"ENSURING ACCURACY IN MANIFESTS"

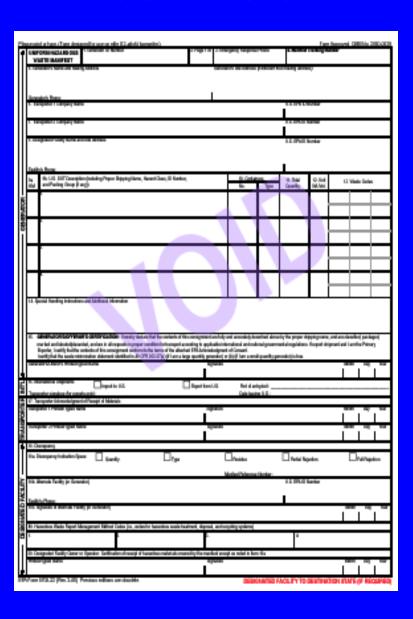
Hazardous Waste Handler Seminar
New Jersey State Police Building, Robbinsville, NJ
Prepared by: Bret Reburn
Principal Environmental Specialist
Bureau of Hazardous Waste Compliance & Enforcement
Central Regional Office - Trenton, NJ

AS OF SEPTEMBER 5, 2006

- New Manifest Form (#8700-22)
- New Continuation Form (#8700-22A)
- State Agencies NO LONGER provide manifest document
- For instructions, examples, registry, state requirements & method codes open:

http://www.epa.gov/epaoswer/hazwaste/gener/manifest/

Hazardous Waste Manifest



Ensuring Accuracy

- Generators are responsible for accuracy
- Even if Offeror completes it for you
- Proofread for accuracy
- Compare to previous manifests
- Questions, call your Offeror

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Ple		r type. (Form design	ned for use on elit 1. Generator ID Nu	e (12-pitch) typew mber	riter.)	2. Page 1 of	3. Eme	rgency Response	Phone	4. Manifest		Approved. Imber	OMB No.	2050-003
Ш	WAST	TE MANIFEST	na Láticas				Canarat	ada Cita I didenan	Uf of Massack II	an mail on addra	201			
		ator's Name and Maili				ı	General	ors Site Address	(ii camerenii ti	nan mailing addre	88)			
Ш	6. Transpo	r's Phone: orter 1 Company Nan	ne							U.S. EPAID	Number			
Ш	7. Transpo	orter 2 Company Nan	ne							U.S. EPA ID I	Number			
	8. Design	ated Facility Name a	nd Site Address							U.S. EPA ID I	Number			
Ш	Facility's F	Phone:								ı				
Ш	9a. 9 HM a	b. U.S. DOT Descript and Packing Group (if	ion (including Proper any))	Shipping Name, Haz	ard Class, ID Number,			10. Contai No.	ners Type	11. Total Quantity	12. Unit WLAVI.	13.1	Waste Code	8
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GENERATOR	2						4					-		
18														
Ш	3.													
Ш	4.						$\overline{}$					-		
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		al Handling Instruction												
	mark Expo	ked and labelediplaca orter, I certify that the tify that the waste mir	arded, and are in all re contents of this consi nimization statement i	epects in proper cor gnment conform to ti	that the contents of this dition for transport acc he terms of the attache 252:27(a) (if I am a lar	cording to appli ed EPA Acknow ge quantity gen	cable inte ledgment erator) or	mational and nati of Consent.	onal governr	nental regulations	ipping name . If export shi	pment and I a	am the Prim	aged, ary
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Ĭ	18b. Alten	nate Facility (or Gene	rator)							U.S. EPA ID I	Number			
ED FACILI	Facility's F	Phone: ature of Alternate Fac	lify (or Generator)									Mai	nth Dav	Year
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DESI	19. Hazari	dous Waste Report N	farnagement Method (Codes (i.e., codes for 2.	hazardous waste free	atment, disposa 3.	l, and rec	ycling systems)		4.				
П	20. Design	nated Facility Owner	or Operator: Certificat	ion of receipt of haza	ardous materials cover	red by the mani	fest excer	of as noted in Item	n 18a					
Ш		ped Name					nature					Mor	nth Day	Year
EP.	A Form 870	00-22 (Rev. 3-05)	Previous editions a	are obsolete.				DESIG	SNATED F	ACILITY TO	DESTINA	TION STAT	TE (IF RE	QUIRED

