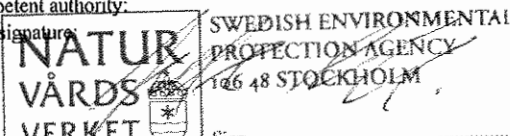



Notification document for transboundary movements/shipments of waste

1. Exporter - notifier Registration No: 988727679 Name: Norsk Gjenvinning Downstream As Avd Lysaker Address: Postboks 153, 0509 Oslo, Norge Contact person: Ann-Helen Fjæreide Tel: +47 41108183 Fax: E-mail: ann.helen.fjaereide@ngn.no		3. Notification No: NO 500526 Notification concerning A.(i) Individual shipment: <input type="checkbox"/> (ii) Multiple shipments: <input checked="" type="checkbox"/> B.(i) Disposal (1): <input type="checkbox"/> (ii) Recovery: <input checked="" type="checkbox"/> C. Pre-consented recovery facility (2;3) Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/>	
2. Importer - consignee Registration No: 5561461814 Name: E.ON Varne Sverige AB Address: Högbytorpsvägen 10, 197 93 Bro,, SE Contact person: Martin Lindström Tel: +46 725 52 5130 Fax: E-mail: martin.o.lindstrom@eon.se		4. Total intended number of shipments (4) 4000 5. Total intended quantity (4) Tonnes (Mg): 50000 m³:	
8. Intended carrier(s) Registration No: Name (7): See annex to box 8 Address: Contact person: Tel: Fax: E-mail: Means of transport (5): Road		6. Intended period of time for shipment(s) (4) First departure: 30.09.2021 Last departure: 29.09.2022 7. Packaging type(s) (5): 8 Special handling requirements (6): Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/> 11. Disposal / recovery operation(s) (2) D-code / R-code (5): R1 Technology employed (6): Incineration Reason for export (1;6): Favourable marked conditions and larger capacity	
9. Waste generator(s) - producer(s) (1;7;8) Registration No: Name: See annex to box 9 Address: Contact person: Tel: Fax: E-mail: Site and process of generation (6):		12. Designation and composition of the waste (6): Combustible Waste (
10. Disposal facility (2): <input type="checkbox"/> or recovery facility (2): <input checked="" type="checkbox"/> Registration No: 5561461814 Name: E.ON Varne Sverige AB Address: Högbytorpsvägen 10, 197 93 Bro Contact person: Martin Lindström Tel: +46 725 52 5130 Fax: E-mail: martin.o.lindstrom@eon.se Actual site of disposal/recovery: Högbytorpsvägen 10		13. Physical characteristics (5): Solid 14. Waste identification (fill in relevant codes) (i) Basel Annex VIII (or IX if applicable): Unlisted (ii) OECD code (if different from (i)): (iii) EC list of wastes: 191210,191212,200301 (iv) National code in country of export: (v) National code in country of import: (vi) Other (specify): (vii) Y-code: Y46 (viii) H-code (5): (ix) UN class (5): (x) UN Number: (xi) UN Shipping name: (xii) Custom code(s) (HS):	
15. (a) Countries/states concerned, (b) Code No. of competent authorities where applicable, (c) specific points of exit or entry (border crossing or port)			
State of export - dispatch		State(s) of transit (entry and exit)	
(a) Norge		Sverige	
(b) NO-001		SE-001	
(c) Ørje		Hån	
16. Customs offices of entry and/or exit and/or export (European Community) Entry: Hån Exit: Export:			
17. Exporter's - notifier's / generator's - producer's (1) declaration I certify that the information is complete and correct to my best knowledge. I also certify that legally enforceable written contractual obligations have been entered into and that any applicable insurance or other financial guarantee is or shall be in force covering the transboundary movement. Exporter's - notifier's name: Ann Helen Rathe Fjæreide Date: 7.7.2021 Signature: Norsk Gjenvinning Downstream Generator's - producer's name: Date: Signature:			
FOR USE BY COMPETENT AUTHORITIES			
19. Acknowledgement from the relevant competent authority of countries of import - destination / transit (1) / export - dispatch (9) Country: SE001 Notification received on: Acknowledgement sent on: 2021-08-19 Name of competent authority: Stamp and/or signature:		20. Written consent (1;8) to the movement provided by the competent authority of (country): NO Consent given on: 23-Aug-2021 Consent valid from: 30-Sep-2021 until: 29-Sep-2022 Specific conditions: No: <input checked="" type="checkbox"/> If Yes, see block 21 (6): <input type="checkbox"/> Name of competent authority: Stamp and/or signature:	
			
21. Specific conditions on consenting to the movement document or reasons for objecting			

- (1) Required by the Basel Convention
 (2) In the case of an R12/R13 or D13-D15 operation, also attach corresponding information on any subsequent R12/R13 or D13-D15 facilities and on the subsequent R1-R11 or D1-D12 facility(ies) when required
 (3) To be completed for movements within the OECD area and only if B(ii) applies
 (4) Attach detailed list if multiple shipments

- (5) See list of abbreviations and codes on the next page
 (6) Attach details if necessary
 (7) Attach list if more than one
 (8) If required by national legislation
 (9) If applicable under the OECD Decision