

COMBINED COMMERCIAL WASTE AGREEMENT & CONTROLLED WASTE TRANSFER NOTE
ENVIRONMENTAL PROTECTION ACT 1990

SECTION A - Collection Details

Account : QQ23146

Premise ID : 030542

Organisation name FLIXBOROUGH VILLAGE HALL
Collection address 14, HIGH STREET, FLIXBOROUGH, NORTH LINCOLNSHIRE
Postcode DN15 8RL SIC Code (2007) 88.99(Q)
Contact name Holly Scott Tel No. 07724611507 Mobile No.....
Contact e-mail address flixboroughparishclerk.com
Equipment provided 240L 1 360L 660L 1100L
Frequency of collection Fortnightly
Nature of business Village Hall
Collection point outside of hall
Date of Commencement . 01/04/2019 Expiry Date . 31/03/2020
Day of Collection WEDNESDAY

SECTION B - Invoice Details

(Please complete if different to Section A) Purchase Order No (If applicable):
Occupier/Business owner HOLLY SCOTT C/O FLIXBOROUGH VILLAGE HALL
Invoice address 13 OLD ROW
BURTON UPON STATHER
NORTH LINCOLNSHIRE
Postcode DN15 9DL
Contact name and telephone number
Invoice e-mail address.....

SECTION C - Description of the waste being removed

Waste description as per European Waste Catalogue (EWC).
EWC 20 03 01 Mixed General Waste (Non Hazardous)
What does the waste contain? Non Recyclable Mixed General Waste (Non-Hazardous)

SECTION D - Waste Collection & Disposal Authority

North Lincolnshire Council, Cottage Beck Road, Scunthorpe, North Lincolnshire, DN16 1TS

SECTION E - Address of Place of Transfer

NORTH LINCOLNSHIRE COUNCIL, PLOT 21, DISPOSAL SITE, WASTE TRANSFER STATION, MIDLAND ROAD, SCUNTHORPE, NORTH LINCOLNSHIRE, DN16 1DQ
Permit Number DB3905LR/A001 issued by the Environment Agency
Period of transfer for multiple consignments – from 01/04/2019 to 31/03/2020

SECTION F - Agreement

I hereby make application to North Lincolnshire Council for the removal of waste described in Section C from the collection address and agree to the terms and conditions and comply with the waste duty of care as defined in Section 34 of the Environmental Protection Act 1990.

By signing below, I confirm that I have fulfilled my duty to apply the waste hierarchy as required by Regulation 12 of the Waste (England and Wales) Regulations 2011.

I declare that all details given are correct.

Transferor signature [Signature]

Print name Holly Scott

Representing Flixborough village hall

Position in organisation:

Owner Partner Other clerk

Date 19/03/19

(For office use only: Ref No.....)

Transferee signature **J Coates**

Representing **North Lincolnshire Council**

Date 04/03/2019

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