

- (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, 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:			
Full chemical description:				Colour:		Approx pH:	
				Physical form:		Approx strength:	
Process from which waste is derived, including details of any pre-treatment:							
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. CONCENTRATIONS OF CONSTITUENTS ARE REQUIRED.						No. of samples taken <input style="width: 50px; height: 20px;" type="text"/>	
CONSTITUENT	PRESENT		IF YES, PLEASE SPECIFY	CONSTITUENT	PRESENT		IF YES, PLEASE SPECIFY
Acids	YES	NO		Controlled drugs/POMs	YES	NO	
Alkalis	YES	NO		Oxidizing agents	YES	NO	
Flammable liquids/solids	YES	NO		Reducing agents	YES	NO	
Spontaneously combustibles	YES	NO		Radioactives	YES	NO	
Water-reactive materials	YES	NO		Cyanides (free/complex)	YES	NO	
Oils, fats, greases	YES	NO		Ammonia/amines	YES	NO	
Halogenated solvents	YES	NO		Nitrates/nitrites	YES	NO	
Phenols/halogenated phenols	YES	NO		Agrochemicals	YES	NO	
Sulphur compounds	YES	NO		PCBs/PCTs	YES	NO	
Explosives	YES	NO		Biohazardous materials	YES	NO	
Metals/metals compounds	YES	NO		Red list substances	YES	NO	
Additional information:							
.....							
.....							
Signed on behalf of the Client:		Name:		Job Title:		Date:	
.....		