





DATROLLED WASTE DESCRIPTION AND TRANS	FER NOTE ***** Complete in BLACK INK only *****
Part 1	
Depot/Contract No: 522/2468703*1*00300000 Account No: P37389 Container Description: 11001 Wheelie Bin for General Waste	
No of Containers on Site 11 No of Collections per week 3	
a. Describe the Waste (See Guidance Notes) Inert Non-Hazardous Hazardous / Special Waste (S	cotland) Liquid Waste Excluded Waste
LOW/EWC CODE WRITTEN DESCRIPTION OF THE WASTE (See Guidance Notes)	
b. 2 0 0 3 0 1 c: MIXED MUNICIPAL INCLUDING FLOOR SWEEPINGS, OFFICE AND KITCHEN WASTE	
If the LOW/EWC Code and written description have not been entered please complete this section in the Guidance Notes. FAILURE TO COMPLETE THE ABOVE SECTIONS WILL RESULT IN THE TRANSFER NOTE BEING RETURNED.	
If the LOW/EWC code and written description have been pre-printed on this form it is based of information previously supplied, please	
carefully check the details. If they are incorrect please enter any amendments in section d and e. (highlighted in grey) below.	
d e:	
Please state the nature of your business (e.g. activity(ies) undertaken, goods or services provided):	
2. SIC (2007) (please amend if incorrect) 38.21 TREATMENT AND DISPOSAL OF NON-HAZARDOUS WASTE	
3. Date of collection/transfer (for multiple transfers, give "between" dates – unless notified otherwise subject to max. 12 months) 01/12/23 TO 30/11/24	
3. Date of conscitoring and from maniple transfers give bothour dates and a second sec	
Part 2	
Current Holder of the Waste ("Transferor")	
Customer	Collection Site (place of transfer) Name PADSTOW TOWN COUNCIL
Name PADSTOW TOWN COUNCIL	
Address STATION HOUSE STATION ROAD PADSTOW Address LAWN CAR PARK COMPOUND PADSTOW PL28 PL28 8DA 8EA	
a. Are you the producer of the waste? If yes, ignore questions (c) and (c	Yes No 🗵
b. Have you imported the waste?	Yes No No
Are you the holder of a License (WML), Permit or Env Permit? If yes, please state reference number and issuer:	
d. Are you exempt from the requirement to have a License (WML) or Permit?	
If yes, give reason: (see Guidance Notes)	
e. If you are a Registered Broker please enter details below:	
Registration No Issuing Authority Expiry Date	
Part 3	
Pre-Treatment Declaration	
a. Do you currently segregate/recycle any of your Waste? Yes No 🗵	
Part 4. Person Receiving the Waste ("Transferee") BIFFA WASTE SERVICES LIMITED (Company Registration 946107 – registered in England) of Coronation Road, Cressex, High Wycombe, Buckinghamshire, HP12 3TZ who is, in relation to collection sites in Northern Ireland, a	
Registered Waste Carrier, Registration no. ROC UT 714. Issued by the NIEA and, in relation to all other sites, a Registered Waste Carrier and	
Broker, Registration CBDU104360 previously CB/WE5237GH), Issued by the E.A. Where the transferor has signed the Transfer Note it authorises Biffa to act as its agent for the purposes of administering the Transfer Note which	
shall include but not be limited to, checking, amending, updating, replacing a warrant that I have fulfilled my duty to apply the waste hierarchy as	ng, renewing and signing the Transfer Note as agent for the Transferor.
required by the revised European Waste Framework Directive.	
Authorised signature(s) of Transferor	for and on behalf of Biffa Waste Services Limited
MAXINE MAYHEW 10/12/23	MAXINE MAYHEW 10/12/23
Names(s) (please print). Date	Name (please print). Date

