



Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC-012B

BILL OF LADING (pursuant to 310 CMR 40.0030)

Release Tracking Number

SUMMARY SHEET \_\_\_\_\_ OF \_\_\_\_\_

-

<b>I. LOAD INFORMATION:</b>	Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
<b>Load 1:</b>		
Date of Shipment:	Time of Shipment: <input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt:
Truck/Tractor Registration:	Trailer Registration (if any):	Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
		Load Size (cu. yds./tons):

<b>Load 2:</b>	Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment: <input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt:
Truck/Tractor Registration:	Trailer Registration (if any):	Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
		Load Size (cu. yds./tons):

<b>Load 3:</b>	Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment: <input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt:
Truck/Tractor Registration:	Trailer Registration (if any):	Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
		Load Size (cu. yds./tons):

<b>Load 4:</b>	Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment: <input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt:
Truck/Tractor Registration:	Trailer Registration (if any):	Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
		Load Size (cu. yds./tons):

<b>Load 5:</b>	Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment: <input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt:
Truck/Tractor Registration:	Trailer Registration (if any):	Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
		Load Size (cu. yds./tons):

<b>Load 6:</b>	Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment: <input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt:
Truck/Tractor Registration:	Trailer Registration (if any):	Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
		Load Size (cu. yds./tons):

<b>J. LOG SHEET VOLUME INFORMATION:</b>	Total Volume Recorded This Page (cu. yds./tons)
	Total Carried Forward (cu. yds./tons):
	Total Carried Forward and This Page (cu. yds./tons):