**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's Name and Address
   - Generator's Name (if different then mailing address)
   - Generator's Address
2. Transporter 1 Company Name
   - U.S. EPA ID Number
3. Transporter 2 Company Name
   - U.S. EPA ID Number
4. Designated Facility Name and Address
   - U.S. EPA ID Number
5. Facility Phone:
6. **Shipping Details**:
   - U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group, if any)
   - ID Containers
   - Quantity
7. **Hazardous Waste Information**:
   - 11. Total Unit
   - 12. Unit
   - 13. Racket Codes
8. **Special Handling/Intended Use Information**
9. **GENERATOR/SHIPPERS CERTIFICATION**:
   - I hereby acknowledge that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked, and labeled as required by the regulations for transport according to applicable international and national regulations. I affirm that I am the primary responsible party and that the contents of this consignment conform to the limits of the applicable EPA Hazardous Waste Identification and Manifestation Rule.
   - Generator/Shipper's Signature
   - Month
   - Day
   - Year
10. **INTERNATIONAL SHIPMENTS**:
   - Import to U.S.
   - Export from U.S.
   - Part of relayed
   - Date leaving U.S.
11. **TRANSPORTER ACKNOWLEDGMENT OF RECEIPT OF MATERIALS**:
   - Transporter 1 or Poultry
   - Signature
   - Month
   - Day
   - Year
   - Transporter 2 or Poultry
   - Signature
   - Month
   - Day
   - Year
12. **ACCIDENTS**:
   - Description of Accident
   - Quantity
   - Type
   - Residue
   - Partial Rejection
   - Full Rejection
   - Manifest Reference Number
   - U.S. EPA ID Number
13. **ACCIDENTS**:
   - Month
   - Day
   - Year
14. **Hazardous Waste Disposal Method/Code (i.e., code for hazardous waste treatment, disposal, and recycling industries)**
15. **Designated Facility or Operator Certification (if receipt of hazardous materials covered by the manifest except as noted in Item 18)**
   - Month
   - Day
   - Year
   - Designated Facility or Operator
   - Signature
   - Month
   - Day
   - Year

*EPA Form 8700-22 (Rev. 3/18)* Previous editions are obsolete.

**DESIGNATED FACILITY TO DESTINATION STATE (F REQUIRED)**