	SPECIAL WASTE  MANIFEST					M	Manifest Document No.		
	Generator's Name Generator's Address			Address		Generator's Telephone No.			
	Origin of Special Waste (Project or Spill Location):								
	7						Talanhana Na		
	Transporter #1 Company Name		Address				Telephone No.		
	Transporter # 2 Company Name		Address				Telephone No.		
	Destination Facility Name/ Site Address		Facility ID (Permit) Number				Telephone No.		
GEN									
<b>GENERATOR</b>	Type and Proper Name of Special Waste		f Special Waste		Container(s) No.	Type	Total Quantity	Unit Wt/Vol	
OTA									
R									
	Additional Descriptions for Special Waste Listed Above:								
	·								
	Special Handling Instructions:								
	GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately								
	described above by type and proper name of the special waste, and that such waste has been managed,								
	packaged, containerized and labeled in accordance with the requirements of 20.9.8 NMAC								
	(Special Waste Requirements) in addition to any other applicable federal, state or local Printed/Type Name:  Signature:					Date:			
	riniteu/ Type Name.			Signature.			Date.		
7	Transporter 1 Acknowledgement of Receipt of Special \			Waste					
TRANSPORTER	Printed/Typed Name:			Signature:			Date:		
PO	ransporter 2 Acknowledgement of Receipt of Special			Waste					
RIE	Printed/Type Name:			Signature:			Date:		
	Discrepancy indication Space								
<b>FACILITY</b>	acility Owner or Operator: I herby acknowlege receipt of the special waste as indicated upon this manifest, except as								
LITY	noted above in the Discrepancy Indication Space.								
	Printed/Typed Name:			Signature:			Date:		