- ITEM 1 Generator EPA ID
- ITEM 2 Page ___ of ___
- ITEM 3 Emergency Response #
 - Generator, Agency or Organization
 - Must be knowledgeable
 - 24 hours/day
- ITEM 4 Manifest Tracking #
 - Unique
 - Preprinted

Ï		rint or type. (Form designed for use on elite (12-pitch) typewriter.) FORM HAZARDOUS 1. Generator ID Number	2. Page 1 of 3. Em	ergency Response	Phone	4. Manifest	Tracking N	umber	OMB No.	
ΙT		WASTE MANIFEST	1 1							
П	5. Ge	enerator's Name and Mailing Address	Gener	ator's Site Address	(if different th	an mailing addres	8)			
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П	ı									
П	Gene	erator's Phone:								
П	6. IR	ansporter 1 Company Name				U.S. EPAID N	lumber			
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П		anagrania at the space of the state				I	umbun			
П	8. De	esignated Facility Name and Site Address				U.S. EPA ID N	lumber			
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П	Fadi	ity's Phone:								
П	9a.	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number	r,	10. Contair		11. Total	12. Unit	13.	Waste Code	96
П	нм	and Packing Group (if anyl)		No.	Type	Quantity	Wt.Mal.			
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	14. S	Special Handling Instructions and Additional Information								
	15.	GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of the	nis consignment are fully	and accurately de-	scribed above	e by the proper shi	pping name	, and are cla	ssified, pack	aged,
	15.	GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of the marked and labeled/placearded, and are in all respects in proper condition for transport as Exporter. Leaffly that the contents of this consumer conform to the terms of the state.	coording to applicable in hed EPA Acknowledome	ternational and nati nt of Consent.	onal governm	nental regulations.	pping name If export sh	ı, and are cla ipment and l	ssified, pack am the Prim	aged, ary
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• ITEM 5 - Generator's:

- Mailing Address

Where manifest to be sent

- Telephone Number

Normal business or authorized agent

- Site Address

Where shipment originates

Only if different than mailing address

6&7

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Ш	5. G	enerator's Name and Mailing A	Address				Generato	r's Site Address	(if different th	an mailing addres	8)			
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Ш	9a.	9b. U.S. DOT Description (Shipping Name, Hazard C	tass, ID Number,			10. Contair	ners	11. Total	12. Unit	42 10-	ste Codes	
Ш	нм	and Packing Group (if any)))					No.	Туре	Quantity	WLAVII.	13. Wa	ste Codes	
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Ш	l	Exporter, I certify that the con I certify that the waste minimiz	tents of this consi	griment conform to the ter	ms of the attache	ed EPA Acknowle	edgment d	of Consent.						,
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l -	18.0	Discrepancy												_
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Ŀ	18b.	Alternate Facility (or Generato	r)				Mai	nifest Reference	Number:	U.S. EPAID N	umber			
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腔	Faci	ity's Phone: Signature of Alternate Facility	for Congrator)									Month	Day	Voor
뷯	100.	arginature of Atlanta Packing	(or Galesaur)									I	1	I
DESIGNATED FACILITY	1 9. I	łazardous Waste Report Mana	gement Method (codes (i.e., codes for haza	ardous waste free	iment, disposal,	and recy	cling systems)						
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h	20. 5	Designated Facility Owner or O	narator Cartifical	ion of receipt of herovdo-	e meteriale on m	ad by the monit	act aware	as nated in Hon	190					
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• ITEM 6 - Transporter 1:

- Company Name
- EPA Identification Number
- No vehicle or driver information allowed
- ITEM 7 Transporter 2:
 - Company Name
 - EPA Identification Number
 - No vehicle or driver information allowed
- Transporter 3 Use Continuation Sheet

