

**PART 7**

*Use only if waste is being removed from site*

**FORM SWL7**

**DUTY OF CARE: CONTROLLED WASTE TRANSFER NOTE**

**SECTION A – Description of Waste**

1. Please describe the waste being transferred:

Loose  Sacks  Skip  Drum  Other  → please describe

2. How is the waste contained?

3. What is the quantity of waste (number of sacks, weight etc.):

**SECTION B – Current holder of the Waste**

1. Full Name (BLOCK CAPITALS):

2. Name and address of Company:

3. Which of the following are you: (Please ✓ one or more boxes)

<i>producer of the waste</i>	<input type="checkbox"/>	<i>holder of waste disposal waste management licence</i>	<input type="checkbox"/>	<i>Licence number: Issued by:</i>
<i>importer of the waste</i>	<input type="checkbox"/>	<i>Exempt from requirement to have a waste disposal or waste management licence</i>	<input type="checkbox"/>	<i>Give reason:</i>
<i>waste collection authority</i>	<input type="checkbox"/>	<i>Registered waste carrier</i>	<input type="checkbox"/>	<i>Registration No: Issued by:</i>
		<i>exempt from requirement to register</i>	<input type="checkbox"/>	<i>Give reason:</i>

**SECTION C – Person collecting the waste**

1. Full Name (BLOCK CAPITALS):

2. Name and address of Company:

3. Which of the following are you? (Please ✓ one or more boxes)

<i>waste collection authority</i>	<input type="checkbox"/>	<i>holder of waste disposal waste management licence</i>	<input type="checkbox"/>	<i>Licence number: Issued by:</i>
<i>importer of the waste</i>	<input type="checkbox"/>	<i>Exempt from requirement to have a waste disposal or waste management licence</i>	<input type="checkbox"/>	<i>Give reason:</i>
<i>Exporter</i>	<input type="checkbox"/>	<i>Registered waste carrier</i>	<input type="checkbox"/>	<i>Registration No: Issued by:</i>
		<i>exempt from requirement to register</i>	<input type="checkbox"/>	<i>Give reason:</i>

**SECTION D**

1. Address of place or transfer/collection point:

2. Date of transfer:

3. 3. Time(s) of transfer (for multiple consignments, give 'between' dates):

4. Name & address of broker who arranged this waste transfer (if applicable):

5. Signed:	Signed:
Full Name:	Full Name:
(BLOCK CAPITALS)	(BLOCK CAPITALS)
Representing:	Representing: