

# HAZARDOUS WASTE RESPONSE FORM (England)

PLEASE READ NOTES OVERLEAF BEFORE COMPLETING THIS FORM

|                    |  |  |
|--------------------|--|--|
| Organisation Name: | - Account code (or)<br>- Agreement number if known (or)<br>- Citron Hygiene representatives name |  |
| Site Address:      |  |  |
|                    | Postcode:  |  |

Site Contact Name and Details (This should be a person who is based at the premises concerned)

|         |             |            |
|---------|-------------|------------|
| Title:  | First Name: | Last Name: |
| Phone:  |             |            |
| E-mail: |             |            |

|  |   |
|--|---|
| Type of Business (e.g., Dentist, Medical Practice, Nursing Home, Leisure Centre, Primary School etc.) PLEASE STATE BELOW (this is essential if SIC (2007) Code is not known) | Business SIC Code (2007 Version) if known |
|  |   |

PLEASE COMPLETE **ONE** OF SECTIONS A OR B WITH CUSTOMER DECLARATION IN BOTH CASES

|   |
|---|
| <b>A Is the waste from a Non-healthcare Activity?</b>   |
| I confirm all the waste Citron Hygiene collects is from a non-healthcare activity and therefore non-hazardous, Consignment Notes don't apply. (Please note <u>Cytotoxic/static &amp; Dental waste is always hazardous</u> ) |
| (please tick to confirm) <input type="checkbox"/> and go to Customer Declaration <b>(NOTE: NON-HAZARDOUS WASTE RESPONSE FORM IS REQUIRED)</b>   |

|  |  |  |   |   |
|--|--|--|---|---|
| <b>B Is the waste from a Healthcare Activity?</b>  |  |  |   |   |
| The waste indicated below is from a healthcare Activity, therefore hazardous & will receive Consignment Notes for every collection at £10 each. (Please note <u>Cytotoxic/static &amp; Dental waste are always hazardous</u> )   |  |  |   |   |
| <i>IMPORTANT NOTE: producers of healthcare and related wastes are required to complete a pre-acceptance audit before waste can be accepted. Customers should refer to the Citron Waste Pre-acceptance Audit Information Sheet for further details which can be obtained by e-mailing <a href="mailto:wasteaudits@citronhygiene.com">wasteaudits@citronhygiene.com</a>.</i>   |  |  |   |   |
| <table> <tr> <td> <b>Soft Clinical Waste</b><br/>e.g. clinical waste sacks, clinical waste units<br/> <input type="checkbox"/> </td> <td> <b>Hard Clinical Waste</b><br/>e.g. sharps (including pharmini-sharps), other hard clinical items<br/> <input type="checkbox"/> </td> <td> <b>Cytotoxic/Cytostatic waste</b><br/>e.g. certain hazardous medicines<br/> <input type="checkbox"/> </td> <td> <b>Dental Waste</b><br/>e.g. amalgam, amalgam capsules, x-ray fluids<br/> <input type="checkbox"/> </td> </tr> </table> | <b>Soft Clinical Waste</b><br>e.g. clinical waste sacks, clinical waste units<br><input type="checkbox"/>                    | <b>Hard Clinical Waste</b><br>e.g. sharps (including pharmini-sharps), other hard clinical items<br><input type="checkbox"/> | <b>Cytotoxic/Cytostatic waste</b><br>e.g. certain hazardous medicines<br><input type="checkbox"/> | <b>Dental Waste</b><br>e.g. amalgam, amalgam capsules, x-ray fluids<br><input type="checkbox"/> |
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|   |            |       |
|---|------------|-------|
| <b>Customer Declaration (Please print name, sign and date in all cases)</b> |            |       |
| Name:   | Signature: | Date: |

Please return the completed form to: Citron Hygiene Limited, Brunel House, 1<sup>st</sup> Floor, 9 Penrod Way, Heysham, LA3 2UZ or email to: [hazardous@citronhygiene.com](mailto:hazardous@citronhygiene.com)

Certain clinical and dental wastes are affected by **The Hazardous Waste Regulations 2005**. The responsibility for determining if your waste is hazardous rests with you as the Producer, although Citron Hygiene can assist and advise. So, we can accurately classify your waste please complete the form overleaf, guidance on completing the form is given below -

**Please follow the guidance notes below when completing the HWRP01v10/CHL form**

**Step 1:** Complete the customer details section, we can assist with allocating a 2007 SIC code if unknown but you must provide us if a description of the process giving rise to your waste i.e. dentist, medical practice, nursing home. If you are an existing customer your account code can be found on Citron invoices or on most correspondence letters, if you are a new customer please enter an agreement number if known or your Citron representative name.

**Please refer to the Citron Hazardous Waste Assessment guidance when completing the sections below.**

**Step 2:** Classifying your waste.

Complete **ONE** of sections **A** or **B**.

**Section A** applies if the waste is generated from a non-healthcare activity.

**Section B** applies if the waste is generated from a healthcare activity, please note cytotoxic/static medicines & dental waste (fixer/developer and amalgam waste) are always considered to be healthcare waste and always hazardous.

**A Is the waste from a Non-healthcare Activity?**

By ticking this section, you are confirming all the waste Citron Hygiene collects is from a non-healthcare activity & therefore non-hazardous. Consignment Notes don't apply, proceed directly to the Customer Declaration, **Step 3 (Note: as waste is non-hazardous, FORM NHWRP NON-HAZARDOUS WASTE FORM is then also required)**

**Please Note Cytotoxic/static Medicines & Dental Waste (fixer/developer and amalgam waste) are always considered to be a healthcare waste and therefore hazardous.** If you have either of these services, you must indicate them in section B and then proceed to **Step 3**.

**B Is the waste from a Healthcare Activity?**

By ticking a service in this section, you are confirming that waste is from a healthcare activity and therefore hazardous. Each time our driver attends to service any item ticked in this section they will leave a consignment note if waste is removed. **The charge for each hazardous collection is £10, invoiced monthly in arrears.**

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**Step 3: Please complete the Customer declaration in all cases.**

**Customer Declaration**

Customer needs to sign the declaration in all cases.