

## New York State Department of Environmental Conservation Division of Materials Management

Revised 2014

Medical Waste Tracking Form				Emergency Response Number:		
	Tracking Form Number:  4. State Permit or ID No.:		CIONS	Copy 2 - DESTINATION FACILITY COPY: Retained by Destination Facility Copy 3 - TRANSPORTER COPY: Retained by Transporter Copy 4 - GENERATOR COPY: Retained by Generator  1. This multi-copy (4 page) shipping document must accompany each shipment of regulated medical waste generated in New York State. 2. Items numbered 1-14 must be completed before the generator can sign the certification. Items 4,7,10 & 19 are optional unless required		
3. Telephone number:			5			
5. Transporter's Name and Mailing Address:	<ul><li>6. Telephone Number:</li><li>7. State Transporter or ID No.</li></ul>					
<u>Š</u>			I	by the particular state. Item 22 must be comfacility.	pleted by the destination	
8. Destination Facility Name and Address:	9. Telephone Number:		-	16. Transporter 1 (Certification of Receipt of Waste as	described in items 11, 12 & 13)	
				Print/Type Name Signature	Date	
	10. State Permit or ID No.		TER	17. Transporter 2 or Intermediate Handler (Name and Address)	18. Telephone Number	
HM	12. Total No. Containers	13. Total Weight or volume	SPOR		19. State Transporter Permit or ID No.	
b.			RAN	20. Transporter 2 or Intermediate Handler (Certificatio described in items 11, 12 & 13)	n of Receipt of Waste as	
14. Special Handling Instructions:				Print/Type Name Signature	Date	
				21. New Tracking Form Number (for consolidated	d or remanifested waste)	
14.(a) Additional Information			LION	in items 11, 12 & 13)		
I hereby declare, on behalf of the generator	dition for transport	by highway	DESTINA			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1. Generator's Name and Mailing Address:  3. Telephone number:  5. Transporter's Name and Mailing Address:  8. Destination Facility Name and Address:  8. Destination Facility Name and Address:  11. USDOT Shipping Name:    Him	1. Generator's Name and Mailing Address:  2. Tracking I  4. State Perm  3. Telephone number:  5. Transporter's Name and Mailing Address:  6. Telephone  7. State Transporter  10. State Perm  11. USDOT Shipping Name:  12. Total No. Containers  12. Total No. Containers  13. Regulated Medical Waste, 6.2, UN3291, PGII  14. Special Handling Instructions:  15. Generator's Certification: 16. Thereby declare, on behalf of the generator that the contents of this consignment are fully and accurately described above by proper shippic classified, packed, marked, and labeled, and are in all respects in proper condition for transport according to applicable international and national government regulations and state laws and regulations.	1. Generator's Name and Mailing Address:  2. Tracking Form Number:  4. State Permit or ID No.:  3. Telephone number:  5. Transporter's Name and Mailing Address:  6. Telephone Number:  7. State Transporter or ID No.  8. Destination Facility Name and Address:  9. Telephone Number:  10. State Permit or ID No.  11. USDOT Shipping Name:  12. Total No.  Containers  13. Total Weight or volume  14. Special Handling Instructions:  14. (a) Additional Information  15. Generator's Certification:  16. Thereby declare, on behalf of the generator that the contents of this consignment are fully and accurately described 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 national government regulations and state laws and regulations.	1. Generator's Name and Mailing Address:  2. Tracking Form Number:  4. State Permit or ID No.:  3. Telephone number:  5. Transporter's Name and Mailing Address:  6. Telephone Number:  7. State Transporter or ID No.  8. Destination Facility Name and Address:  9. Telephone Number:  10. State Permit or ID No.  11. USDOT Shipping Name:  12. Total No. Containers  12. Total No. Containers  13. Total Weight or volume  14. Special Handling Instructions:  14. Special Handling Instructions:  15. Generator's Certification: 16. Generator's Certification: 17. Total No. DLEY LEY LEY LEY LEY LEY LEY LEY LEY LEY	2. Tracking Form Number: 4. State Permit or ID No.: 4. State Permit or ID No.: 5. Transporter's Name and Mailing Address:  6. Telephone Number: 7. State Transporter or ID No. 8. Destination Facility Name and Address:  9. Telephone Number: 10. State Permit or ID No. 11. USDOT Shipping Name: 12. Total No. 13. Telephone Number: 14. Special Handling Instructions: 15. Transporter or ID No. 16. Telephone Number: 17. State Transporter or ID No. 18. Destination Facility Name and Address: 19. Telephone Number: 19. Telephone Number: 10. State Permit or ID No. 11. USDOT Shipping Name: 12. Total No. 13. Transporter or ID No. 14. Special Handling Instructions: 15. Generator's Certification of Receipt of Waste as Print/Type Name Signature 16. Transporter 2 or Intermediate Handler (Name and Address)  17. Transporter 2 or Intermediate Handler (Name and Address)  18. Destination Facility Name and Address Signature 19. Transporter 2 or Intermediate Handler (Name and Address)  19. Transporter 2 or Intermediate Handler (Certification described in times 11, 12 & 13)  10. Transporter 2 or Intermediate Handler (Certification described in times 11, 12 & 13)  11. USDOT Shipping Name: 12. Trata No. 13. Trata No. 14. Special Handling Instructions: 15. Generator's Certification of Receipt of Waste as Print/Type Name Signature 17. Transporter 2 or Intermediate Handler (Certification described in times 11, 12 & 13)  18. Print/Type Name Signature 19. Transporter 2 or Intermediate Handler (Certification described in times 11, 12 & 13)  19. Received in accordance with items 11, 12 & 13  10. Received in accordance with items 11, 12 & 13  10. Received in accordance with items 11, 12 & 13  10. Received in accordance with items 11, 12 & 13  11. USDOT Shipping Name in all respects in proper condition for transport by highway and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway and calcurately described above by proper shipping nam	