

WASTE TRANSFER NOTE

Customer (Transferor)

Customer:

Contact name (if different):

Collection address:

Collection date:

.....
Customer signature

.....
Print Name (if different to Customer Name above)

Collection Size / Value

Job description:

Load weight / volume:

Containment method: loose / tipper

EWC Codes

Waste type	EWC code	Volume (yards ³ or units)	Weight (kg)
Mixed general	20 03 01		
Mixed construction (trade)	17 09 04		
Inert & hardcore (trade)	17 01 07		
Wood (trade)	17 02 01		
Packaging (trade)	15 01 01		

Waste type	EWC code	Volume (yards ³ or units)	Weight (kg)
Non-hazardous WEEE	20 01 36		
Fridge/freezer/aircon (CFC)	20 02 01		
CRT (TV/computer monitor)	20 01 35		
Fluorescent tube	20 01 21		
Other			

Waste Carrier (Transferee)

Waste carrier:

License reg. number:

Issued by: E A National

Address:

Tel:

Email:

Employee signature:

Employee name:

Vehicle reg. number:

Arr. time:

Dep. time: