PROVINCIAL MANIFEST EXAMPLE FORM No. XXXXXXXX

A) GENERATOR (CONSIGNOR)

COMPANY NAME: GENERATOR COMPANY NAME

OPERATOR CODE (GENERATOR): XXXX (CODE ASSIGNED BY REGULATORS)

ADDRESS: COMPANY ADDRESS | **CITY:** CALGARY | **PROVINCE:** AB | **POSTAL CODE:** XXX XXX

SOURCE SITE LOCATION: 100/00-00-000-00W4/00 (REFERENCE DOWNHOLE UWI OR SURFACE LOCATION ASSOCIATED WITH WASTE)

LICENCE TYPE (W.P.F.) & LICENCE NUMBER: License #0123456 (LICENSE # ASSOCIATED WITH LOCATION ABOVE)

INTENDED RECEIVER: INTENDED RECEIVER COMPANY & FACILITY NAME

CITY: CALGARY | PROV.: ALBERTA

RECEIVING SITE LOCATION: SITE ADDRESS OR FACILITY LOCATION

COMMENTS:
WASH WATER WITH HYDROCARBONS , TICKET #A012345
GEL/CHEM DRILLING MUD, TICKET #B678910

(INCLUDE COMPANY SPECIFIC WASTE TRACKING REQUIREMENTS HERE SUCH AS CORRESPONDING TRUCK TICKET NUMBERS IF APPLICABLE. IN THE CASE OF SHIPPING TDG REGULATED WASTE THE COMMENTS WILL PROVIDE MORE DETAIL THAN THE PROPER SHIPPING NAME MAY PROVIDE.)

B) TRANSPORTER (CARRIER)

COMPANY NAME: TRANSPORT COMPANY NAME | CITY: CALGARY | PROV.: AB

ADDRESS: COMPANY ADDRESS (HEAD OFFICE OR FIELD OFFICE) | POSTAL CODE: XXX XXX

DATE: MAY 1, 2020 | UNIT NO.: XX | TELEPHONE: XXX-XXX-1234 | FAX: XXX-XXX-1234

Certification – I declare that I have received wastes / goods as offered by the Generator in Part A for delivery to the intended Receiver and that the information contained in the Part B is correct and complete.

NAME: (PRINT) DRIVERS NAME | SIGNATURE: DRIVER'S SIGNATURE

C) RECEIVER (CONSIGNEE): (FILLED IN BY RECEIVER)

COMPANY NAME: RECEIVER COMPANY NAME | CITY: EDMONTON | PROV.: AB

ADDRESS: RECEIVER COMPANY ADDRESS (FOR GIVEN FACILITY) | POSTAL CODE: XXX XXX

RECEIVING SITE LOCATION: 00-00-000-00 W4M (EITHER LOCATION OR FACILITY NAME) | OPERATOR CODE/ BA CODE: XXXX (CODE ASSIGNED BY REGULATORS)

UN NUMBER	PROPER SHIPPING NAME (TECHNICAL NAME)	PRIMARY CLASS	SUB CLASS	PACKING GROUP	QUANTITY SHIPPED (KG, L, M³)	WASTE CODE	D(DOW) OR N(NON-DOW)	PACKAGING No.	PACKAGING CODE	HANDLING CODE	QUANTITY RECEIVED		OIL %	WATER %	SOLID %	HANDLING CODE	TRANS. DECON
1267	PETROLEUM CRUDE OIL	3	N/A	III	15 M3	WSHWTR	D	N/A	N/A	07	15 M3		80	15	5	07	
N/A	NOT TDG REGULATED (GEL/CHEM DRILLING WASTE)	N/A	N/A	N/A	10 M3	DRWSGC	N	N/A	N/A	07	10 M3		0	95	5	07	
DESCRIPTION (E.G.: NON-TDG GOODS OR WASTE):			PACKAGES		WEIGHT												

☐ RESIDUE – LAST CONTAINED ☐ TOXIC BY INHALATION

DATE SHIPPED: MAY 1, 2020 | TIME SHIPPED: 9:34 AM

IF HANDLING CODE '01','02', OR '21' SPECIFY:

I hereby declare that the contents of the consignment are fully and accurately described above by the proper shipping name, are properly classified and packaged, have dangerous goods safety marks properly affixed or displayed on them, and are in all respects in proper condition for transport according to the *Transportation of Dangerous Goods Regulations*.

NAME (PRINT) : GENERATOR NAME | SIGNATURE: GENERATOR SIGNATURE

24-Hour Number: 1-800-XXX-1234

DATE RECEIVED: MAY 2, 2020 | TIME RECEIVED: 12:52 PM

IDENTIFY DISCREPANCIES BETWEEN WASTE/GOODS RECEIVED AND DETAILS LISTED IN PART A IN THE COMMENTS SECTION:

NAME OF AUTHORIZED PERSON (PRINT): RECEIVER CONTACT SIGN-OFF

TELEPHONE: XXX-XXX-1234

SIGNATURE:

FOR NON-TRANSPORTATION EMERGENCIES CONTACT ABC OIL & GAS (555) 456-7100

(ONLY IF APPLICABLE) ERAP REFERENCE #_____ERAP TELEPHONE#_____

SAMPLE (DO NOT COPY)

PRESS FIRMLY AND PRINT CLEARLY

DISTRIBUTION: WHITE – GENERATOR (VIA RECEIVER), YELLOW – RECEIVER, PINK – TRANSPORTER, BLUE - GENERATOR