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SCHEDULE 4

Regulation 23(1)

FORM OF CONSIGNMENT NOTE **Hazardous Waste Regulations (Northern Ireland) 2005**

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No. of prenotice (if different) _____ Consignment Note No. _____
Sheet _____ of _____

A. CONSIGNMENT DETAILS

PLEASE TICK IF YOU ARE
A TRANSFER STATION

- 1. The waste described below is to be removed from _____ (name, address and postcode)
- 2. The waste will be taken to _____ (address and postcode)
- 3. The consignment(s) will be: one single a succession carrier's round other
- 4. Expected removal date of first consignment: _____ last consignment: _____
- 5. Name: _____ On behalf of _____ (company)
Signature _____ Date _____
- 6. Telephone: _____
- 7. If different from 1, the waste producer was _____ (name, address and postcode)

B. DESCRIPTION OF THE WASTE

No. of additional sheets) _____

- 1. The process giving rise to waste is:
- 2. SIC for the process giving rise to the waste:

WASTE DETAILS (where more than one waste type is collected all of the information given below must be completed for each EWC identified).

The waste is:

List of Wastes (EWC) Code (6 digits)	Quantity (kg/lts/tonnes)	The chemical/biological components of the waste and their concentrations are	Physical (gas, liquid, solid, powder)	Hazard code(s)	Container type, no & size
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Component	Concentration (% or mg/kg)
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C. CARRIER'S CERTIFICATE if more than one carrier is used attach Schedule for subsequent carriers. If carrier schedule is attached tick box

I certify that I today collected the consignment and that the details in A1, A2 and B1 above are correct and I have been advised of any specific handling requirements. The quantity collected in the load is:

Name _____ On behalf of _____ (company)
(name address and post code) Telephone No. _____

Signature _____ Date _____ at _____ hrs.

- 1. Carrier registration No./reason for exemption
- 2. Vehicle registration No. (or mode of transport, if not road)

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D. CONSIGNOR'S CERTIFICATE

I certify that the information in B and C above are correct, that the carrier is registered or exempt and was advised of the appropriate precautionary measures. All of the waste is packaged and labelled correctly and the carrier has been advised of any special handling requirements.

Name _____ On behalf of _____ (company)

(name address and post code) Telephone No: _____

Signature _____ Date _____ at _____ hrs.

E. CONSIGNEE'S CERTIFICATE where more than one waste type is collected all of the information given below must be completed for each EWC

Individual EWC code(s) received	Quantity of each EWC code received (kg)	Waste Management operation (R or D code)

1. I received this waste at the address given in A2 on at hrs.

2. Vehicle registration no. _____

I certify that waste management licence/permit/authorised exemption No. authorises the management of the waste described in B at the address given in A2.

Name _____ On behalf of _____ (company)

(name address and post code) Telephone No: _____

Signature _____ Date _____ at _____ hrs.

* The European Waste Catalogue (EWC) sets out a list of wastes pursuant to Article 1(c) of the Waste Directive and Article 1(4) of the Hazardous Waste Directive and is set out in Commission Decision 2000/532/EC (O.J. No. L194, 25.7.1975, p. 39), as amended.