# TREATED WOOD WASTE DISPOSAL FORM



#### **Load Information**

Date Delivered	Estimated percentage (by weight) of treated wood waste in load

#### **Driver Information**

Driver Name	Driver Phone number
Driver's License Number	Vehicle License Plate Number

## **Transporter**

EPA Number (If Applicable)		
Transporter	Transporter	
Company Name	Contact Name	
Company Address	Phone Number	
City/State	Zip Code	

### Generator

EPA Number (If Applicable)	
Generator Name/Generator Company Name	Generator Contact Name
Generator Address	Phone Number
City/State	Zip Code