

|   |  |   |  |   |  |   |  |  |  |  |  |                   |  |   |  |                                      |  |
|---|--|---|--|---|--|---|--|--|--|--|--|-------------------|--|---|--|--------------------------------------|--|
| <b>NRC FORM 540</b><br>(8-2010)   |  | <b>U.S. NUCLEAR REGULATORY COMMISSION</b>                         |  | 5. SHIPPER - NAME AND FACILITY<br><br>USER PERMIT NUMBER _____ SHIPMENT NUMBER _____<br><br>CONTACT _____ |  | SHIPPER I.D. NUMBER _____<br><br><input type="checkbox"/> COLLECTOR<br><input type="checkbox"/> PROCESSOR<br><input type="checkbox"/> GENERATOR TYPE<br>(Specify) _____ |  | 7. NRC FORM 540 AND 540A PAGE 1 OF _____ PAGE(S)<br>NRC FORM 541 AND 541A _____ PAGE(S)<br>NRC FORM 542 AND 542A _____ PAGE(S)<br>ADDITIONAL INFORMATION _____ PAGE(S) |  | 8. MANIFEST NUMBER<br>(Use this number on all continuation pages) _____  |  |                   |  |   |  |                                      |  |
| <b>UNIFORM LOW-LEVEL RADIOACTIVE<br/>                 WASTE MANIFEST<br/>                 SHIPPING PAPER</b>                                      |  |   |  | 1. EMERGENCY TELEPHONE NUMBER (Include Area Code) _____<br><br>ORGANIZATION _____                         |  | 6. CARRIER - Name and Address _____<br><br>CONTACT _____  |  | 9. CONSIGNEE - Name and Facility Address _____<br><br>CONTACT _____<br>TELEPHONE NUMBER (Include Area Code) _____  |  | SIGNATURE - Authorized consignee acknowledging waste receipt _____ DATE _____  |  |                   |  |   |  |                                      |  |
| 2. IS THIS AN "EXCLUSIVE USE" SHIPMENT?<br><input type="checkbox"/> YES<br><input type="checkbox"/> NO  |  | 3. TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST<br>=====> |  | EPA MANIFEST NUMBER _____   |  | 6. CARRIER - Name and Address _____<br><br>CONTACT _____  |  | EPA I.D. NUMBER _____<br><br>SHIPPING DATE _____   |  | 10. CERTIFICATION<br><br>This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and disposal as described in accordance with the applicable requirements of 10 CFR Parts 20 and 61, or equivalent state regulations. |  |                   |  |   |  |                                      |  |
| 4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY THIS SHIPMENT?<br>If "Yes," provide Manifest Number                                    |  | YES <input type="checkbox"/><br>NO <input type="checkbox"/>       |  | EPA MANIFEST NUMBER _____   |  | CONTACT _____   |  | TELEPHONE NUMBER (Include Area Code) _____   |  | DATE _____   |  |                   |  |   |  |                                      |  |
| 11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION<br>(Including proper shipping name, hazard class, UN ID number, and any additional information) |  | 12. DOT LABEL "RADIOACTIVE"                                       |  | 13. TRANSPORT INDEX   |  | 14. PHYSICAL AND CHEMICAL FORM  |  | 15. INDIVIDUAL RADIONUCLIDES   |  | 16. TOTAL PACKAGE ACTIVITY IN SI UNITS   |  | 17. LSA/SCO CLASS |  | 18. TOTAL WEIGHT OR VOLUME<br>(Use appropriate units) |  | 19. IDENTIFICATION NUMBER OF PACKAGE |  |
| FOR CONSIGNEE USE ONLY  |  |   |  |   |  |   |  |  |  |  |  |                   |  |   |  |                                      |  |