

Landfill Waste Approval Application

	Landin waste	Appiovai Applicatio	ווע			
FOR INTERNAL USE ONLY: Waste Confirmation Code:						
WASTE GENERATOR INFO	ORMATION					
Waste Generator	Company Name:					
Mailing Address	Street:					
	City/Town:	Province:	Postal Code:			
Generating Waste Location	LSD/Physical Address:					
	City/Town:	Province:	Postal Code:			
Waste Generator Authorized Representative	Full Legal Name:					
	Phone:	Email:				
ENVIRONMENTAL CONS	ULTANT INFORMATION					
Consultant/Company	Company Name:					
Mailing Address	Street:					
	City/Town:	Province:	Postal Code:			

Contact	Full Legal Name:					
	Phone:	Email:				
INVOICING INFORMATIO	N					
Company	Company Name:					
Billing Address	Street:					
	City/Town:	Province:	Postal Code:			
Billing Contact	Name:					
	Phone:	Email:				
Payment Method	A/R account? Yes No (If no, please complete credit application)					
	Credit Card: Yes No (If yes, a separate Credit Card Authorization form will be emailed)					
Billing Information	PO No.	GL Code:	Approver Code:			
	AFE/WO/CC:					
	Signatory Name:					
	Phone:	Email:				
Second Signatory	Full Legal Name:					
	Phone:	Email:				

Trucking Company Company Name: Phone: Email: UWI/LSD Product Downhole/Associated UWI (Please list all associated UWI'S with designated surface LSD) Surface: Drill rig #: Sources in Province: Yes No is this a Multi-well Pad: Yes No WASTE STREAM INFORMATION Waste Description Description: Waste Generating process Clearly explain generating process: (attach separate sheets if required) Volume Tonnes: m¹ Shipping mode Bulk Bag Bin Other (Specify)						
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	Waste Generating process	Clearly explain generating process: (attach separa	ate sheets if required)			
Shipping mode Bulk Bag Bin Other (Specify)	Volume	Tonnes:	m ³			
	Shipping mode	Bulk Bag Bin Othe	er (Specify)			

Frequency	One-Time I	Daily	Weekly	Monthly	Annually			
Recommended PPE and special handling instructions:								
Properties of Concern	Does the waste contain	: РСВ	EOX	NORM I	METALS	SULPHUR	ASBESTOS	
	List any other significant properties of concern:							
Attachments	Supporting analytic	cal S	Supporting ar	nalytical I.D. no.	Date of	Analytical:		
PLEASE EMAIL YOUR ACCOMPANYING DOCUMENTS ALONG WITH THE COMPLETED LANDFILL WASTE APPROVAL APPLICATION fmslfadmin@pureenviro.eco								
GENERATOR'S CERTIFICATION								
I understand that it is the responsibility of the Generator or the Generator's Authorized Representative to determine the characteristics of the waste and its proper classification. I hereby certify that the information entered on this application is correct and that the waste material complies with all federal, provincial, and local laws and regulatory criteria for receipt and disposal at Pure Environmental's facility. I hereby indemnify Pure Environmental from and against any and all claims, actions, damages, liabilities, and expenses in connection with loss or injury whatsoever arising from or out of any inaccuracy or								

Title/Position Date

untruthfulness in the information provided herein.

Print Name

Authorized Signature