Third Party Signature Authorization For Special Waste Disposal



Date:	Profile Number:
This Authorization is only valid for 3 years from the above date.	For office use only.
To Whom It May Concern:	Name of Waste
Please be advised that the following company/individual has been appointed to work as our agent for purposes of managing waste materials that we may generate.	
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Name of Authorized Agent	Title
Name of Company	Telephone Number
The above broker/individual is authorized to act as our authorized agent for the following purposes:	
Complete and sign Special Waste Profile	
Complete and sign Special Waste Profile-Recertification	
Authorize amendments to Special Waste Profile	
Sign contracts to dispose and/or transport material	
Sign certifications necessary to comply with landfill requirements	
Sign manifests to initiate shipment to disposal facilities	
I hereby certify that I have the requisite authority to grant agency authority on the behalf of Company to the Authorized Agent identified on this Third Party Signature Authorization form ("Authorization"). Our Authorized Agent will notify Company prior to taking any of the actions authorized above and will provide Company with copies of any documents bearing Company's name. I understand that by attaching an electronic signature, I am signing this document and Company consents to complete this transaction and receive all related communications electronically, and agrees this document will be binding as though it had been physically signed. A printout of this Authorization may be accepted with the same authority as the original.	
Name of Company	Mailing Address
Generator Contact (Print Name)	Title
Signature	Telephone Number