Ple	898	e print or type. (Form designed for use on elite (12-pitch) typewriter.)						n Approved. C	OMB No. 2	2050-0039
lt	Ľ	WASTE MANIFEST		rgency Response		4. Manifest		umber		
Ш	5	. Generator's Name and Mailing Address	Genera	or's Site Address	if different the	an mailing addres	18)			
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$\ $	ľ	i. Designated Facility Name and Site Address				U.S. EPA ID N	lumber			
Ш	F	adility's Phone:								
Ш	9 H	ia. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Contain No.	Type	11. Total Quantity	12. Unit WLAG	13. W	aste Codes	:
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Ш	1/	4. Special Handling Instructions and Additional Information								
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Ш	15	 GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consig 	gnment are fully :	and accurately dee	cribed above	by the proper shi	pping name	, and are class	ified, packa	ged,
Ш	l	marked and labelediplacarded, and are in all respects in proper condition for transport according Exporter, I certify that the contents of this consignment conform to the terms of the stacked EPA.	Acknowledgmen	of Consent.			if export sh	ipment and I ar	n the Prima	ry
Ш	G	I certify that the waste minimization statement identified in 40 CFR 252.27(a) (if I am a large quan generator's/Offeror's Printed/Typed Name	Signature	(b) (ii rama sina	i quariny ger	eratory is title.		Month	n Day	Year
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DESIGNATED FACILITY	14	8c. Signature of Alfemate Facility (or Generator)						Mon	h Day	Year
ESIG	19	Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste freatment, 12.	disposal, and rec	ycling systems)		4.				
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Ш		Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the finited Typed Name	ne manifest exce Signature	pt as noted in Item	18a			Mont	h Day	Year
H	A F	form 8700-22 (Rev. 3-05) Previous editions are obsolete.								
-17	11	Similar de La prior de des principales de la constante de la c		DESIG	MATED F	ACILITY TO D	JESTINA	HON STAT	E IIIF RE	wuiked)

• ITEM 8 - TSDF Information

- Company Name
- Site Address
- Telephone Number
- EPA ID Number

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039 1. Generator ID Number Page 1 of 3. Emergency Response Phone UNIFORM HAZARDOUS WASTE MANIFEST Generator's Name and Mailing Address Generator's Site Address (if different than mailing address) Generator's Phone: 6. Transporter 1 Company Name U.S. EPA ID Number . Transporter 2 Company Name ILS EPAID Number Designated Facility Name and Site Addre U.S. EPA ID Number 9b. U.S. DOT Description (including a, Hazard Class, ID Number, 10. Containers 11. Total 12. Unit 13. Waste Codes and Packing Group (if any)) No. Quantity WL/Vol Special Handling Instructions and Additional Information GENERATOR'S/OFFEROR'S CERTIFICATION: Thereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.

Leatify that the waste minimization statement identified in 40 CFR 252.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Offeror's Printed/Typed Name 16. International Shipments Port of entry/exit: Import to U.S. Export from U.S. Transporter signature (for exports only): Date leaving U.S. 17. Transporter Adknowledgment of Receipt of Materials ransporter 1 Printed/Typed Name Transporter 2 Printed/Typed Name 18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Rejection Manifest Reference Number: U.S. EPA ID Number 18b. Alternate Facility (or Generator) Facility's Phone: 18c. Signature of Alternate Facility (or Generator) 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste freatment, disposal, and recycling systems) 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

9a

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

- ITEM 9a Hazardous Materials
 - Place "X" if waste is Hazardous Material
- ITEM 9b USDOT Description
 - USDOT Proper Shipping Name
 - Hazard Class or Division
 - Identification Number (UN/NA)
 - Packing Group
 - Technical Name(s) If applicable
 - Reportable Quantities If applicable

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Ш	8.	Designated Facility Name an	d Site Address						U.S. EPA ID N	Number			
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Ш	ı	marked and labeled/placa Exporter, I certify that the	ided, and are in all r contents of this cons	espects in proper conditio ignment conform to the te	n for transport acc rms of the attache	ording to applicable of EPA Acknowledor	international and nat nent of Consent.	ional governn	nental regulations.	if export sit	ipment and I ar	n the Prima	ry
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lë E	F8	icility's Phone: c. Signature of Alternate Faci	ity (or Generator)								Mont	h Day	Year
DESIGNATED FACILITY		_									1	1	
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• ITEM 10 - Containers

- Number
- Types
 - Use required abbreviations
 - Table 1 of instructions has abbreviations

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1	ŀ	JNIFORM HAZARDOUS WASTE MANIFEST	Generator ID No.					ncy Response		4. Manifest	Tracking N	umber		
П	5	. Generator's Name and Mail	ng Address			-	Generator's	Site Address	(if different th	an mailing addre	38)			
$\ $	e	Senerator's Phone:				ı								
$\ $	6	Transporter 1 Company Nar	ne							11	Number			
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DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

ITEM 11 - Total Quantity

- Round to nearest whole unit
- No decimals or fractions
- Use <u>actual</u> measurements for quantities
- Container capacities not acceptable
- Estimates allowed (if accurate)

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DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

