

**Oil & Water Limited.
Shaftesbury Treatment & Transfer Facility**

OW No:

New Waste Stream Acceptance Form OW0021 version 03

TO BE COMPLETED IN BLOCK CAPITALS AND FAXED BACK TO: 01747 858 562

Client's Name Address Postcode: Tel No:			Name & Address of Collection Point if different: Postcode: Tel No:				
Quantity:			Tanker/Drummed/Packaged				
Full Description of Waste:			Colour:		Approx Ph:		
EWC:			Physical Form:		Flashpoint:		
Process from which waste is derived:			Will the waste vary? Yes/No If so why?		Does the waste smell? Yes/No If so of what?		
Client's declaration of constituents of the waste (delete as appropriate) Include any known toxic, dangerous or objectionable contaminates either against the entry or in additional information below.							
Constituent	Present		Specify	Constituent	Present		Specify
Red List Substances	Yes	No		PCBs	Yes	No	
Agrochemicals	Yes	No		Acids	Yes	No	
Oil/Grease	Yes	No		Alkalis	Yes	No	
Flammable Liquids/ Solids	Yes	No		Radioactive	Yes	No	
Spontaneously Combustibles	Yes	No		Ammonia/Amines	Yes	No	
Water Reactive Materials	Yes	No		Nitrates/Nitrites	Yes	No	
Halogenated Solvents	Yes	No		Explosives	Yes	No	
Phenols	Yes	No		Bio hazardous Materials	Yes	No	
Oxidizing Agents	Yes	No		Cyanides (free/complex)	Yes	No	
Sulphur Compounds	Yes	No		Metals/Metal Compounds	Yes	No	
Additional Information:							
Signed on behalf of Client: Name: Position: Date:							
<p>As a waste producer you have a duty of care to fully declare all the constituents of the waste.</p>							

THIS IS NOT A BOOKING FORM ALL WASTE MUST BE BOOKED IN ON O&W WASTE BOOKING FORM