APPROVED BY OMB: NO. 3150-0164 EXPIRES: (MM/DD/YYYY) Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the FOIA, Privacy and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0164), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

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(MM-YYYY)	5. SHIPPER - NAME AND FACILITY				SHIPPER I.D. NUMBER		7. NRC FORM 540 AND NRC FORM 541 AND	<del></del>		MANIFEST NUMBER     (Use this number on all continuation pages)			
RADIOACTIVEWASTE MANIFEST							ı	DLLECTOR	NRC FORM 542 AND	542A	PAGE(S)		
SHIPPING PAPER				USER PERMIT NUMBER SHIPMENT NUMBER			PROCESSOR  GENERATOR TYPE (Specify)		ADDITIONAL INFORMATION PAGE		PAGE(S)		
EMERGENCY TELEPHONE NUMBER (Include Area Code)									CONSIGNEE - Name and Facility Address			CONTACT	
				CONTACT				ONE NUMBER	-				
ORGANIZATION							(Include Area Code)					TELEPHONE NUMBER (Inc	clude Area Code)
			6. CARRIER - Name and Address				EPA I.D. NUMBER		4				
2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? 3. TOTAL NUMBER OF				1					SIGNATURE - Authorized consignee acknowledging waste receipt			DATE	
YES NO PACKAGES IDENTIFIED ON THIS MANIFEST							SHIPPING DATE		40. OF DETICATION				
4 DOES ED A DESULATED		CONTACT				TELEPHONE NUMBER		10. CERTIFICATION  This is to certify that the herein-named materials are acceptable for disposal, are properly classified,					
4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY  YES								rea Code)	described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the Commission.				
THIS SHIPMENT? If "Yes," provide Manifest Number  NO			SIGNATURE - Authorized carrier acknowledging waste receipt				DATE				TITLE		DATE
ii 166, provide maimeer (tamber	1												
11. U. S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional information)  12. DOT LAE "RADIOAC"		12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	- AND FORM	15.	INDIVIDUAL RADIONUCL		LIDES	16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE	
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												+	
													<u> </u>
FOR CONSIGNEE USE ONLY		-											