ITEM 12 - Units of Measure

- Weight/Volume
- Use appropriate abbreviations
- Table II of instructions has abbreviations
- ITEM 13 Waste Codes
 - Enter up to 6 Federal Waste Codes (D001, F005, P030 etc.)
 - Non-redundant state codes entered here

Ple	ase pri	int or type. (Form desig	ned for use on el	ite (12-pitch) typewr	iter.)						Form	Approved.	OMB No.	2050-003
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	5. Ge	nerator's Name and Mailin	g Address				Generate	or's Site Address	(if different th	an mailing addres	36)			
	Cone	rator's Phone:				ı								
	6. Tra	ansporter 1 Company Nam	е							U.S. EPAID N	Number			
	7. Tra	neporter 2 Company Nam	е							U.S. EPAID N	lumber			
	8. De	signated Facility Name an	d Site Address							U.S. EPA ID N	lumber			
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• ITEM 14 - Special Handling Instructions

- Waste profile
- Container codes
- Bar codes
- Response Guide Numbers
- ITEM 14 Additional Information
 - Chemical names
 - Chemical percentages
 - Physical state

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Ш	ľ	marked and labeled/placar	ided, and are in all res	pects in proper condition	for transport acco	rding to applica	able inter	national and nati	onal governm	ental regulations.	if export sh	ipment and I a	m the Prim	ary
Ш	L	Exporter, I certify that the of I certify that the waste mini	imization statement id	entified in 40 CFR 262.27	(a) (if I am a large	quantity gene	rator) or	biConseni. (b) (if Iam a sma	Il quantity ge	nerator) is true.				
Ш	Ge	nerator's/Offeror's Printed/Typ	ped Name			Sign	ature					Mon	h Day	Year
뱓	16	International Shipments												
Ė	:1	ansporter signature (for expo	Impart to i	U.S.		Export from U	.S.	Port of ent Date leavi						
Œ		. Transporter Adknowledgmen	t of Receipt of Material	ls .				Edit fatt	4 0.0					
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Z		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				l I						- 1	1	1 1
Ť		Discrepancy												
П	18	a. Discrepancy Indication Spa	ace Quantity	y	Туре			Residue		Partial Rej	ection		Full Rejo	ection
Ш	ı													
Ŀ	18	b. Alternate Facility (or Gener	ator)				Ma	nifest Reference	Number.	U.S. EPA ID N	lumber			
믕														
Ę	Fa	cility's Phone: c. Signature of Alternate Facil	By for Compreher)									Mor	ith Day	Year
GNATED FACILITY	100	c. algitatule di Atlettiale Facili	ny (or Garenaur)									1	III Day	I real
S	19	. Hazardous Waste Report Ma	anagement Method Co	odes (i.e., codes for haza	rdous waste freatr	nent, disposal,	and recy	cling systems)						_
Š	1.	,		2.		3.				4.				
h	L													
П		Designated Facility Owner on Inted*Typed Name	r Operator: Certificatio	on of receipt of hazardous	materials covered		est excep ature	t as noted in Item	118a			Mor	th Day	Year
ΙĮ	Γ	.,,				I .						ı		1
F	A Fo	rm 8700-22 (Rev. 3-05) F	revious editions ar	e obsolete.				DESIG	NATED E	ACILITY TO I	DESTINA	TION STAT	E /IE DE	OLIBED

ITEM 14 - Additional Information

- Alternate Facility Information
- Manifest Tracking # of Original Manifest
 Rejected loads
 - Rejected residues
 - PCB waste descriptions
 - PCB Out-of-Service Dates
 - Generators <u>not</u> required to enter state required information here

