

**Multiple Collection Consignment Note (The Waste (England and Wales) Regulations 2011)**



Job No.: <b>3916283</b> Page 1 of 1 Collection 1 of 7	Customer No: <b>193184</b> Customer Name: <b>Viamed Ltd</b>	Customer Order Number: Schemeholder:	Account Manager: <b>Tom Harper</b> Account Manager Tel: <b>01133854321</b>
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PART A Notification Details			PART B Waste Description	PART C Carrier's Certificate
1. Consignment note code: <b>VIAMED/16283</b>	2. The waste described is to be removed from: <b>Viamed Ltd - 15 Station Road, Cross Hills, Keighley, West Yorkshire, BD20 7DT</b>	3. The waste will be taken to: <b>WasteCare Ltd- Valley House/ Yorkshire - Valley House, Unit 4 Cross Green Ind Est., Knowsthorpe Lane, Leeds, West Yorkshire, LS9 0PH</b>	1. The process giving rise to the waste(s) was: <b>Manufacture of irradiation, electromedical and electrotherapeutic equipment</b> 2. The SIC (2007) for the process giving rise to the waste: <b>26600</b> 3. See B3 below	If a schedule of carriers is attached, tick here: <input type="checkbox"/> I certify that I today collected the consignment and that the details in Part A and Part B3 are correct and I have been advised of any specific handling requirements.

PART D Consignor's Certificate			PART E Consignee's Certificate	
I certify that the information in Part A, B and C has been completed and is correct, that the carrier is registered or exempt and was advised of the appropriate precautionary measures. All of the waste is packaged and labelled correctly and the carrier has been advised of any special handling requirements. 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 agree to the terms and conditions of WasteCare as published at <a href="http://waste.care/about/terms-conditions/">http://waste.care/about/terms-conditions/</a> on behalf of : WasteCare Ltd- Valley House/ Yorkshire, Valley House, Unit 4 Cross Green Ind Est., Knowsthorpe Lane, Leeds, West Yorkshire, LS9 0PH <b>Viamed Ltd - 15 Station Road, Cross Hills, Keighley, West Yorkshire, BD20 7DT</b>			1. Carrier name: <b>CHARLIE MCKAY</b>	3. Vehicle registration: <b>MD74 RXB</b>
1. Consignor Name (Block Capitals): <b>C GREEN</b>	Signature:		On behalf of: <b>WasteCare Ltd (Head office), Argent House, Tyler Close, Normanton, West Yorkshire, WF6 1RL</b>	Date: <b>06/02/2026</b>
Date: <b>06/02/2026</b>	Time: <b>07:42</b>		2. Carrier registration no./reason for exemption: <b>CBDU84992</b>	Signature: 
			Site start time: <b>07:34</b>	Site end time: <b>07:41</b>

PART B3 Description of the Waste														PART E: Consignee's certificate				
Description of material	Containers	Advised Qty	Act Qty	Net Qty (Kg)	Sample Req.	EWC Code	Component	% or mg/kg.	State	Haz Code(s)	UN No.	Proper Shipping Name	Class	PG	Tunnel Code	Net Qty (Kg)	R/D Code	Accept?
ShredCare Archive Box (Each)	0	40	48	720		15 01 01	None	<0%	Solid						-			
Electrical and Electronics Equipment (Pallet)	1	1	1	150		20 01 35	PBDE-POPs 0.1-23% & Sb2O3 0.1-10%	<23%	Solid	HP5, HP6, HP7, HP14, POP					-			

Services/Container Information		Delivered		Collected	
Code	Description	Advised Qty	Actual Qty	Advised Qty	Actual Qty
2444	Customers Own Pallet	0	0	1	1
2298	Wait & Load Collection per half hour	1		0	

**Collection Notes:** (Job 3916283)  
 Trip ID: 521686 Due: 03/02/2026 Prev: 06/02/2026  
 PHONE FIRST 24 hours Mon-Fri:09:00-17:00, Sat-Sun:Shut T.Lift.P.Truck,\*\*MUST TAKE PALLET TRUCK AND TAIL LIFT\*\*Cathy Green call before arriving. Put Viamed 15 Station road into the sat nav as postcode takes you to he wrong building.  
**Site Contact:** - Ext. / **Site Phone:** 01535 634542

1. I received and accepted this consignment as described in Part B3 at the address : WasteCare Ltd- Valley House/ Yorkshire, Valley House, Unit 4 Cross Green Ind Est., Knowsthorpe Lane, Leeds, West Yorkshire, LS9 0PH, Registration - CBDU84992	
On behalf of: <b>WasteCare Ltd- Valley House/ Yorkshire</b>	
Time:	Date:
Signature:	Name (Block Capitals):
3. Where the consignment was rejected, please provide details:	
I certify that Waste Management Permit/authorised exemption nos: <b>EPR/XP3892ZH</b>	2. Vehicle Registration: <b>MD74 RXB</b>
authorises the management of the waste described in B3 at the address given in A3 and that the total number of consignments forming the collection is: 7	