


**Department of
Environmental
Conservation**
Part 360 Series Waste Tracking Document - Construction & Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input checked="" type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>MUD / SILT</u>
WASTE QUANTITY:	<u> </u> Tons <u>12</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>SIMS METAL MANAGEMENT</u> Address: <u>30-27 GREENPOINT AVE.</u> City: <u>LONG ISLAND CITY.</u> State: <u>NY</u> Zip Code: <u>11101</u>
GENERATOR: Name: <u>SIMS METAL</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>30-27 GREENPOINT AVE</u> City: <u>LONG ISLAND CITY</u> State: <u>NY</u> Zip: <u>11101</u> Authorized Representative of Generator: <u>[Signature]</u> <u>JOHN WADE as AGENT</u> Phone: <u>631-300-5446</u> Transporter Name: <u>AB OIL SERVICE LTD</u> Receiving Facility Name: <u>110 Sand Company</u> <input type="checkbox"/> Chosen by Transporter Address: <u>136 Spagnoli Road</u> City: <u>Melville</u> State: <u>NY</u> Zip: <u>11747</u> <small>I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.</small>	
Signature: <u>[Signature]</u> Date: <u>3-16-21</u>	
TRANSPORTER: To be completed by Transporter DEC Permit/Registration No.: <u>1A-002</u> Transporter Company Name: <u>AB OIL SERVICE LTD</u> Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>MARK RAMROD</u> Phone: <u>347 453 5406</u> Plate No.: <u>30335 MM</u> Signature: <u>[Signature]</u> Date: <u>3/16/21</u>	
RECEIVING FACILITY: To be completed by Receiving site DEC Permit/Reg. No. (if applicable): _____ Name: <u>110 Sand Company</u> Address: <u>136 Spagnoli Road</u> City: <u>Melville</u> State: <u>NY</u> Zip: <u>11747</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site Describe all Discrepancies in type or quantity of waste: _____ <small>I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.</small>	
Print Name: _____ Phone: _____ Signature: <u>[Signature]</u> Date: <u>03/16/21</u> The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	