Ple	9896	print or type. (Form desig	ned for use on elite (12	-pitch) typewriter.)						Form	Approved. O	MB No. 2	050-0039
Ī	_	JNIFORM HAZARDOUS WASTE MANIFEST	Generator ID Number	,,,,,,	2. Page 1 of	3. Emerg	ency Response	Phone	4. Manifest				
Ш	5	. Generator's Name and Mailir	ng Address			Generator	's Site Address	if different the	an mailing addres	18)			
Ш	l												
Ш	6	Senerator's Phone: i. Transporter 1 Company Nam	16						U.S. EPAID N	lumber			
Ш	1	. Transporter 2 Company Nam	ne .						U.S. EPA ID N	lumber			
Ш	ı												
$\ $	ľ	. Designated Facility Name an	od Site Address						U.S. EPA ID N	lumber			
Ш	F	adity's Phone:											
Ш	9 H	 a. 9b. U.S. DOT Description and Packing Group (if a 		ng Name, Hazard Class, ID Numbe	sr,		10. Contair No.	Type	11. Total Quantity	12. Unit WLAG	13. Wa	ste Codes	
GENERATOR -	Š	1.									-+	\dashv	
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$\ $	r	3.				d							
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Ш	1	Special Handling Instruction	ns and Additional Informatio	n									
	L												
V	15	marked and labeled/placa Exporter, I certify that the	rded, and are in all respects contents of this consignmen	ereby declare that the contents of the s in proper condition for transport a nt conform to the terms of the attact	ccording to applic hed EPA Acknowl	able intern ledgment o	ational and nati f Consent.	nal governm	ental regulations.				
41	G	I certify that the waste min enerator's/Offeror's Printed/Ty		ed in 40 CFR 262:27(a) (if I am a la	arge quantity gene Sign	nature	oy (it i am a sma	i quantity ger	nerator) is true.		Month	Day	Year
ľ	1 10	6. International Shipments	Import to U.S.	Г	Export from L	15	Port of en	nulawit:					_
Ā	-	ransporter signature (for expo	rts anly):			J.a.	Date leavi						
A E	1	 Transporter Acknowledgmen ransporter 1 Printed/Typed Na 			Sign	nature					Month	Day	Year
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TR ANSPORTER	Т	ransporter 2 Printed/Typed Na	me		Sign	nature					Month	Day	Year
Īŧ	-	B. Discrepancy											
	14	Ba. Discrepancy Indication Spa	ace Quantity	Туре			Residue	Number	Partial Rej	ection		Full Rejec	tion
Ĕ	1/	Bb. Alternate Facility (or Gener	rator)			Mar	iles Reierence	Number.	U.S. EPA ID N	lumber			
FACI	F	acility's Phone:							1				
DESIGNATED FACILITY	12	Bc. Signature of Alternate Faci	lity (or Generator)								Month	Day	Year
Sign	7	9. Hazardous Waste Report M	anagement Method Codes	(i.e., codes for hazardous waste tre	eatment, disposal,	, and recyc	ding systems)						_
B	1.		2		3.				4.				
Ш			or Operator: Certification of	receipt of hazardous materials cow			as noted in Item	18a					
╙	. P	rinted/Typed Name	<u> </u>		Sign	nature					Month	Day	Year
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• ITEM15 - Generator's/Offeror's Cert.

- Waste Minimization Statement
 Must be read, signed & dated by generator
 Certifies compliance with requirements
 Certifies shipment properly prepared
 Certifies shipment ready for transportation
- Generator or Offeror may write:

 "on behalf of" in signature block
 statement indicating authority to sign

Pk	ase	print or type. (Form desig										Approved	OMB N	o. 2050-0
1	U	NIFORM HAZARDOUS WASTE MANIFEST	Generator ID Number	r		2. Page 1 of	3. Eme	rgency Response	Phone	4. Manifest	Tracking Nu	mber		
Ш	5.	Generator's Name and Mailin	ng Address				General	or's Site Address	(if different th	nan mailing addre	88)			
Ш	L													
Ш	L	enerator's Phone:				- 1								
Ш	6.	Transporter 1 Company Nam	e							U.S. EPA ID I	Number			
Ш	Ļ	Transporter 2 Company Nam								U.S. EPA ID 1	Humber			
Ш	ľ	mansponer 2 company warn	ь							I U.S. EPAID I	vumbei			
Ш	8.	Designated Facility Name an	d Site Address							U.S. EPA ID I	Number			
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Ш	F	adity's Phone:								1				
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Ш	н	and Packing Group (if a	arry()					No.	Туре	Quantity	Wt.Nal.		- Table 6	
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Ш	14	Special Handling Instruction	s and Additional Informat	ion										
Ш	L													
Ш	L													
Ш	15	GENERATOR'S/OFFERO	R'S CERTIFICATION: 1	hereby declare that the	contents of this	consignment :	are fully a	nd accurately de	scribed above	e by the proper sh	ipping name	, and are cla	ssified, p	ackaged,
ı	L	marked and labeled/placar Exporter, I certify that the o	rded, and are in all respe	cts in proper condition R	or transport acco	ording to applic	able inte	mational and nati	onal governn	nental regulations	If export shi	pment and I	am the P	rimary
ı	L	I certify that the waste mini enerator's/Offeror's Printed/Typ	imization statement ident	ified in 40 CFR 262:27()	a) (if I am a larg	e quantity gen	erator) or nature	(b) (if Iam a sma	il quantity ge	nerator) is true.		Мо	nth E	lay Yes
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	16	i. International Shipments	Import to U.S	S.		Export from I	J.S.	Port of en	try/exit:					
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+		Discrepancy												
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ž	18	b. Alternate Facility (or General	ator)				M	anifest Reference	Number:	U.S. EPA ID N	Number			
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13 C:	F8	cility's Phone: c. Signature of Alternate Facil	ity (or Generator)									Mo	orth	Day Ye
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DESIGNATED FACILITY	19	. Hazardous Waste Report Ma		es (i.e., codes for hazaro	fous waste freat	ment, disposal	, and rec	ycling systems)				•	•	•
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Ш		. Designated Facility Owner o	r Operator: Certification of	of receipt of hazardous	materials covere			ot as noted in Item	n 18a					
Ш		inted/Typed Name					nature					Mo	rith [lay Yes
۰	Ļ	orm 8700-22 (Rev. 3-05) F	revious editions are	obsolete.				DECK	NATES 5	ACILITY TO	DECTIVE	TION OT	TE AF	DEOLUG
ΕP	A H													

