INFORMATION ACCOMPANYING SHIPMENTS OF WASTE AS REFERRED TO IN ARTICLE 3(2) AND (4)

CONSIGNMENT INFORMATION (1)

CONSIGNIVIENT INFORMATIO	1 /				
1. Person who arranges the shipment:		2. Importeur / Consignee:			
Name:		Name: C.Hafner GmbH + Co. KG			
Address: Contact person: Tel.: Fax:					
Email:		Email: edelmetall	-recycling	@c-hafner.de	
3. Actual quantity: Tonnes (Mg): m³:					
5.(a): First Carrier (²)	5.(b): Second Cari		5.(c)	: Third Carrier	
Name:	Name:		Name:		
Address:	Address:		Address:		
Contact person:	Contact person:		Contact person:		
Tel.:					
Fax:	Fax:		Fax:		
Email:	Email:		Ema	il:	
Means of transport:	Means of transport:		Mear	Means of transport:	
Date of transfer:	Date of transfer:		Date	of transfer:	
Signature:	Signature:				
6. Waste generator (3)		8. Recovery operation (or if appropriate disposal operation in			
Original producer(s), new producer(s) or collector:		case of waste re	case of waste referred to in Article 3(4)):		
		R-code / D-code :			
Name: Address:					
Address: Contact person:		9. Usual description of the waste:			
Contact person: Tel.: Fax:					
Email:					
7. Recovery facility ⊠ Laboratory □		40 Wasta identification (fill in valouent and a).			
Name: C.HAFNER GmbH + Co. KG		10. Waste identification (fill in relevant codes):			
Address: Esslinger Straße 11, D-75179 Pforzheim		i) Basel Annex IX :			
0		ii) OECD (if different from (i)):			
Tel.: +49 7231 424021 401 Fax:		iii) Annex IIIA (4):			
Email: daniel.hallbauer@c-hafner.de		iv) Annex IIIB (5):			
		v) EU list of wastes:			
		vi) National code:			
	vii) Other (please specify):				
11. Countries / State(s) concerned:		•			
Export / Dispatch	Tra	ansit		Import / Destination	
				ion is complete and correct to my best	
knowledge. I also certify that legally-bin case of waste referred to in Article		obligations have been	n entered	into with the consignee (not required	
Name:		Date: Signature:			
13. Signature upon receipt of the w	aste by the consignee:				
Name:	Date:	Signature:			
TO BE COMPLETE	D BY THE RECOVER	Y FACILITY OR	BY THE	LABORATORY:	
14. Shipment received at recovery facility: Quantity received: Tonnes (Mg):				Tonnes (Mg):	
or laboratory:				m³:	
Name:	Date:	Signature	e:		

Information accompanying shipments of green listed waste and destined for recovery of waste destined for laboratory analysis pursuant to Regulation (EC) No 1013/2006. For completing this document, see also the corresponding specific instructions as contained in Annex IC of Regulation (EC) No 1013/2006.

If more than 3 carriers, attach information as required in blocks 5 (a), (b), (c).

When the person who arranges the shipment is not the producer or collector, information about the producer or collector shall be provided.

The relevant code(s) as indicated in Annex IIIA to Regulation (EC) No 1013/2006 are to be used, as appropriate in sequence. Certain Basel entries such as B1100, B3010 and B3020 are restricted to particular waste streams only, as indicated in Annex IIIA.

The BEU codes listed in Annex IIIB to Regulation (EC) No 1013/2006 are to be used. (¹)