



**Application to Ship Hazardous and/ Liquid Industrial Waste
to the County of Oxford HHW Depot**

Date of Application: _____

Business Information: _____

Company Name: _____

Address: _____

Contact Person: _____

Name: _____

Title: _____

Telephone Number: _____

Fax Number: _____

Email Address: _____

Waste Information:	Shipped	Received (County Use Only)
Material Name:	_____	_____
Material Description:	_____	_____
Quantity To Be Shipped:	_____	_____
Unit of Measurement:	_____	_____
Physical State:	_____	_____
Type of Packaging:	_____	_____
Number of Containers:	_____	_____

Oxford County Hazardous and
Liquid Industrial Waste
Agreement Attached: Yes No

Disclaimer

I hereby certify that the information provided in this document is current and accurate.

Authorized Signing Officer

Date

Oxford County Internal Use Only:

Copy of signed Oxford County Hazardous and Liquid Industrial Waste Agreement at time of disposal

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Certificate of Shipment Issued

Certificate of Shipment Affixed to Waste

Container Size(s) No Greater than 25 Litres?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Total Number of Hazardous Shipments Year to Date by Generator?

	Shipments	Volume
Hazardous Waste		
Liquid Industrial Waste		

Condition of Container:

Sealed and Intact:

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Container in good condition (no leaks, suitable for waste stream):

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Container is identified with Client Information and Certificate for Sealed Containers: (as per Section 40 and/or 41 of Site CofA)

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Comments:

Date of Shipment: _____

Signature of Designated Official

Date