Hazardous Waste Classification Worksheet (Revised 31st August 2004)

Box No.	Information Required	Information	
	Company Details		
A	**Company Name**		
	Company Address		
	Date		
	IPC or Waste License Number (if applicable)		
	Contact Person		
	Waste Description		
	European Waste Catalogue/Hazardous Waste List		
B	**Possible EWC Codes**	___ ___ ___ ___ ___ ___	Asterisk Yes / No ☐ / ☐
		___ ___ ___ ___ ___ ___	☐ / ☐
		___ ___ ___ ___ ___ ___	☐ / ☐
		___ ___ ___ ___ ___ ___	☐ / ☐
		___ ___ ___ ___ ___ ___	☐ / ☐
		___ ___ ___ ___ ___ ___	☐ / ☐
C	**Six-Digit EWC Code**	___ ___ ___ ___ ___ ___	Asterisk Yes / No ☐ / ☐
D	**EWC Description**		
C1	***Mirror Entry Code (if applicable)***	___ ___ ___ ___ ___ ___	Asterisk Yes / No ☐ / ☐
D1	***Mirror Entry Description (if applicable)***		
E	**Is this waste classified as hazardous waste according to HWL?**	Mirror Entry ☐ No ☐ Yes ☐	