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

• ITEM 16 - International Shipments

- Primary exporter must:
 - Check export box
 - Enter point of exit from U.S.
- Importer must:
 - Check import box
 - Enter point of entry into U.S.
- Transporters of exports must sign/date

Ple	ease pri	int or type. (Form desig	ned for use on el	ine (12-pitch) typewriter.)							Approved	OMB	No. 20	50-00
Ī		FORM HAZARDOUS WASTE MANIFEST	Generator ID No.	umber	2	Page 1 of	3. Emer	gency Respons	e Phone	4. Manifest	Tracking Nu	mber			
Ш		enerator's Name and Maili	ng Address				Generato	or's Site Address	(if different th	nan mailing addres	88)				
Ш															
Ш	Gene	erator's Phone:				- 1									
П	6. Tra	ansporter 1 Company Nam	10			-				U.S. EPA ID 1	Number				
П	7. Tra	ansporter 2 Company Nam	1e							U.S. EPA ID N	lumber				
П	1														
П	8. De	esignated Facility Name ar	nd Site Address							U.S. EPA ID N	Number				
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П	Fadil	ity's Phone:													
П	9a. HM	9b. U.S. DOT Descripti and Packing Group (if:	ion (including Proper any))	r Shipping Name, Hazard Cl	lass, ID Number,		ŀ	10. Conta No.	Type	11. Total Quantity	12. Unit WLAXI	13.	Waste	Codes	
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П	1														
Ш	1														
Ш	15.	GENERATOR'S/OFFERO	R'S CERTIFICATIO	ON: I hereby declare that th	e contents of this co	onsignment a	on Bulby or	nd accurately de	escribed above	e by the proper sh	ipping name	, and are cla	ssified,	packag	ed.
Ш	1	marked and labeled/placa	referrigand are in all r				re runy ar								
Ш		Exporter, I certify that the	contents of this cons	signment conform to the ten	ms of the attached 6	ding to applica EPA Acknowle	able inter edgment	of Consent.			. If export shi	prison it dana i	am the	Primary	'
		Exporter, I certify that the I certify that the waste min erator's/Offeror's Printed/Ty	contents of this cons imization statement	signment conform to the ten t identified in 40 CFR 262.2	ms of the attached 6	ding to applica SPA Acknowle quantity gene	able inter edgment	of Consent.			. If export shi	Mo		Primary	Yea
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¥.	Gene 1 16. In	I certify that the waste min erator's/Offeror's Printed/Ty nternational Shipments	contents of this consimization statement ped Name	signment conform to the ten didentified in 40 CFR 252.2	mis of the attached B 7(a) (if I am a large o	ding to applica SPA Acknowle quantity gene	able inter adgment rator) or ature	of Consent. (b) (if I am a sm Port of e	all quantity ge		. If export shi			Primary	Yea
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• ITEM 17 -

Transporter Acknowledgments of Receipt

- Transporter(s) must sign and date
- Transporter(s) of imports <u>and</u> exports may need to to enter information into the "International Shipments" block

