



## LAB PACKS

### I. General Information

Generator Name:	Billing Name:
Address:	Address:
City   State   Zip:	City   State   Zip:
Contact:	Contact:
Phone: Fax:	Phone: Fax:
EPA Number:	

LAB PACK DRUM NUMBERS:


- \* ASSIGN each drum a unique ID number.
- \* USE a C&O inventory sheet or one that contains the following information:
  1. Generator Name | Address.
  2. Drum Number | Size | Type | Weight.
  3. Proper and Complete D.O.T. Shipping Information.
  4. A Numbered Line Entry for Each Item Packed, Including:
    - \* Material Description
    - \*Number of Containers | Size | Type | (liquids in volume units, solids by weight)
    - \*Applicable Waste Codes (or "none", "NR", etc.)
  5. Page Number (1 of 2, 2 of 2, etc.).
  6. Crosby & Overton Waste Product Questionnaire Number (upper right corner of this document).
  7. Manifest Document Number.
- \* Fax this questionnaire along with the Lab Pack inventories to: **FAX (562) 495.2181**

### II. General Certification Statement

I hereby certify that, as an authorized representative of the generator named above, all information submitted in this and all the attached documents is true and accurate. Analysis of the waste was conducted in accordance with the approval test methods in 40 CFR 261 on a representative sample as defined in 40 CFR 261.20. To the best of my knowledge, all known (40 CFR 261) and suspected hazardous components have been included in this document. All material and packaging will comply with all current regulations.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
(Print, sign and send to customer service)