

Serial Number: _____



**Peter
Bennie**

Peter Bennie Ltd
Cranford Road
Burton Latimer
Northants. NN15 5TB
TEL: 01536 720400

DUTY OF CARE - WASTE TRANSFER NOTE

SECTION A - DESCRIPTION OF WASTE	SECTION B - PRODUCER/CURRENT HOLDER OF WASTE
<p>1. PLEASE DESCRIBE WASTE BEING TRANSFERRED</p> <p>2. HOW IS WASTE CONTAINED?</p> <p>TIPPERS</p> <p>ROAD SWEEPERS</p> <p>Other (please indicate)</p> <p>_____</p> <p>_____</p> <p>3. WHAT IS THE APPROXIMATE QUANTITY OF THE WASTE?</p>	<p>1. FULL NAME</p> <p>2. ADDRESS</p> <p>3. ADDRESS OF TRANSFER/COLLECTION POINT</p> <p>4. DATE AND TIME OF TRANSFER (FOR MULTIPLE CONSIGNMENTS GIVE 'BETWEEN' DATES)</p> <p>5. NAME AND ADDRESS OF BROKER WHO ARRANGED THIS WASTE TRANSFER (IF APPLICABLE)</p> <p>ON BEHALF OF PRODUCER/HOLDER</p> <p>Name _____ Date _____</p> <p>Signature _____</p>
SECTION C - WASTE CARRIER	SECTION D - DISPOSAL FACILITY
<p>1. REGISTERED CARRIER'S NAME PETER BENNIE LTD</p> <p>2. ADDRESS Cranford Road, Burton Latimer, Northants. NN15 5TB</p> <p>3. REGISTERED CARRIER No. CB/EN5616RB</p> <p>4. ISSUED BY</p>	<p>1. SITE OPERATOR</p> <p>2. SITE NAME</p> <p>3. ADDRESS</p> <p>4. SITE LICENCE No.</p> <p>5. ISSUED BY</p> <p>6. DATE AND TIME OF TRANSFER</p>
<p>ON BEHALF OF CARRIER</p> <p>Name _____ Date _____</p> <p>Signature _____</p>	<p>ON BEHALF OF DISPOSER</p> <p>Name _____ Date _____</p> <p>Signature _____</p>