

duty of care record

waste transfer

Client NameTEMPLE4.....



Doc. No.

Invoice No.

Whitkirk Waste Solutions Limited

Longbridge House Farm, Stillington Road, Easingwold, York YO61 3ET

Tel: 01347 825636 / 825637 Fax: 01347 823662 Emergency Call Out: 07966 568515 E-mail: admin@whitkirkwaste.co.uk

SECTION A: CURRENT HOLDER OR PRODUCER OF WASTE

I confirm that I have fulfilled my duty to apply the waste hierarchy as required by Regulation 12 of the Waste (England and Wales) Regulations 2011.

- FULL NAME OF COMPANYJO BLOGGS LTD.....
- ADDRESS OF COMPANY ...123 MAIN STREET, YORK, YO26 9UJ..... S.I.C. Code - .
- TIMES ON SITE09.15..... TIMES OFF SITE09.30.....
- I CERTIFY THAT THE WASTE DESCRIBED BELOW WAS COLLECTED ON
DATE30.08.17..... SIGNATURE NAME
- AS: PRODUCER OF WASTE D HOLDER OF WASTE DISPOSAL LICENCE D OTHER D

SECTION B: DESCRIPTION OF WASTE

- GENERAL DESCRIPTION OF WASTEWASTE PASTE..... EWC -
- APPROX. QUANTITY OF WASTE5 PALLETS.....
- HOW IS IT CONTAINED? IBC's TANKER SKIP DRUM OTHER (state)PALLET.....

SECTION C: PERSON COLLECTING WASTE

- VEHICLE REG. No.W1 WWS..... TANKER No. TRAILER No.
- DATE .30.08.17..... NAMEMICKEY MOUSE..... SIGNED

ON BEHALF OF: WHITKIRK WASTE SOLUTIONS LTD, LONGBRIDGE HOUSE FARM, STILLINGTON ROAD, EASINGWOLD YORK YO61 3ET

REGISTERED WASTE CARRIER No. **CB / KM3385NJ**

ISSUED BY THE EA NORTH EAST REGION

SECTION D: DISPOSAL TRANSFER CERTIFICATE

- Address of transfer pointTEMPLE4 LTD, UNIT 19 BURITON BUSINESS PARK, PETERSFIELD, HANTS, GU32 3NJ.....
- Date(s) of transfer30.08.17.....
- Time on site13.15.....
- Times off site13.45.....
- Signed 6. Signed

Full Name

Full Name

(BLOCK CAPITALS)

Representing: **(The Carrier):** WHITKIRK WASTE SOLUTIONS LIMITED

Representing: Final Disposing Point.

Waste Disposal Licence No.

WHITE - Invoice

GREEN - Collection Point

PINK - Disposal Point

BLUE - Office