

DUTY OF CARE: CONTROLLED WASTE TRANSFER NOTE

Section A – Description of Waste

1. Please describe the waste being transferred:
2. How is the waste contained? Loose Sacks Skip Drum Other:
3. What is the quantity of waste? (Number of sacks, weight etc):

Section B – Current holder of the waste (Transferor)

1. Full name and address: (BLOCK CAPITALS):
2. Name and address of company (If applicable):
3. Which of the following are you? (Please one or more boxes)
- Producer of the waste Holder of waste disposal or waste management licence
- Licence number: Issued by:
- Importer of the waste Exempt from requirement to have a waste disposal or waste management licence
- Give Reason:
- Waste collection authority Registered waste carrier
- Registration number: Issued by:

Section C – Person collecting the waste (Transferee)

1. Full name: (BLOCK CAPITALS):
2. Name and address of company:
3. Which of the following are you? (Please one or more boxes)
- Authorised for transport purposes Specify which of those purposes:
- Waste collection authority
- Holder of waste disposal or waste management licence Licence number: Issued by:
- Registered waste carrier Registration number: Issued by:
- Importer of the waste Exempt from requirement to have a waste disposal or waste management licence
- Give Reason:

Section D

1. Address of place of transfer/collection point:
2. Date of transfer: 3. Time(s) of transfer (for multiple consignments, give 'between' dates):
3. Name and address of broker who arranged this waste transfer (if applicable):
4. **Transferor Signature:** **Transferee Signature**
- Full name (BLOCK CAPITALS): Full name (BLOCK CAPITALS):
- Representing Representing: