

MANCHESTER LANDFILL SPECIAL WASTE DISPOSAL MANIFEST

Non-Hazardous Waste Material (Special Waste, Contaminated Soil, Non-Friable Asbestos, Lead Abatement)

GENERATOR - ORIGIN INFORMATION

Section I. Special Waste Site Code: _____ Material Code: _____

Section II. Generator/Location: _____
Site Address: _____ Phone: (_____) _____
City: _____ State: _____ Zip: _____

Section III. WASTE DESCRIPTION	CONTAINERS		QUANTITY	UNIT <i>check box</i>
	NO.	TYPE		<input type="checkbox"/> Tons
				<input type="checkbox"/> Gallons
				<input type="checkbox"/> Yards

Section IV. SPECIAL HANDLING INSTRUCTIONS: Please check all that apply or none
None Material Contained within Liner Sealed in Fiber Drums
Poly-Bagged Excavation Required Forklift Required
OTHER: _____

Section V. GENERATOR CERTIFICATION

I hereby certify that the waste material being delivered does not contain free liquid as defined by 40 CFR Part 260.10 (soils) or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

_____/_____/_____
Print/Type Name & Title Shipment Date Signature

TRANSPORTER INFORMATION

Section VI. Name of Company: _____ Phone: (_____) _____
Address: _____
Driver: _____ Landfill Truck Permit #: _____
Receipt of Material (Driver's Signature): _____
Date Load Originated: _____/_____/_____

DESTINATION - Town of Manchester Sanitary Landfill CT DEEP Permit # 077-2-E-0

Section VII. Landfill Site: Town of Manchester Sanitary Landfill Date Received: _____/_____/_____
Address: 311 Olcott Street, P.O. Box 191
City: Manchester State: CT Zip Code: 06045-0191
Signature of Scale Operator*: _____ Print: _____

* This certifies the waste was disposed of at the site shown above.

Section VIII. Notes: _____

Manchester Landfill Ticket # _____