## **ATTACHMENT B**

## TREATED WOOD WASTE MANIFEST

**Part I: To be Completed by TWW Generator**

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| **Waste Manifest** | 1 Landfill accepting TWW: | 2. Generator’s Name: Generator’s ID No. |
| 3. Generator’s Physical Street Address: | | 4. Generator’s Mailing Address (If Different from Physical Address): |
| 5. City: County: State: Zip: | | 6. City: County: State: Zip: |
| 7. Generator’s Telephone Number (Ext): | | Contact Name: Telephone Number (Ext): |
| 8. Treated Wood Waste Type Information (Circle One)  a. Chromated Copper Arsenate (CCA)    b. Copper-Based  c. Creosote  d. Pentachlorophenol   1. Unknown/Mixture 2. Other (Please Specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Treated Wood Waste Origin (See List):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If Other, please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Treated Wood Waste Origin (Select One)   1. Building – Material and Supplies Dealer 2. Building – Foundation, Structure 3. Building – Construction 4. Department of Defense – National Security and International Affairs 5. Farms – Animal Production 6. Farms – Crop Production 7. Highway, Street, and Bridge Construction 8. Landscaping 9. Marinas 10. Parks – Amusements and Arcades 11. Parks 12. Ports/Harbors 13. Public Works Department 14. Railroad – Rail Transportation 15. Utilities 16. Wood Preservation – Sawmills and Wood Preservation 17. Waste Collection – Landfill 18. Waste Collection - Transfer Station 19. Other |

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| 1. Transporter Company Name (If different from generator): | 2. Contact Name: Telephone Number (Ext): |
| 1. Transporter Company Street Address (If different from generator): | 4. Driver Name Driver License No. |
| 5. City: County: State: Zip: |  |

**Part II: To be Completed by TWW Transporter**

**Part III: To be Completed by Fee Station Attendant (FSA)**

Date of Arrival: \_\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_ Time of Arrival: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Weight of TWW Load: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_tons

Name of FSA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of FSA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part IV: To be completed by Waste Inspector**

Estimated Percentage of TWW in Load:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or Estimated Weight of TWW in Load: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tons/Lbs (Circle One)

Disposal Area (e.g, Identify Filling Area, e.g., Phase C2)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: TWW is only permitted to be buried in the composite-lined portion of the landfill.

Name of Waste Inspector\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Waste Inspector\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_