

**BILL OF LADING – SHORT FORM – NOT NEGOTIABLE**

<b>PROFILE NUMBER, IF APPLICABLE</b>		<b>GENERATOR EPA &amp;/OR STATE ID#</b>		
<b>GENERATOR NAME &amp; ADDRESS</b>		<b>GENERATOR VARIANCE#</b>		
<b>GENERATOR CONTACT NAME</b>		<b>GENERATOR PHONE #</b>		
<b>DISPOSAL FACILITY NAME &amp; ADDRESS</b>		<b>DISPOSAL FACILITY VARIANCE #</b>		
MCCOURTNEY ROAD TRANSFER STATION 14741 WOLF MOUNTAIN ROAD GRASS VALLEY, CA 95949		TWW-2021-HT-00161		
<b>TRANSPORTER NAME, PHONE #, &amp; DRIVERS NAME</b>		<b>TRANSPORTER VARIANCE # (IF APPLICABLE)</b>		
<b>DRIVERS LICENSE #</b>		<b>VEHICLE LICENSE PLATE#</b>		
<b>Special Handling Instructions/Comments:</b>				
<b>Handling Unit</b>				
Qty	Shipping type (circle)	Weight	Quantity type (Circle)	<b>Commodity Description</b>
	Cubic yard box  Bin  Vehicle Bed/trailer		Pounds  or  Tons	<b>Treated Wood Waste</b>
<b>Shipper Signature/Date</b>		<b>Transporter Signature/Pickup Date</b>		
Signature: _____ Date _____		Signature _____ Date : _____		
This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.		Carrier acknowledges receipt of package.		
<b>Date Disposal Facility Received Material</b>				
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Note: Households under 50# do not need variance.

Directions: Complete Each Highlighted portion prior to transport and a copy provided to disposal facility.