material, including all other forms of ACM that, when dry, cannot be crumbled, pulverized, or reduced to powder by hand pressure. A common Category II material is cement asbestos board (Trade Name: "Transite").

6. Enter the number of containers used to transport the asbestos materials listed in Item 5. Also enter one of the following container codes used in transporting each type of asbestos material (specify any other type of container used if not listed below):
 - DM - Metal drums, barrels
 - DP - Plastic drums, barrels
 - BA - 6 mil plastic bags or wrapping
7. Enter the quantities of each type of asbestos material removed in units of cubic meters or cubic yards.
8. Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate waste disposal site is designated, note it here. Emergency response telephone numbers or similar information may be included here.

NOTE: The waste generator must retain a copy of this form.

9. The authorized agent of the waste generator must read and then sign and date this certification. The date is the date of receipt by transporter.

Transporter Section (Items 10 & 11):

10. Transporter 1: Enter name, address, and telephone number of each transporter used, if applicable. Print or type the full name and title of person accepting responsibility and acknowledging receipt of materials as listed on this waste shipment record for transport. Enter date of receipt and signature.
11. Transporter 2: See above.

NOTE: The transporter must retain a copy of this form.

Disposal Site Section (Items 12 & 13):

12. The authorized representative of the WDS must note in this space any discrepancy between waste described on this manifest and waste actually received, as well as any improperly enclosed or contained waste. Any rejected materials should be listed and destination of those materials provided. A site that converts asbestos-containing waste material to non-asbestos material is considered a WDS.
13. The signature (by hand) of the authorized WDS agent indicates acceptance and agreement with statements on this manifest except as noted in Item 12. The date is the date of signature and receipt of shipment.

NOTE: The WDS must retain a completed copy of this form. The WDS must also send a completed copy to the operator listed in Item 2.

ASBESTOS WASTE SHIPMENT RECORD (WSR):

WASTE GENERATOR	1. Work Site Name and Mailing Address		Owner's Name	Owner's Telephone #	
	2. Operator's Name and Address			Operator's Telephone #	
	3. Waste Disposal Site (WDS) Name, Mailing Address, and Physical Site Location Kootenai County Fighting Creek Landfill 22089 S. Highway 95; Coeur d'Alene, ID 83814			WDS Telephone # (208) 446-1450	
	4. Name, and Address of Responsible Agency (see instructions) Asbestos NESHAP Coordinator; US EPA, Region 10 1200 Sixth Avenue, Suite 155; Seattle, WA 98101				
	5. Description of Asbestos-Containing Waste Materials		6. Containers		7. Total Estimated Volume (m ³ or yd ³)
			No.	Type	
8. Special Handling Instructions and Additional Information					
9. OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name, and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.					
Printed Name & Title		Signature		Date	
TRANSPORTER	10. Transporter 1 (Acknowledgment of receipt of materials)				
	Printed Name, Title, Address, and Telephone #		Signature		Date
DISPOSAL SITE	11. Transporter 2 (Acknowledgment of receipt of materials)				
	Printed Name, Title, Address, and Telephone #		Signature		Date
12. Discrepancy Notes					
GPS Northing:		GPS Easting:		Elevation:	
13. WASTE DISPOSAL SITE OWNER / OPERATOR CERTIFICATION: I certify the receipt of asbestos materials covered by this manifest, except as noted in Item 12.					
Printed Name & Title		Signature		Date	