Docket # : _____

Date : _____

Collector : _____

UOMA #:_____

Processor : _____

UOMA #:_____

Collectors recycle docket

(**ONLY ONE** type of product per docket)

Select the product concerned below:

Used oils ☐, Used oil and glycol (antifreeze) containers ☐, Used filters ☐, Used gylcols (antifreezes) ☐, Used aerosol containers ☐

Date	Generator	City	Zone	Telephone	No[1]	Format[2]	Qty[3]	Signatory's name	Signature

1 : Corresponds to the number of collected bag/bin/drum

2 : Corresponds to the format (either bag, 205L drum, 240L bin or 360L bin)

3 : Corresponds to weight/volume of collection in L (liquid products) or KG (solid products)

Total _____