REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

GENERATOR SECTION

I. Facility Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Owner's Name: _____
Telephone: ( ) _____ Fax: ( ) _____

II. Operator's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: ( ) _____ Fax: ( ) _____

III. Waste Disposal Site (WDS) Name: _____

"On-Site" Disposal ☐ Yes ☐ No

Physical Location:

Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: ( ) _____ Fax: ( ) _____

Mailing Address:
City: _____ State: _____ Zip Code: _____
Telephone: ( ) _____ Fax: ( ) _____

IV. Responsible Agency (The Local, District, State, or EPA Office with jurisdiction over the county, where the **WDS** address is located) see **contacts** at http://epa.ohio.gov/dapc/atu/asbestos for assistance

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____

V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	

VIII. Special Handling Instructions and Additional Information

IX. Generator'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.

_____ _____ _____
Signature Date Type or Print Name and Title

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TRANSPORTER SECTION

X. **Transporter 1** (Acknowledgement of receipt of materials)

Name:_____

Address:_____

City:_____ State:_____ Zip Code: _____

Telephone: (_____) _____ Fax: (_____) _____

Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

XI. **Transporter 2** (Acknowledgement of receipt of materials)

Name:_____

Address:_____

City:_____ State:_____ Zip Code: _____

Telephone: (_____) _____ Fax: (_____) _____

Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item XII

Signature Date Type or Print Name and Title