WASTE SHIPMENT RECORD						
ASBESTOS CONTAINING MATERIAL			24 Hour Response Telephone Number:			
	Work Site Name and Mailing Address:		Owner's Phone No.			
	2. Operator's Name and Address:		Operator's Phone No.			
	·		'			
	3. Waste Disposal Site (WDS) Name, Mailing Address, and Physical Site I			e Location: WDS Phone No.		
~	4. Name and Address of Responsible Agency:					
Ö	owa Department of Natural Resources					
GENERATOR	7900 Hickman Road, Urbandale, IA 50322					
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Ę,	5. Description of Materials:	6. Containers:	1 _		7. Total Quantity	
O		No.	Туре		m3	(yd3)
	8. Special Handling Instructions and Additional Information:					
	9. OPERATOR'S CERTIFICATION: I hereby declare that the contents of the consignment are fully and accurately described as above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in					
	proper condition for transport by highway according to applicable international and government regulations. Printed/Typed Name & Title:					
z	10. Transporter 1 (Acknowledgement of R	· ·		Month/Day/Year:		
	Printed/Typed Name & Title:		Signature:		Month/Day/Year.	
은	Address & Telephone No.:					
≱						
TRANSPORTATION						
SP(11. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name & Title: Signature: Month/Day/Year:					
Ž	Frinteu/Typeu ivaine & Title.		Signature.		Month/Day/Tear.	
Z.						
•	Address & Telephone No.:					
	10 P: 1 I' I' O					
	12. Discrepency Indication Space:					
DISPOSAL						
õ	13. Waste Disposal Site Operator: Certification of receipt of asbestos materials covered by this manifest					
ISF	Printed/Typed Name & Title: Signature: Month/Day/Year:					
			I		Ī	