

- (a) The information requested below is to enable all parties to discharge their duties under the following legislation:
The Environmental Protection Act 1990 and the Health and Safety at Work, etc., Act 1974, The Landfill (England and Wales) Regulations 2002 and regulations made under these Acts.
- (b) The client guarantees the accuracy of the Particulars set out below and on any attachments.
- (c) This form must be signed by an authorised and responsible employee of a company Client or by a partner of a Client partnership.

TO BE COMPLETED IN BLOCK CAPITALS OR TYPED			No. of attached sheets:			Sheets of analysis:					
Client's full name:				Place of collection (if different). Full name and address:							
Address:							
.....										
Postcode:				Tel No:		Postcode:					
.....				Tel No:					
Quantity:			Drum/Road Tanker/Skip/Bulk			Collection Frequency:					
Waste description:						Colour:		Physical form:			
						Hazard properties:		EWC code:			
.....								
Process from which waste is derived:											
Has the waste been pre-treated? YES/NO If YES, in what way?											
Will the waste vary? YES/NO If YES, in what way?											
Does the waste smell? YES/NO If YES, give possible cause(s).....											
CLIENT'S DECLARATION OF CONSTITUENTS OF THE WASTE (Delete as appropriate) Include and specify any known toxic, dangerous or objectionable contaminants either against the entry or in additional information box below. Attach analysis if available, including results of leaching behaviour tests. CONCENTRATIONS OF CONSTITUENTS ARE REQUIRED.							No. of samples taken		<input style="width: 80%; height: 20px;" type="text"/>		
CONSTITUENT		PRESENT		IF YES, PLEASE SPECIFY		CONSTITUENT		PRESENT		IF YES, PLEASE SPECIFY	
Arsenic		YES	NO			Molybdenum		YES	NO		
Barium		YES	NO			Nickel		YES	NO		
Cadmium		YES	NO			Lead		YES	NO		
Chromium (total)		YES	NO			Antimony		YES	NO		
Copper		YES	NO			Selenium		YES	NO		
Mercury		YES	NO			Zinc		YES	NO		
Chloride		YES	NO			Fluoride		YES	NO		
Sulphate		YES	NO			Organohalogens		YES	NO		
Mineral oils		YES	NO			PAHs		YES	NO		
PARAMETER		Value		PARAMETER		Value		PARAMETER		Value	
Total organic carbon				pH				Dissolved organic carbon			
Loss on ignition				Total dissolved solids				Flammability			
Additional information:											
.....											
Signed on behalf of the Client:			Name:			Job Title:			Date:		
.....				