

DRUMHELLER & DISTRICT REGIONAL LANDFILL

WASTE MANIFEST FROM

Date: _____

Generator Name: _____

Location: _____

Type of Waste: _____

Contact Name: _____

Contact Phone Number: _____

Haulers Name: _____

Haulers Phone Number: _____

I hereby confirm that the waste delivered and disposed of under this manifest form is the type identified and is from the location specified

Signature: _____