

## **Puget Sound Clean Air Agency**

1904 3rd Ave Ste 105, Seattle, WA 98101-3317 phone 206-689-4058 /1-800-552-3565 ext. 4058

## **Asbestos Waste Material Shipment Record**

## **Removal Site Information**

Work site name (if applicable) and physical address:				
Owner's name and telephone number (include area code):				
Owner's mailing address:				
Asbestos Waste Removal Information from Demolition or Renovation – Contractor Info				
Company name performing the asbestos removal:				
Company address:				
Authorized Company Operator/Agent, name and phone number:				
Waste Disposal Site (WDS) Information				
Name of Owner or Operator of WDS and Owner or Operators' telephone number (include area code)				
WDS facility name and facility telephone number (include area code)				
WDS physical address				
WDS mailing address				
On-site Check this box <i>only</i> if waste will be disposed of on the owners property				
Responsible Agency: Puget Sound Clean Air Agency – contact information at top of this form				
Materials	Containers Total		Total	
Description of Materials	Number	Туре	Cubic Yards	
Non-friable				
Friable asbestos materials:				

Non-friable

Friable asbestos materials:

Boiler\Furnace insulation
Duct insulation
Pipe insulation
Fireproofing
Paints
Plaster
Texture Coatings
Cement Board
Cement Pipe
Friable Flooring
Friable Roofing Material
Other:

## Asbestos Waste Material Shipment Record - continued

Renovation and/or Demolition Project						
Friable asbestos material	Total Cubic Yards	Total Cubic Yards				
Non-friable asbestos material	Total Cubic Yards					
Special Handling instructions and additional inform	ation:					
Owner/Operator's Certification:						
I hereby declare that the contents of this consignment a name and are classified, packed, marked, and labeled, highway according to applicable international and gove	and are in all respects in prope					
Printed/typed name & title	Signature	Month	Day	Year		
Owner/Operator must retain a copy of this form						
Transporter 1 Acknowledgment of receipt of materia	als					
Printed/typed name & title	Signature	Month	Day	Year		
Transporter must retain a copy of this form		Dat	te of receip	ot .		
Transporter addre	ess and telephone number					
Transporter 2 Acknowledgment of receipt of materia	ıls					
Printed/typed name & title	Signature	Month	Day	Year		
Transporter must retain a copy of this form		Dat	te of receip	ot .		
Transporter addre	ess and telephone number					
WDS						
Discrepancy indication space:						
Contidential of Descint of schools materials source	l hu this manifest susant so not		Diagram			
Certification of Receipt of asbestos materials covered	r by this mannest except as not	ed above under	Discrepa	япсу		
Printed/typed name & title	Signature	Month	Day	Year		
		Dat	te of receip	pt		
WDS must retain a copy of this form and send a completed	l copy to the Owner/Operator					