WRR ENVIRONMENTAL SERVICES CO., INC.,

STATE OF WISCONSIN VSQG HAZARDOUS WASTE DROP-OFF RECEIPT

Receipt # _____
(to be completed by WRR)

On _____, WRR Environmental Services Co., Inc., in the County of Eau Claire, received hazardous waste from _____, located in _____ County of Wisconsin.

CHEMICAL INVENTORY (photocopy if more copies needed)

(A) Chemical Name	(B) Container Size	(C) Container Type	(D) Weight or Number	(E) Physical State	(F) Condition of Container	(G) Hazard Class (if known)	(H) Describe use of Original Materials	(I) MSDS Copy Provided?

C = Container Type: **G = Glass** **M = Metal** **P = Plastic** **F = Fiber** **C = Cardboard**

E = Physical State of Chemical: **S = Solid** **L = Liquid** **A = Aerosol** **R = Residue**

Mail or fax to:
BJ Michalek
WRR Environmental Services Co., Inc.,
5200 Ryder Road
Eau Claire, WI 54701
Fax: (715) 836 8785
Email: bmichalek@wrres.com

I, _____, certify that I am currently knowledgeable of the hazardous waste regulations as they pertain to my business and certify that the waste listed above was generated and transported by a "Very Small Quantity Generator" of hazardous waste and further, that I am the authorized representative of _____ and further, I certify that my company is classified as a "Very Small Quantity Generator" as defined by 40 CFR 261.5 (<220 lb.. generated/month; storage of <2,205 lb.. of hazardous waste). I further certify that a copy of this receipt shall be kept in the business files at the place of hazardous waste generation for regulatory review for a minimum of three (3) years from said date.

_____ Signature

_____ Mailing Address

_____ Company Name

_____ City, State, Zip

_____ Area Code & Phone Number