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[1	_	UNIFORM HAZARDOUS WASTE MANIFEST	Generator ID Number	,	2. Page 1 of	3. Emer	gency Response	Phone	4. Manifest	Tracking Nu	ımber				
Ш	5	5. Generator's Name and Mail	ng Address		(Generato	n's Site Address	(if different th	an mailing addres	18)					
Ш															
Ш	Generator's Phone: 6. Transporter 1 Company Name								U.S. EPAID Number						
Ш	7. Transporter 2 Company Name									U.S. EPA ID Number					
Ш	8	B. Designated Facility Name ar	nd Site Address						U.S. EPA ID N	lumber					
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DESIGNATED		19. Hazardous Waste Report M	anagement Method Codes (i.e	e., codes for hazardous waste treat	ment, disposal,	and recy	cling systems)								
100	1		2.		3.				4.						
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ΕĒ	ΆF	Form 8700-22 (Rev. 3-05)	Previous editions are obso	ilete.			DESIG	NATED F	ACILITY TO I	DESTINA	TION STAT	E (IF RE)	QUIRED		

18a

ITEM 18a - Discrepancy Indication

- TSDF note any differences
 - Quantity & Type (significant is defined)
 - Rejected wastes (full or partial)
 - Rejected container residues
- TSDF give reason for any rejection
- TSDF give reason for inability to remove
- TSDF enter other tracking number(s)
- TSDF send letter 15-days, if unresolved

_	ase print or type. (Form designed for use on elite (12-	pitch) typewriter.)				Form A	Approved. O	MB No. 2050	0-003	
t	UNIFORM HAZARDOUS 1. Generator ID Number	2. Page 1 of 3.1	Emergency Response P	hone 4	. Manifest	racking Nun	nber			
	WASTE MANIFEST 5. Generator's Name and Mailing Address	Ger	erator's Site Address (if	different than ma	ailing addres	s)				
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ı	7. Transporter 2 Company Name				S. EPAID N	umber				
	8. Designated Facility Name and Site Address		U.S. EPA ID Number							
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18b

18c

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

ITEM 18b - Alternate Facility Receipt

- For full load rejections
- Alt.Fac. name, address, phone, EPA ID #
- Generators information (if sent back)
- Not for partially rejected loads or residues

• ITEM 18c - Alternate Facility Signature

- Alternate Facility/Generator sign here

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- ITEM 19 Management Method Codes
 - TSDF enter treatment codes (each waste)

- ITEM 20 Designated Facility Signature
 - Designated individual print/sign/date
 - Sign even if rejecting

RULE HIGHLIGHTS

Generator Requirements

- Prepare manifest [262.20(a)1]
- Designate alternate facility/accept waste back if undeliverable [262.20(d)]
- Use approved manifest form [262.21(g)1]
- Determine if consignment state requires copies or regulates additional wastes [262.21(g)2]
- Complete Item 15 to certify generator status [262.27]

Generator Requirements

- Returned shipments using <u>original</u> manifest
 sign at Item 18c upon receipt [262.34 m]
- Returned shipments using <u>new</u> manifest sign at Item 20 upon receipt [262.34 m]

Transporter Requirements

- Exported waste ensure waste accompanied by manifest <u>and</u> conforms to EPA Acknowledgement of Consent [263.20(a)]
- Unable to deliver waste due to emergency other than rejection contact generator for instructions/revise manifest [263.21(b)1]
- Shipment rejected while transporter still on site comply with the applicable requirements of 40 C.F.R. 263.21(b)2

TSDF Requirements

- Upon receipt of waste owner, operator <u>or</u> <u>agent</u> must:
 - Sign and date all copies
 - Note any discrepancies
 - Give transporter copy
 - Send copy to generator within 30 days
 - Retain copies for 3 years [264.71(a)2]
- Send copy to Department within 30 days receipt of imported waste [264.71(a)3]

TSDF Requirements

- Determine if consignment state requires copies or regulates additional wastes [264.71(e)]
- Reconcile significant manifest discrepancies with generator within 15 days or inform DEP [264.72(c)]
- Rejecting waste or if container residue exceeds quantity for "empty" [264.72(d)]

TSDF Requirements

- Full or partial load rejections to be sent to an alternate facility [264.72(e)]
- Instructions for rejected wastes and residues that must be sent back to the generator [264.72(f)]
- Rejecting waste or if container residue exceeds quantity for "empty" after manifest signed, dated and returned [264.72(g)]