## **Cover Letter**

### **Basic Information**

Driver Name Sunny Khan Route Date 02-19-2024

Truck no Truck 2

# Companies Data

Name Nestle

Address 4225 Parker Drive

## Packaging for Route

Name	Quantity
4ft Boxes	2

## Extra Packaging/Equipment

Name	Quantity
Two Wheeler	1
Pallet Jack	1
Broom/Dustpan	1
4' Bins	1
3' Bin	1
8' Boxes	4
Bucket	1
Extra BOL's & HWM's	1

#### Nestle

#### **Basic Information**

Date of Route: 2024-02-19

Call Date & Time: 2024-02-19- 1:29 PM

BOL Number: F0-27

Clearance Height: 90ft

Pickup Location: 4225 Parker Drive

Site Contact Name: Timmy

Cell Number: +1 455 456 5421

Hrs of Service: 03:15 AM -- 06:31 AM

### Billing Address

Address 4225 Parker Drive, Khanewal, Florida, 32332, USA

### Pickup Items

#### APPLIANCES 3

Name Quantity		Packaging Type	
Heating Units Recycled	3	Loose	

# Drop off Information

No drop-off Packaging available

### **Transport Packaging**

Name	Quantity
4ft Boxes	2

## Replacement Packaging

No replacement packaging available

## **Project Completion Date**

Date: 2024-02-19

## RECYCLE BILL OF LADING

RECYCLE TECHNOLOGIES, INC. 2815 South 171 Street New Berlin, WI 53151 (262)798-3040

RECYCLE TECHNOLOGIES, INC. 1525 99 Ln NE Minneapolis, MN 55449 RECYCLE TECHNOLOGIES, INC. 10040 Davenport St NE Minneapolis, MN 55449 (763)559-5130

BILL OF LADING NO:F0-27

RTI Transpoter WDNR#13344

GENERATOR OF WASTE:			DESCRIPTION OF	WASTE:		
NAME: Nestle			FL0	FLOURESCENT LAMPS		
ADDRESS: 4225 Parker Drive			E S	E SCRAP		
CITY,STATE,ZIP: Khanewal, Florida, 32332			BALI	_AST		
CUSTOMER #: 3413			 OTH	ER:		
The material as marked under "DESCRIPTIO permits, rules, and regulations of Federal, Staunder penalty of perjury that the foregoing is of an invoice, charges will be due in accordance."	ite, and local governm true and correct. RTI,	nents in whose jurisd upon acceptance ar	prepared for transportation and tende iction such materials originate, pass the disposal of the above-described wa	r in accordance with all appli rough, or are tendered for de ste, will have rendered a ser	elivery. I certify (or declare) vice, and upon submission	
Signature of Authorized Agent			Title		Date	
QUANTITY		WAS	TE TYPE	FOR	OFFICE USE	
	STRAIGHT LAME	PS:				
	4 FOOT A	ND UNDER				
	5 FOOT A	ND GREATER				
	SHIELDED	D				
	LED					
	COMPACTS					
	MINIATURE					
MIRRORED SPOT/MIRRORED FLOOD						
INCANDESCENT/INCANDESCENT FLOOD						
			LIDE, HIGH-PRESSURE)			
			IS: INOUT			
			9? Y/N			
			?? T/IN	l I		
	OTHER					
The described waste was tendered to me for rethat the foregoing is true and correct.	emoval and transport	ted to:Trea	tment Facility,Secondary T	ransporter I certify (or declar	e) under penalty or perjury	
Prime Transporter Signature	Title	Date	Secondary Transporter Signature	Title	Date	
TREATMENT FACALITY:						
RECYCLE TECHNOLOGIES INC	CITY: New Ber	lin/Minneapolis		STATE: WI / MN	ZIP: 53151 / 55449	
I transprtor above delivered the described wa	ste to this facility and	it was acceptable m	aterial under faderal, state and local re	gulations.		
TREATMENT METHOD: RECYCLE / DECOM			DISPOSA	L DATE		
I certify (or declare) under penalty or perjury	that the foregoing is t	rue and correct.				
Signature of Authorized Agent			Title		 Date	

White - Invoice Yellow - Home Office Pink - Field Office REV: 12/2010