

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

No. 58092

UC-1687

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.



SECTION I - GENERATOR (Generator completes all of Section I.)

a. Generator Name: UNION CARBIDE b. Generating Location: UNION CARBIDE
c. Address: STAR ROUTE BOX 90 d. Address: 10 Miles E. on Hwy 48
BROWNSVILLE, TEXAS 78521 BROWNSVILLE, TEXAS 78521
e. Phone No.: (512) 831-4501 f. Phone No.: (512) 831-4501
If owner of the generating facility differs from the generator, provide:
g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE

T	X	2	7	4	9	3	0	2	2	4
---	---	---	---	---	---	---	---	---	---	---

8	1	5	7	0
---	---	---	---	---

 Containers:

DM	-	METAL DRUM
DP	-	PLASTIC DRUM
B	-	BAG
BA	-	5 ML. PLASTIC BAG or WRAP
T	-	TRUCK
Q	-	OTHER

j. Description of Waste: WASTE ASBESTOS k. Quantity:

--	--	--	--	--	--

 Units:

--	--	--	--	--	--

 TYPE:

--	--	--	--	--	--

(NON) FRITABLE, ORM-C TWC#276030

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name: _____ Signature: _____ Shipment Date:

--	--	--	--	--	--

SECTION II - TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-j)

TRANSPORTER I
a. Name: WPI TRANSPORTATION INC.
b. Address: 120 TOWER STREET
CHANNELVIEW, TEXAS 77530
c. Driver Name/Title: _____
d. Phone No.: (713) 452-1504 e. Truck No.: _____
f. Vehicle License No./State: _____
g. Acknowledgement of Receipt of Materials:

--	--	--	--	--	--

Driver Signature: _____ Shipment Date:

--	--	--	--	--	--

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials:

--	--	--	--	--	--

Driver Signature: _____ Shipment Date:

--	--	--	--	--	--

SECTION III - DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI MCCARTY ROAD LANDFILL c. Phone No.: (713) 675-6101
b. Physical Address: 11013 OIL BEAUMONT ROAD d. Mailing Address: SAME
HOUSTON, TEXAS 77078

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date:

--	--	--	--	--	--

SECTION IV - ASBESTOS (Generator completes a-d; f, g. Operator completes e-h)

a. Operator's Name: _____ b. Operator's Phone No.: _____
c. Operator's Address: _____
d. Special Handling Instructions and additional information: _____
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
e. Operator's Name & Title: _____ Print/Type _____ Operator's Signature: _____ Date:

--	--	--	--	--	--

f. Name and Address of Responsible Agency: _____
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both.