YAKIMA COUNTY PUBLIC SERVICES-SOLID WASTE DIVISION
SPECIAL WASTES SHIPMENT RECORD

GENERATOR

1. **Work site name and mailing address**	**Owner's name**	**Owner's Telephone #**

2. **Remover's name and address**	**Remover's Telephone #**

3. Waste disposal site

TERRACE HEIGHTS LANDFILL
7151 ROZA HILL DRIVE
YAKIMA, WA 98901
(509) 574-2450

4. **Name and address of responsible agency (Circle One)** Yakima Regional Clean Air Agency 186 Iron Horse Court, Suite 101 Yakima EPA Region 10 1200 Sixth Avenue – Suite 900, Seattle, WA 98101	**Agency notified before removal** yes / no

5. **Description of waste**	6. **Containers** No. Type	7. **Total quantity (sq ft, ln ft, yds, lbs)**
Notice of Demolition/Renovation No. *Not Required*		

8. **Special handling instructions and additional information:**

9. **GENERATOR'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.

Printed /typed name & title	**Signature**	**Month Day Year**

TRANSPORTER

10. **Transporter 1 (Acknowledgment of receipt of materials)**

Printed/typed name & title **Address and telephone no.**	**Signature**	**Month Day Year**

11. **Transporter 2 (Acknowledgment of receipt of materials)**

Printed/typed name & title **Address and telephone no.**	**Signature**	**Month Day Year**

DISPOSAL SITE

12. Delivery Discrepancies Found:

Load Rejected: Yes □   No □

13. **Waste disposal site**   **TERRACE HEIGHTS LANDFILL**
owner or operator: **YAKIMA COUNTY PUBLIC SERVICES - SOLID WASTE DIVISION**

Printed/typed name & title	**Signature**	**Month Day Year**