RAPID CITY LANDFILL - - - WASTE SHIPMENT RECORD: ASBESTOS
5555 S. Hwy 79
Rapid City, SD 57701

GENERATOR

1	**Work Site Name/Mailing Address** Work site name address city state zip	**Owner's Name** Work site name address city state zip	**Owner's Telephone Number**
2	**Operator's Name/Address.** Operator of the property address city state zip		**Operator's Telephone Number**
	Abatement Contractor's or Owner Name/Address. name address city state zip		**Contractor's Telephone Number**
3	**Waste Disposal Site (WDS) - Name/Mailing Address & Physical Site Location** Rapid City Landfill 5555 S. Hwy. 79 Rapid City, SD 57701		**Telephone Number** (605) 394-4197
4	**Name/Address of Responsible Agency:** SD Department of Environment & Natural Resources, 523 East Capitol Avenue, Pierre, SD EPA Region 8, 1595 Wynkoop St., Denver, CO. 80202		**Telephone Number** (605) 773 - 3151 (800) 227 - 8917
5	**Description of Material** **Asbestos Containing Type: (flooring/siding/ceiling/pipe insulation or__):**	**6. Number of Containers:** **Type: Bags or Boxes?** circle one	**7. Total Quantity:** **Cubic Yds.:**

8 **Special Handling Instructions & Additional information:**
Cover without damaging bags within 24 hours. Keep material wet within double 6 mil. bags. Do not rip/tear or drive over bags.

9 **Operator's Certification (by Contractor or responsible person): I hereby declare that the contents of this consignment are fully & accurately** described above by proper shipping name & are classified, packed, marked & labeled and are in all respects in proper condition for transport by highway according to applicable international & government regulations.

Printed/typed Name & Title	**Signature**	**Date:**

TRANSPORTER

10 **Transporter 1 (who's delivering the material to the Rapid City, SD, Landfill)**

Printed/typed Name & Title	**Signature**	**Date:**

Address/Telephone Number of Transporter:
Phone Number:

11 **Transporter 2 (used if the material changed hands to a 2nd driver)**

Printed/typed Name & Title	**Signature**	**Date:**

Address/Telephone Number:

12 **Discrepancy Indication Space (if any of the description above is different than current conditions)**

LANDFILL

13 **Waste Disposal Site (signed by Rapid City Landfill representative):**
Owner or Operator: Certification of receipt of asbestos materials covered by this manifest except as noted in Line Item 12.
Follow conditions in Line Item 8.

Printed/typed Name & Title	**Signature**	**Date:**