

CUSTOMER COPY

CONTROLLED WASTE DESCRIPTION AND TRANSFER NOTE ***** Complete in BLACK INK only *****	
Part 1 Depot/Contract No: 263/1934119*1*00300000 Account No: 120190	
Container Description: 1100L WHEELIE BIN Standard General W	
No of Containers on Site _1 No of Collections per week1	
a. Describe the Waste (See Guidance Notes)	
Inert Non-Hazardous Hazardous / Special Waste (Scotland) Liquid Waste Excluded Waste
LOW/EWC CODE WRITTEN DESCRIPTION OF THE WASTE (See Guidance Notes)	
b. 2 0 0 3 0 1 c: SWEEPINGS, PACKAGING, FOOD SCRAPS	
If the LOW/EWC Code and written description have not been entered please complete this section in the Guidance Notes. FAILURE TO COMPLETE THE ABOVE SECTIONS WILL RESULT IN THE TRANSFER NOTE BEING RETURNED. If the LOW/EWC code and written description have been pre-printed on this form it is based of information previously supplied, please carefully check the details. If they are incorrect please enter any amendments in section d and e. (highlighted in grey) below.	
d. e:	
 Please state the nature of your business (e.g. activity(ies) undertaken, goods or services provided): SIC (2007) (please amend if incorrect) 47.19 OTHER RETAIL SALE IN NON-SPECIALISED STORES Date of collection/transfer (for multiple transfers, give "between" dates – unless notified otherwise subject to max. 12 months) 05/08/2019 TO 04/08/2020 	
Part 2	
Current Holder of the Waste ("Transferor")	
Customer Name INFRATEC-UK LTD	Collection Site (place of transfer) Name INFRATEC-UK LTD
Address UNIT 8 EASTER PARK BARTON	Address UNIT 8 EATER PARK BARTON ROAD
ROAD MIDDLESBROUGH TS2 1RY MIDDLESBROUGH TS2 1RY	
a. Are you the producer of the waste? If yes, ignore questions (c) and	(d) Yes No No
b. Have you imported the waste?	Yes No No
c. Are you the holder of a License (WML), Permit or Env Permit? If yes, please state reference number and issuer:	Yes No No
d. Are you exempt from the requirement to have a License (WML) or F If yes, give reason: (see Guidance Notes)	Permit? Yes No No
e. If you are a Registered Broker please enter details below:	
Registration No Issuing Authority Expiry Date	
Part 3	
Pre-Treatment Declaration	
a. Do you currently segregate/recycle any of your Waste? Yes No	
Part 4. Person Receiving the Waste ("Transferee") BIFFA WASTE SERVICES LIMITED (Company Registration 946107 – registered in England) of Coronation Road, Cressex, High Wycombe, Buckinghamshire, HP12 3TZ who is, in relation to collection sites in Northern Ireland, a Registered Waste Carrier, Registration no. ROC UT 714. Issued by the NIEA and, in relation to all other sites, a Registered Waste Carrier and Broker, Registration CBDU104360 previously CB/WE5237GH), Issued by the E.A.	
I warrant that I have fulfilled my duty to apply the waste hierarchy as required by the revised European Waste Framework Directive.	A
Ma.	786
Authorised signature(s) of Transferor for and on behalf of Biffa Waste Services Limited	
Lee Payne 5/8/2019	JEFF ANDERSON 5/8/2019
Names(s) (please print). Date	Name (please print). Date



BIFFA COPY

CONTROLLED WASTE DESCRIPTION AND TRANSFER NOTE ***** Complete in BLACK INK only ***** <u>Part 1</u> **Depot/Contract No:** 263/1934119*1*00300000 Account No: I20190 Container Description: 1100L WHEELIE BIN Standard General Waste No of Containers on Site .1 No of Collections per week ...1 a. Describe the Waste (See Guidance Notes) Non-Hazardous Hazardous / Special Waste (Scotland) Liquid Waste **Excluded Waste** X LOW/EWC CODE WRITTEN DESCRIPTION OF THE WASTE (See Guidance Notes) 0 c: SWEEPINGS, PACKAGING, FOOD SCRAPS If the LOW/EWC Code and written description have not been entered please complete this section in the Guidance Notes. FAILURE TO COMPLETE THE ABOVE SECTIONS WILL RESULT IN THE TRANSFER NOTE BEING RETURNED. If the LOW/EWC code and written description have been pre-printed on this form it is based of information previously supplied, please carefully check the details. If they are incorrect please enter any amendments in section d and e. (highlighted in grey) below. d. 1. Please state the nature of your business (e.g. activity(ies) undertaken, goods or services provided): 2. SIC (2007) (please amend if incorrect) 47.19 OTHER RETAIL SALE IN NON-SPECIALISED STORES 3. Date of collection/transfer (for multiple transfers, give "between" dates - unless notified otherwise subject to max. 12 months) 05/08/2019 TO 04/08/2020 Part 2 Current Holder of the Waste ("Transferor") Customer Collection Site (place of transfer) INFRATEC-UK LTD Name INFRATEC-UK LTD Name Address UNIT 8 EASTER PARK BARTON Address UNIT 8 EATER PARK BARTON ROAD ROAD MIDDLESBROUGH TS2 1RY MIDDLESBROUGH TS2 1RY a. Are you the producer of the waste? If yes, ignore questions (c) and (d) Yes No No b. Have you imported the waste? No \square c. Are you the holder of a License (WML), Permit or Env Permit? Yes 🗍 If yes, please state reference number and issuer: d. Are you exempt from the requirement to have a License (WML) or Permit? No \square If yes, give reason: (see Guidance Notes) e. If you are a Registered Broker please enter details below: Registration No Issuing Authority Expiry Date Part 3 **Pre-Treatment Declaration** a. Do you currently segregate/recycle any of your Waste? Yes No No Part 4. Person Receiving the Waste ("Transferee") BIFFA WASTE SERVICES LIMITED (Company Registration 946107 – registered in England) of Coronation Road, Cressex, High Wycombe, Buckinghamshire, HP12 3TZ who is, in relation to collection sites in Northern Ireland, a Registered Waste Carrier, Registration no. ROC UT 714. Issued by the NIEA and, in relation to all other sites, a Registered Waste Carrier and Broker, Registration CBDU104360 previously CB/WE5237GH), Issued by the E.A. I warrant that I have fulfilled my duty to apply the waste hierarchy as required by the revised European Waste Framework Directive. Authorised signature(s) of Transferor for and on behalf of Biffa Waste Services Limited Lee Payne 5/8/2019 5/8/2019 JEFF ANDERSON Names(s) (please print). Date Name (please print). Date