[CITY/DISTRICT] HAULED WASTE MANIFEST

Instructions: Please write legibly. Complete all blanks in Part I. Enter all information for each generator where waste was pick-up in Part II. Sign and date the manifest in Part III. Provide the completed manifest to the Control Authority prior to disposal of waste.

	Permit #: Truck License #:	
Waste identified in Part II	was disposed at (Location):	
Part II: Waste Generator #1: Name: Address: Date Pumped: Size of Tank:	Time pumped: am/pm	CHECK ONE: Domestic-Only Grease Interceptor Industrial Other:
Waste Generator #2 Name: Address: Date Pumped: Size of Tank:	Time pumped: am/pm	CHECK ONE: Domestic-Only Grease Interceptor Industrial Other:
Waste Generator #3: Name: Address: Date Pumped: Size of Tank:	Time pumped: am/pm	CHECK ONE: Domestic-Only Grease Interceptor Industrial Other:
Waste Generator #4: Name: Address: Date Pumped: Size of Tank:	Time pumped: am/pm	CHECK ONE: Domestic-Only Grease Interceptor Industrial Other:
of my knowledge and belief, true, a including the possibility of fine and hazardous as defined at 40 CFR Pa	his manifest was prepared by me or under my direction or supervision or supervisi	ies for submitting false information, es covered by this manifest are not POTW are being made in
Printed Name	Signature of Transporter	Date/Time