

SCHEDULE II

Annual report of the operator of a facility that treats biomedical waste off its generation site, a facility that stores biomedical waste off its generation site or of a system that transports biomedical waste

Section 15 of the Regulation respecting biomedical waste

REFERENCE YEAR :

ACTIVITIES

Transport Storage Treatment by disinfection Treatment by incineration

OPERATOR

Name

Address

City or town

Postal code

PERSON IN CHARGE

Surname

Given name

Title

Email address

Telephone number

Extension

Signature

Date

INFORMATION ON QUANTITIES RECEIVED AND SHIPPED OUT

Name and address of generator	Total quantity	Name and address of carrier <input type="checkbox"/> Same as above or:	Name and address of recipient <input type="checkbox"/> Same as above or:
	_____kg		
	_____kg		
	_____kg		
	_____kg		
	_____kg		
	_____kg		
	_____kg		
	_____kg		
	_____kg		
	_____kg		
	_____kg		