



CONTRACT ENVIRONMENTAL SERVICES, INC. 925 S. Broadway, Suite 251 · Cortez, Colorado 81321 · (970) 565-1198

Asbestos Landfill Manifest

Delivery Date (mm/dd/yy):				Delivery Time	
Volume or Weight: Type and proper CY name of the waste			<u> </u>		Container # Type of Cont.
		Tiame of the waste			_ Type of Cont
	Generator's Name:	•			
-	Generator's Address:	_		Telephone Number:	;
	Waste Origin (Project	or Location Name):	nim .		
	Waste Origin Address:				
	Billing Information (if different from above):				
	Name:			Job or P.O. No.:	
	Company:				
	Billing Address:			Telephone Number:	
	Transporter Information:				
OR.	Transporter 1 Tran	nsporter Company Name:			
GENERATOR	Transporter Company	Address:		Telephone Number:	
5	Transporter 2 Transporter Company Name:				
	Transporter Company	Address:	•	Telephone Number:	
	Destination Facility Information:				
	Facility Name: Contract Environmental Services, Inc. Telephone Number: (970) 565-1198				
	Office Address: 925 S. Broadway, Suite 251, Cortez, CO 81321 Permit Number: 0405R2				
	Facility Location: NE 1/4, S18, T39S, R26E, San Juan County, Utah State of Utah Class V Landfill				
	Special Handling Instructions or Additional Information:				
	Generator's Certification: I hereby certify that the contents of this shipment are fully and accurately described above by				
	type and proper name of the waste, and that such waste has been managed, packaged, containerized and labeled in				
	accordance with the re	equirements of all federal, s	tate and local regulation	ns.	
	Printed/Typed Name:		Signature:		Date:
~		wledgement of Receipt of A	sbestos Waste	Truck Numbe	r:
TRANSPORTER	Printed/Typed Name:		Signature:		Date:
		wledgement of Receipt of A	sbestos Waste	Truck Numbe	r:
	Printed/Typed Name:		Signature:		Date:
Contract Environmental Services, Inc.	Discrepancy Indication:				
	The original copy of manifest will be kept in Cortez, CO office of Contract Environmental Services, Inc. for the State of Utah permit requirement purpose. A copy will be sent to above address of the BILLING COMPANY for their records. Additional copies are avaliable upon request.				
	Additional Discrepancy:				
	Facility Owner or Operator: I hereby acknowlege receipt of the asbestos waste as indicated upon this manifest, except				
	as noted above in the Discrepancy Indication.				
	Printed/Typed Name:		Grid Number Depo	Grid Number Deposited in:	
	Signature:		GPS inf	GPS info N	
raci				W	27 26 25 9 8 7 28 29 30 10 11 12
				* *	[20]23[30] 10[:11]12
Con	Date:	Acceptable condition: Yes No	Time arriving at lar		33 32 31 15 14 13 34 35 36 16 17 18