

Duty of care: waste disposal transfer note

Ref. No.

A Description of waste

Description of waste: Quantity: (e.g. weight, number of sacks)

Containment method: bag drum skip loose other (please state)

LoW - (EWC) codes:

B Current holder of waste (Transferor)

(BLOCK CAPITALS)

Full Name:

Company Name:

Company Address:

Post Code:

Tick box(es) as appropriate

WCA WDA Importer Producer

Name of your council/authority:

I confirm I have fulfilled my duty to apply the waste hierarchy: (sign declaration here) SIC Code:

Holder of a waste disposal or waste management licence

Licence No. Issued by

Holder of a pollution prevention and control permit

Permit No. Issued by

Exemption from waste disposal/waste management licence (Details including number)

Registered Waste Carrier

Reg. No. Issued by

Exempt from registration (Details)

C Collector/receiver of waste (Transferee)

(BLOCK CAPITALS)

Full Name:

Company Name:

Company Address:

Post Code:

Tick box(es) as appropriate

WCA WDA Authorised for transport (give details below)

Holder of a waste disposal or waste management licence

Licence No. Issued by

Holder of a pollution prevention and control permit

Permit No. Issued by

Exemption from waste disposal/waste management licence (Details including number)

Registered Waste Carrier

Reg. No. Issued by

Exempt from registration (Details)

D Transfer details

For multiple loads or regular pickup state date/time range

Address of place transfer:

Date(s) of transfer: Time of transfer:

Current holder of waste (Transferor)

(BLOCK CAPITALS)

Full name:

Signature:

On behalf of:

Collector/receiver of waste (Transferee)

(BLOCK CAPITALS)

Full name:

Signature:

On behalf of:

E Broker details (if applicable)

Broker Registration Number:

Full name:

Company name & address:

Post Code: