



The personal information contained on this form is collected under the authority of section 26(c) of the Freedom of Information and Protection of Privacy Act and will be used for the purpose of administering the asbestos disposal program at the Campbell River Waste Management Center. Your information may be shared with a third party (Ministry of Environment) only as necessary for the purpose of providing statistical disposal information. Inquiries about the collection, use and disclosure of this information can be made to the Comox Strathcona Waste Management department located at 770 Harmston Ave, Courtenay, BC V9N 0G8 250-334-6016 or by email at <a href="mailto:cswm@comoxvalleyrd.ca">cswm@comoxvalleyrd.ca</a>.

All Asbestos Containing Materials (ACM) must be <b>double bagged as per the instructions</b> for			
bagging ACM. Asbestos waste is accepted by appointment only at the Campbell River			
Waste Management Center (CRWMC) at 6700 Argonaut Rd when:			
a) You have <b>lab results</b> confirming the material contains asbestos; and			
b) You are a resident and your load is <b>less than 9 bags</b> .			
Resident Name:			
Number of Bags:			
ACM Removal Site:	Stree	Street Address:	
	City:		
Contact Email or Phone	):		
Analytical Test Results Attached: Yes No		Yes No	
*Test results must be dated within 90 days or otherwise approved by a manager. There are			
no time restrictions for full hazardous material surveys.			
Appointment Date Requested:   Month:		Month:	Day:
e.g. February 12			
*All-day appointments are available Monday to Friday, 8:30am to 4:30pm.			
Paperwork must be approved prior to receiving a disposal date and prior to arriving at			
the CRWMC. Evaluation of your application may take up to <b>two business days</b> . Please submit			
forms and test results to <a href="mailto:cswm@comoxvalleyrd.ca">cswm@comoxvalleyrd.ca</a> . Please contact us via email or call 250-334-			
6016 for further information. Please bring approved form and test results with you.			
Signature:			Date:
CSWM Office Use Only			Scale Attendant Use Only
Date Received:			Disposal Date:
CRWMC Advised:	Staff Initia	als:	Ticket #:
Applicant advised of decision and informed			Weight:
to bring hard copy of docs to CRWMC: $\square$			
Appointment Date:			Attendant Initials: