

Form A : HW Generator Registration Form

Section A1: Company Profile				
Type of application: <input type="checkbox"/> New <input type="checkbox"/> Amendment				
DENR ID:		Date Issued:		
Payment O.R. No.:				
Name of Establishment:				
Facility Address:				
Region:		Province Code:		
Tel.:	Fax:	E-mail:		
Managing Head:				
Pollution Control Officer (PCO):				
PCO Tel.:		PCO E-mail:		
PCO Accreditation No.:		Date of Accreditation:		
General Description of Business Operation:				
Nature of Business:				
PSIC Number:		Major Products:		
Date of Establishment:		SEC/DTI Registration No.:		
Total Number of Employees:				
ECC Number(s):				
Permit to Operate Number:			Date Issued:	
			Validity:	
Discharge Permit Number:			Date Issued:	
			Validity:	
Section A2: Hazardous Waste Profile				
HW Number	Name and Description	Estimated annual generation (MT)	Current/existing volume (MT)	Current waste Management Practices <i>(add another page if necessary)</i>
HW Nature <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Sludge <input type="checkbox"/> Gas		HW Cataloguing <input type="checkbox"/> Toxic <input type="checkbox"/> Corrosive <input type="checkbox"/> Reactive <input type="checkbox"/> Flammable		
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I certify that enclosed information is a true and accurate record as available. Name of Preparer: _____ Designation: _____ Signature: _____ Date: _____				

Section A2: Hazardous Waste Profile (additional page)

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HW Nature <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Sludge <input type="checkbox"/> Gas		HW Cataloguing <input type="checkbox"/> Toxic <input type="checkbox"/> Corrosive <input type="checkbox"/> Reactive <input type="checkbox"/> Flammable		
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